

MICHIGAN REGION MISSIONARY CHURCH

CAMP STAFF APPLICATION – Check all Camps that Apply:

Michigan Region Missionary Church
 1091 Creekwood Trail
 Burton, MI 48509
 Phone: 810-742-7462
 Fax: 810-742-8102
 office@mcmichigan.org



Brown City Youth Brown City Kidz Mancelona Youth

APPLICANT INFORMATION – PLEASE PRINT

Last Name				First			M.I.	Date			
Street Address							Apartment/Unit #				
City				State			ZIP				
Cell Phone				E-mail Address							
Birth Date				Drivers License #			Home Phone				
Emergency Contact							Phone				
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do we have your permission to do a criminal background check?				YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Will you agree to complete any necessary training?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Do you use alcohol or narcotics?			YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Have you ever been convicted by civil authorities?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain			Attach a clear photocopy of your driver's license for Central Registry check purposes.					

PREVIOUS CAMP COUNSELING EXPERIENCE & TRAINING OR EDUCATION RELATED TO POSITION APPLIED FOR:

Camp Name				Address							
From	To	Position Served									
Camp Name				Address							
From	To	Position Served									

REFERENCES

Please list three references. #1 should be your pastor. #'s 2 & 3 should be responsible adults other than family members.

# 1 - Pastor's Name				Pastor's Email							
Church Name				Phone							
Address											
# 2 Reference Name				Relationship							
Company				Phone							
Address				Email							
# 3 Reference Name				Relationship							
Company				Phone							
Address				Email							

CENTRAL REGISTRY CLEARANCE REQUEST – Must be complete by all applicants who will be 21 years old by camp time.

Last Name, First, Middle	Also Known As	Date of Birth	Social Security #	Signature

TESTIMONY - WRITE A BRIEF TESTIMONY OF YOUR RELATIONSHIP TO CHRIST AND HOW HE IS WORKING THROUGH YOUR LIFE. (PLEASE USE OTHER SIDE OR ATTACH A PAGE.) RETURN COMPLETED FORMS TO ADDRESS IN UPPER LEFT CORNER.