



MS District Apostolic Crusaders

Jesus Name Community Church  
P. O. Box 188  
Walnut, MS 38683  
662.223.4279 or 662.750.0217

## 2011 Counselor's Application & Release Form

Register one counselor per form. Please copy as many forms as you need.

Check the camp for which you would like to be a counselor:

Junior Camp (6-12) \_\_\_\_\_

Senior Camp (12 & up) \_\_\_\_\_

Counselor's Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Emergency/Work \_\_\_\_\_

Email address \_\_\_\_\_ @ \_\_\_\_\_

Circle One: Male or Female Allergies or special medications \_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

Pre-registration for counselors is required, deadline is May 15, 2011. Counselors must be willing to attend a pre-camp training and workshop.

All counselors must be approved by Camp Yadah staff.

Minimum age for Camp Counselors is 21 years. Minimum age for Jr-Counselors is 15 years.

No registration fee for counselors! Must be willing to work.

Camp Yadah insurance for counselors begins where yours terminates. In the event that you have no other insurance, the camp insurance will provide coverage up to policy limits subject to policy provisions.

Church Name \_\_\_\_\_ Pastor \_\_\_\_\_

Church Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Pastor's signature for recommendation \_\_\_\_\_

Please reserve my *Camp Yadah T-shirt* for \$15.00

Adult Small \_\_\_\_\_ Adult Med \_\_\_\_\_ Large Adult \_\_\_\_\_ X-Large Adult \_\_\_\_\_

Other (if available) \_\_\_\_\_

For more information contact: [www.campyadah.com](http://www.campyadah.com)

For office use only.

Pastor confirmed \_\_\_\_\_

T-shirt paid \_\_\_\_\_

Check # \_\_\_\_\_