Return Completed Application to:
Amazing Grace Baptist Camp
4214 Eisenhower Road, Ottawa, KS 66067

Email: office@agbcamp.org   Website: www.agbcamp.org   Phone: (785) 242-4086

But grow in grace, and in the knowledge of our Lord and Savior Jesus Christ.
To him be glory both now and for ever. Amen.
2 Peter 3:18
**General Information**

Application Date: ____________________  
First Name: _________________________    Last Name: ___________________________   Middle Initial: _______  
Date of Birth: _______________________    Age: _________________________________   Sex: M  /  F  
Social Security No.: ___________________   Email: ___________________________________________________  
Current Address: ___________________________   City, State: __________________________   Zip: __________  
Mobile Phone: ______________________    Home Phone: _________________________   T-Shirt Size: ________  
Name of School (if applicable): ___________________________________________________________________  
School Mail Box # (if applicable): _________   How would you describe your health? ___ Good   ___ Fair   ___ Poor  
Home Church Name: ___________________________________________________________________________  
City, State: _____________________________________   Pastor: _______________________________________  
Church Phone: _____________________________   Church Email: ______________________________________  
Parent’s Name(s): ______________________________________________________________________________  
Are your parents in favor of your becoming a staff member at AGBC? ___ Yes   ___ No  
Parent’s Signature (Required if applicant is under the age of 18) : _______________________________________

**Biographical Information**

Please circle “Y” for yes or “N” for no.

Do you have any training/certification in first aid or CPR?   Y / N  (If yes, date of last certificate issued: ______________  
Have you ever been convicted or pleaded guilty of a criminal offense against a person?   Y / N  
(If yes, please explain—If you wish to speak with a member of the professional camp staff, please indicate. A “yes” necessitates  
the staff check. ________________________________________________________________________________)  
Have you ever been accused of child abuse or a crime involving actual or attempted sexual molestation of a minor?   Y / N  
Have you used illegal drugs in the past 12 months?   Y / N  
Do you have any physical limitations you believe prevent you from doing certain types of activities?   Y / N  
(If yes, please explain: __________________________________________________________________________________ )  
I have dedicated my life for whatever the Lord wishes:   Y / N
Biographical Information (Continued)

I am regular in my personal devotions:  Y / N
I am willing to play a musical instrument at camp:  Y / N  (If yes, instrument(s): ________________________________)
I can sing solos or in a vocal group:  Y / N
I am willing for the camp to perform a background check on me:  Y / N  (Initials: _____________________________)

Parent’s Signature (if applicant is a minor): ____________________________________________________________________

In what areas would you like to see your life strengthened as a result of ministering at AGBC? ________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________

Please share your personal salvation testimony: ________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________
________________________________________________________________________________________________________

Indicate areas in which you are interested: (Put a “1” by your first choice down to a “3” for your last choice.)

__ Counselor (Jr. & Tn.)  __ Head Cook  __ Kitchen Staff
__ Hospitality  __ Grounds/Maintenance  __ Lifeguards
__ Program Assistant  __ Retail  __ Office Secretarial Staff
__ Nurse  __ Photographer

Previous Employment

Please list your last 2 employers starting with the most recent.

Employer: ___________________________________________________   Phone: ___________________________________
Supervisor: ___________________________________   Length of Employment: _____________________________________
Position / Responsibilities: _________________________________________________________________________________

Employer: ___________________________________________________   Phone: ___________________________________
Supervisor: ___________________________________   Length of Employment: _____________________________________
Position / Responsibilities: _________________________________________________________________________________

List Current Volunteer activities: ____________________________________________________________________________
________________________________________________________________________________________________________

Schedule

Staff training begins May 28, and the summer schedule runs through August 6. Summer staff are expected to commit for the whole summer season. Exceptions may be made by the camp director on a case by case basis. If you know in advance of any conflicts (work, school, weddings, family events, etc.), please list dates and reasons below: _____________________________
_______________________________________________________________________________________________________
_______________________________________________________________________________________________________
References

Please list 3 references: 1 Pastoral Reference, 1 Friend Reference, and 1 Family Reference

Name: _____________________________________   Relationship: ___________________________________
Address, City, State, Zip: ______________________________________________________________________
Phone Number: __________________________   Email: ____________________________________________

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Address, City, State, Zip: ______________________________________________________________________
Phone Number: __________________________   Email: ____________________________________________

Name: _____________________________________   Relationship: ___________________________________
Address, City, State, Zip: ______________________________________________________________________
Phone Number: __________________________   Email: ____________________________________________

Applicant’s Statement

The information contained in this application is current to the best of my knowledge. I authorize any references or camps listed in this application to give you any information, including opinions that they may have regarding my character and fitness for children or youth work. In consideration of the receipt and evaluation of this application by Amazing Grace Baptist Camp, I hereby release any individual, camp, house of worship, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individual, from any and all liability for damages of any kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply, with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me in this application.

Should my application be accepted, I agree to be bound by the Bylaws and Policies of Amazing Grace Baptist Camp and commit to the following camp staff member pledge:

As a member of the AGBC staff, by God’s help, I will: maintain private devotions, serve the campers of AGBC, share the gospel with campers, abide by the camp policies as outlined in training, promote harmony and not discord among the staff members, not make negative comments about other staff members, the camping program, or those in authority, submit to the authority of the established chain of command, put the camper’s welfare and enjoyment above my own personal comfort, and attend the offered training that pertains to my position on the staff. I have read this staff pledge and will endeavor to live up to its high standard.

I further state that I have carefully read the foregoing release, I know and understand the contents of it, and I sign the release as my own free act.

Applicant’s Signature: ________________________________
Date: ________________________________