

Counselor & Worker Application

Nazarene Youth Camps: 2010

Senior High Camp

Grades 10-11-12

June 21-25, 2010

mail to:

Rev. John Keener
137 Mahan Lane
Follansbee
(304)670-0386

Junior High Camp

Grades 7-8-9

June 28-July 2, 2010

mail to:

Rev. Ollie Parsons
5106 MacCorkle Ave. S.E.
Charleston, WV 25304
(304)746-3979

Junior Camp

Grades 5-6

July 12-16, 2010

mail to:

Lisa Hobbs
616 Jameson Street
Parkersburg, WV 26101
(304)420-9022

Primary / Middler Camp

Grades 2-3-4

July 19-23, 2010

mail to:

Brenda Koontz
173 Legg Street
Sissonville, WV 25320
(304)984-1897; (304)741-4342

Send Worker Application to the director of the camp that you plan to attend.

Name of Volunteer: _____ Birth Date: _____ T-Shirt S M L XL XXL

Address: _____ City/ST/Zip: _____

Email (if available): _____ Home Phone: _____ Emergency: _____

Nazarene Church You Attend: _____ Pastor's Name: _____

How Long have you been a part of this church?: _____ Are you a member?: Y / N How Long?: _____

What positions have you held in the Church of the Nazarene?: (Sunday School, Caravan, Quizzing.....) _____

Do you abide by the rules of the Church of the Nazarene? Y / N

Will you abide by the rules of the camp that you will attend? Y / N

Have you completed a background check permission form? Y / N

Have you ever been charged with or convicted of sexual assault? Y / N

(Please make a copy of insurance card and attach the copy to this registration form)

Which Camp would you like to attend?

- _____ Primary / Middler Camp
- _____ Junior (Pre-Teen) Camp
- _____ Junior High Camp (**MUST BE 21**)
- _____ Senior High Camp (**MUST BE 21**)

In what area would you like to assist?

- _____ Counselor (in student dorms)
- _____ Sports Worker
- _____ Teacher
- _____ Night Watchman
- _____ Other _____

Volunteer's Signature: _____ Date: _____

(all applications to assist as a volunteer / worker at our youth and children's camps must include a Nazarene pastor's recommendation)

Pastor's Recommendation

I have read the application above and to the best of my knowledge, I can recommend this volunteer for work with the children and youth of our Nazarene Camp in Summersville, West Virginia.

Pastor's Signature: _____ (Pastor/Associate of the church listed below)

Church: _____ Church Phone: _____

Church of the Nazarene Request for Criminal Records Check

I hereby request **West Virginia Church of the Nazarene Youth Camp** to release any information which pertains to any record of convictions contained in its files or in any criminal file maintained on me whether local, state, or national. I hereby release the stated agency from any and all liability resulting from such disclosure.

Name (printed)_____.

Signature: _____.

Maiden name (if applicable)_____.

Print any and all aliases: _____.

Date of Birth:_____ Place of birth:_____.

Drivers License number:_____ State:_____.

Today's date:_____ SSN:_____.

Record sent to:

Name:_____.

Address:_____.

CHURCH Request for Criminal Record Check _____
Month/Year