

GREEN VALLEY BIBLE CAMP

COUNSELOR OR VOLUNTEER INFORMATION SHEET – 2017 SESSIONS

Place an "X" by the session you will be counseling or volunteering.

Overnight Camp (\$120 fee; Age 11 by Oct. 1 thru 2017 High School graduates)											
	1	6/4	-	6/10	Todd Miller		6	7/9	-	7/15	Marshall Brown
	2	6/12	-	6/17	Danny Boggs		7	7/16	-	7/22	Bill McFarland
	3	6/18	-	6/24	Robb Hadley		8	7/23	-	7/29	Jon Hendrix & Bob Deffenbaugh
	4	6/25	-	7/1	Jason Sparks		9	7/30	-	8/5	Scott Ware
	5	7/2	-	7/8	Craig Frost						

Day Camp (\$60 fee; completed first grade thru 11 years old)											
	1	6/12	-	6/15	Dennis Coberley		3	7/17	-	7/20	Matt Wilson
	2	7/3	-	7/6	Craig Frost		4	7/31	-	8/3	Scott Ware

High School Retreat (\$40 fee; high school grades only)										
	1	8/18	-	8/20	Andy Brazle					

PERSONAL INFORMATION:

First & Last Name: _____ Email: _____

Address: _____ Gender: _____ Male _____ Female

City: _____ State _____ Zip: _____ DOB: ____/____/____

Home Phone: (____) _____ Cell Phone: (____) _____ Emergency Phone: (____) _____

Medical Insurance Company: _____ Policy#: _____ Group#: _____ ID#: _____

Medical Requirements/ Comments/Allergies: _____

INFORMATION ON CONGREGATION YOU ATTEND:

Name of Congregation: _____ Website: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Church Phone: (____) _____ - _____ Youth Minister or other Contact: _____

Contact Email Address: _____ Contact Phone: (____) _____ - _____

Authorization for Medical Attention: Signature below authorizes Green Valley Bible Camp to see that the applicant is taken to a doctor or hospital for emergency treatment in the event of an accident or injury while volunteering at camp. It is also agreed that Green Valley Bible Camp, its Board of Directors, Trustees, Officers or attendants will not be held legally responsible for such accident or injury.

Date

Counselor or Volunteer Signature