## [Name] Youth Camp [Year]

[Starting YC Date] – [Ending YC Date] Adult Volunteer Registration

Isaiah 54:13...And thy children shall be taught of the Lord; and great shall be the peace of thy children.

By completing this form, you are agreeing to work in whatever capacity needed.

We desperately need people with a burden for the youth.

In order to have an organized camp, this form needs to be returned no later than [Deadline Date] along with the registration fee of [fee amount]

"FREE T-SHIRT" If the registration is received before [Deadline Date].

Name of Volunteer:	A	ge: (must be at least 20 years of age
A al al a a a .		Phone#:
City:		Zip Code:
Email:		HOLY GHOST? ☐ Yes ☐ No
where you are the most needed.		ou are flexible and allow us to place you
Which age group would you prefer t		•
You will be expected to help in any o ☐ Kitchen ☐ Do Do you have experience or training i	orm Parent	☐ Recreation ☐ Choir
	☐ First Aid ☐ Nursing ☐ L	·
Do you play any instruments? (Whic	· ·	
		t 🗆 S 🗆 M 🔲 L 🗀 XL 🗀 XXL 🗀 XXXL
Signature:		Date:
_		to keep the campers tuition cost down, stions, please give us a call at [phone#].
	Send Camp fees and forms	s to:
	[Name] Youth Camp	
	[Address]	
	[City, State Zip Code]	
F	Please make checks payable to	: [Name]
Home Church:	Pastor:	
Pastor's Phone#:		
Pastor's Signature		nto.

**ATTENTION: ALL ADULT VOLUNTEER APPLICATIONS MUST BE APPROVED BY [NAME]** 

Website – [Name of Camp Website]

\*\*\*Please Note\*\*\*

Feel free to make additional copies but please make color copies. THANKS!!