Application Health Form Interview Date	_ Fin
Orient Date	_ Fin
References 1 Weeks:	2

"Blessed is the man [whose] delight is in the Law of the Lord. He will be like a tree firmly planted by streams of water" Ps 1:3



Recent Photo
Of
Applicant

~Camp New Life~

Welcome to the Volunteer Application Process for Camp New Life Summer 2011!

Working at Camp New Life might be QUITE DIFFERENT from any other experience or job you have ever had!

First of all, Camp New Life is all about JESUS CHRIST.

We exist to bring all who participate in a week of camp into a closer relationship with the God of the Bible, through His Son Jesus Christ, by the work of the Holy Spirit.

If you work with us at Camp New Life, that will have to be your #1 goal as well.

At Camp New Life, your work will be centered around RELATIONSHIPS.
....Your relationship to the ONLY TRUE and LIVING GOD
.....your relationship to campers
....your relationship to those in authority over you
.....your relationship with yourself.

As you begin to fill out the application, please remember:

You are about to fill out an **APPLICATION**, you are **NOT** about to take a **TEST!!!**.

So, what's the difference?

The difference is:

You will NOT be trying to figure out what the "Right" answer is, as you would on a Test. You will be trying to give the most "Honest and Accurate" answer you can come up with

You may encounter questions on this application that you have never thought about before. There is no need for concern. Just take a few moments to pause and reflect, and then write down what you truly think and feel about it, as best you can.

Remember, this is NOT a test!

Some of these questions have answers that could change as you grow, change, and mature mentally, spiritually, physically, socially.

Perhaps next month or next year your answer to some particular questions will not be the same as they are today. The application will give us an idea of who you are 'now', & how you might fit in with a particular week at Camp New Life this summer for a particular week or weeks

Thank you for considering participating in building the Kingdom of Jesus Christ in the hearts and lives of all who participate in Camp New Life Summer 2011!

ONE VISION, ONE PURPOSE

Camp New Life's Vision:

Camp New Life, established in 1998, is the main outreach of New Life Ministries of Jackson, Inc., which itself has been ministering to urban youth and their families in Jackson, MS since 1981.

Camp New Life exists to provide a secure, natural, and enriched environment which promotes and honors Jesus Christ, for urban youth from the greater Jackson, MS area whose full maturation, either mentally, physically, spiritually, or emotionally, is being jeopardized by various factors in their lives.

At Camp New Life these youth are provided an opportunity to slow down their lives, enjoy country life, and focus on the eternal truths of God's Word, and their relationship to Him through Jesus Christ, through the enabling of the Holy Spirit. Camp New Life is used both as a summer camp and a retreat center throughout the year.

Camp New Life's Purpose:

To glorify the Triune God of Scripture by mentoring urban youth whose full capacities are jeopardized by their environments, through Christ-centered education, small group activities promoting personal growth, Christ-centered camping experiences, and mercy ministries to family units in crisis.

- VISION: To bring revival to Jackson by reaching each young person & his or her family for Jesus Christ in our target area.
- MISSION: To mentor & disciple at-risk youth & their families to walk a life of faith.
- STRATEGY: To establish and nurture lasting relationships with families through small groups, recreation, summer camping, mercy ministries, and the arts.

Your Mission:

Everyone who works at Camp New Life, from Executive Director to part-time volunteer, must agree to work towards fulfilling the Vision and Purpose of Camp New Life to the best of his/her ability.

Your time at Camp New Life will probably be filled with times that are new and fun, and experiences from which you will grow. But, your time at Camp New Life must mean more to you than simply having fun, experiencing something new, or even personal spiritual/emotional/mental/physical growth. All those are good secondary benefits.

Primarily, you must come with a desire to

- 1. Bring glory to the Lord Jesus Christ in every thing you say and do
- 2. Aid the campers in their spiritual, earthly walk with the Lord Jesus Christ, by your example, your help, and your relationship to them.

In order to do these things, you must be living a life of following Jesus Christ yourself. No one lives a sinless life. But you must be living a life which evidences a desire to depart from sin and to live for the God of the Bible through a life in Christ with the help of the Holy Spirit.

Not everyone makes relationships with others in the same way. You may be a very outgoing, bubbly, life-or-the-party sort, or you might be the quiet one-on-one type, or any combination of many types. Camp New Life is NOT looking for one particular personality type.

We are simply looking for volunteers who

- 1. obviously are following Christ
- 2. are willing to work cheerfully and enthusiastically under authority to do whatever is asked to fulfill Camp New Life vision and purpose.

You have the opportunity to affect and change the life of another person for the Kingdom of Christ possibly drastically and radically, or maybe in a small way. You have the ability to help another person experience what it means to be loved, to acquire a new skill, to be hopeful about life in this world, to turn from temptation.

You may experience intense emotions of joy or sorrow. If you give your all for Christ while you are at Camp New Life, you will change the lives of those around you, and you will be changed!

____ I have read this "One Vision and One Purpose" page of the Camp New Life Volunteer Application form.



601.847.5433, 601.613.6506 140 New Life Drive, Braxton, MS 39044

Volunteer Application

GENERAL/FAMILY		Date <u>/ /</u>		
Name			(I like to be called:)
MaleFemale	Date of birth			
Home address:			Phone	
City	State	Zıp	Phone	
_ man addi 633 (most	. uscu)		s, etc.) (a confirmed friend request from N	
			np)	
Parent/Guardian vou	live with			
Address				
	h:			
Phone # for each				
Church you attend			How often?	
What is your involven	nent at this church?	. , , , , , , , , , , , , , , , , , , ,		
Name of school		Gra	de/Year in school	
Hobbies/interests				
Have you been a cou	nselor at CNL before?	_ If so, whic	n summers?	
1. I have been conv 2. I have been adju children	victed of a crime.	es or damage	ve further information during interv s involving sexual or physical abus ne.	•
SPIRITUAL 1. Do you consider yo	ourself to be a Christian? _	How do yo	u know? (You may give testimony.)
2. Can people get to h	heaven or know God if the	y are not Chri	out becoming a Christian?stians?	
16 . 1				
3. How important is re	eading or studying the Bible	e alone, or pra	aying alone?	
4. How important is w Why is it important	orshipping with other Christor why not?	stians?		
	& encourages campers and to do this at some point		teers to hear how others became (Christians.

~Camp New Life~ Volunteer Application

SOCIAL 1. Why do you want work at Camp New Life this summer?
2. If you have had any leadership experiences, please list them.
3. If you have been in any groups at church or school, please list them
4. What are you looking forward to most at Camp New Life?(<u>Circle</u> your favorite ones)
5. What are some things that might concern or worry you about coming to Camp New Life?
6. Feel free to list anything else about your life, past or present, or your dreams or goals for the future that you believe would help us to know you better, to work with you better, or to place you in your position at Camp New Life. (This is not required, but we wanted to give you the opportunity, just in case you do.)
7. In general, what are your strengths?
CAMP PARTICIPATION Please check the activities you prefer to work with. Then list any experience you have had in each area. (Experience is not necessarily required in order to participate in the activity)
By the signing of my name below, I affirm that I have completed this application truthfully. Signature Date
REFERENCES Please list two adults we can contact as references. (ex: pastor, coach, teacher, neighbor, employer, etc.) #1 should be able to tell us about your spiritual life and #2 about how well you work with others. #1.Name: (spiritual)
#1.Name: (spiritual) How do you know this person? Cell Number:Email address
#2.Name: (working with others)How do you know this person?
Cell Number:Email address

~Camp New Life~ Volunteer Application

EXPECTATIONS FOR VOLUNTEERS (Please check each statement	that you understand)
1) Seek to fulfill the Mission, Vision, & Purpose of Camp New L	
2) Cooperate willingly and cheerfully with camp leadership	
3) Make a sincere effort be considerate to others in my words a	and actions.
4) Seek to grow in Christ by participating in private and group d	levotional time in prayer and Bible reading
5) Make excellent use of my own time, appearance, health, as	well as the Camp New Life facilities.
6) Perform assignments responsibly with the welfare and care of	of campers as the foremost interest.
7) Seek to be present and useful at all times.	•
8) Set an excellent example to campers and others of what it m	neans to be a person who lives to honor
Jesus Christ.	
9) Seek to know and to adhere strictly to all the policies of Cam	ıp New Life.
UNAUTHORIZED ITEMS (Please check each statement that you under	rstand)
No New Life Volunteer is allowed to have particular items in his/her p	possession while working at Camp New Life.
1. Cell Phones, Electronic Devices, Valuables of any Kind, N	
Volunteers will not use or have in possession cell phones, electronic	
money while on duty. If you bring any of these with you, upon your a	
personal vehicle in which you came, or in the Camp New Life Home	
Session. Camp New Life is absolved from the responsibility of the sa	
on the properties of Camp New Life.	aloty of these items should you bring them
2. Weapons, Drugs, Alcohol, Tobacco	
Volunteers will not use nor have in their possession any sort of weap	ions drugs alcohol tobacco. Volunteers
will not bring weapons, drugs, alcohol, tobacco onto any of the prope	
confiscated by New Life Staff.	Thes of Camp New Life. Cach home will be
3. Reporting Possession of Unauthorized Items	
Volunteers must report to a Camp New Life staff member as soon as	s becoming aware of the unauthorized
presence and/or use of any of the following: (1) cell phones, electron	
drugs, alcohol, or tobacco.	ic devices, valuables, or (2) weapons,
4. Release from Duties	
Failure to abide by regulations of Unauthorized Items listed above wi	Il result in release from duties at Camp New
Life, as determined by the Camp New Life Staff.	ir result iir release from duties at Camp New
Life, as determined by the Gamp New Life Stant.	
By the signing of my name below, I affirm that I understand & ha	
Signature	Date
RELEASE OF IMAGE	
Camp New Life / New Life Ministries of Jackson, Inc. has permission	to use pictures videos recordinas or
images of (Name)'s activities Ministries on New Life's website, facebook, newsletters, or any other	nublication whether electronic or hardcony
Volunteer's Name Printed/Signed	
Guardian's (for minor) Signature	Bate
dualdian's (ioi minor) dignature	bate
RELEASE OF RESPONSIBILITY	
In the event of injury or illness, I will not hold liable Camp New Life / I	New Life Ministries of Jackson, Inc., any
board member, employee, staff, or anyone representing these entitie	s.
Volunteer's Name Printed/Signed	Date
Guardian's (for minor) Signature	Date
RELEASE from DUTIES If at any time I, (name)	
of lookeen loo believes I am no longer quitable for the program this	or Camp New Life / New Life Millistres
of Jackson, Inc. believes I am no longer suitable for the program, this	s relationship and its obligations may be
terminated by either party at any time.	Data
Volunteer's Name Printed/Signed	Date
COMPANY OF THE CONTROL OF THE CONTRO	



Volunteer/Camper Health Form (To be submitted by parent / legal guardian)

(Please PRINT)	
Volunteer's/Camper's Full Name	· · · · · · · · · · · · · · · · · · ·
AddressCity/State/Zip	
Date of Birth Age at time of camp // Male Female	
Parent/Guardian	Cell Phone ()
Parent/GuardianWork Phone ()	
If I am unavailable in an emergency, notify: NameRelation to Volu	inteer/Camper
Phone	
Volunteer's/Camper's Doctor & Office	Phone
I hereby affirm that my child is insured against injury and illness. Yes No Insurance Co Policy Number_	
MEDICAL INFORMATION: 1. Please explain any health conditions or special needs:	
Does your child have tubes in his/her ears? Yes [Which ear(s)? Date of last Tetanus shot:] No
4. List any allergies. How does s/he react to this allergen?	
List Medications needed & what each is for:	
** ALL medications must be <u>in their original containers</u> AND <u>must be given to the instructions</u> either when volunteer/camper are picked up by staff, or upon arriva NO VOUNTEER OR CAMPER MAY KEEP ANY MEDICATIONS IN THEIR CALTHEMSELVES IN ANY WAY.	l at Camp New Life.
6. Special Dietary Needs:	
7. Does this Volunteer/Camper wet the bed? This will be kept private & hand sheets if possible if this is the case.	dled discretely. Please send an extra set of
8. Other information we might need for the health of Volunteer/Camper	
PARENTAL CONSENT: (Please check each statement you understand, and siI hereby give permission for the administration of over-the-counter medicationI hereby give permission to the Camp New Life Director or Proxy to secure princluding but not limited to hospitalization, IV therapy, anesthesia, and surgerI also agree to assume obligation for any expenses incurredI hereby release Camp New Life and New Life Ministries of Jackson, Inc. from	n. roper medical treatment for my child ry. m all liability in the administration of any
medicine listed on this health form, as well as over-the-counter medications thaI believe my child is able to attend Camp New Life and participate in all activi	
Signature of Parent or Legal Guardian	Date

^{***}NOTE: If you are uncertain how to answer any question, please call Don (601) 955-4534 or Debi (601) 613-6506