

Potential Kansas Bible Camp Counselor,

Thank you for considering serving the Lord at the 2023 Kansas Bible Camp. The role of the Counselor carries great responsibilities and your desire to serve is not being taken lightly.

Each year, we are thankful for the youth and adult volunteers who come to serve at camp. We are excited about camp this year, and hope that you will be a part of God's work at camp. Kansas Bible Camp will be Monday, July 24th through Friday, July 28th. It will again be at the Westminster Woods Camp and Retreat Center in Fall River, Kansas, (about 70 miles east of Wichita). As in past years, there will be Kid's Camp for 3rd through 5th grade students, and Junior High Camp for 6th through 8th grade students.

Serving as part of a summer camp staff provides a unique opportunity for ministry. It is a week of hard work, fun and new experiences. Serving at camp requires a love for the Lord and a willingness to serve Him and others in various situations. We would like Christian men and women who are willing to give of themselves physically, spiritually and emotionally in order to encourage these awesome campers in their own walks with Jesus Christ.

To help prepare all of the camp staff, we will gather at Westminster Woods on the afternoon (between 3-4p) of Sunday, July 23rd for staff orientation, prayer, and fun. We trust that this time of preparation together will allow us to start the week of camp focused and ready to serve fully in the name of Jesus.

If the Lord is directing you to serve at Kansas Bible Camp, please fill out the attached application and the notarized medical waiver if you are under the age of 18. Minors also need to send a copy of your medical insurance card. **Please have these forms in the mail by Thursday, June 1st, 2023 to: Joshua Luevano, 8350 N Conant Ave, Kansas City, MO, 64152**

The Kansas Bible Camp Director will review these applications, and inform you of your role of service at camp. Priority will be given to applicants who are high school graduates in the selection of camp counselors; however, we will consider applications from mature high school students with a recommendation from a North American Baptist pastor, or a Kansas Bible Camp Board member. The cost of camp for camp staff members is paid for by the Kansas Fellowship of churches.

We are excited to see what God will do at Kansas Bible Camp this summer! For further information contact a member of the camp board, or Joshua Luevano at 816-215-1283 or pastorjosh@hfc-kc.org.

Thank you,
2023 Kansas Bible Camp Board

KANSAS BIBLE CAMP 2023 COUNSELOR APPLICATION

Personal Information

NAME: _____

Mailing Address: _____

Home Phone: _____

Cell Phone: _____

E-mail: _____

Age: _____ Date of Birth: _____ Gender M F

Home Church: _____

Address: _____

Phone Number: _____

What age group would you prefer working with?

Kid's Camp (3rd-5th) or Middle School (6th-8th grade)

T-shirt Size: S M L XL XXL 3XL

Personal Testimony

Returning Counselors- If you are a returning counselor, you will not be expected to fill out the information that was in previous years' forms. Instead, you will have a one on one zoom call with the camp director (Joshua Luevano). This is NOT an interview. This is just an opportunity to communicate before camp!

First time applicants—Please write your testimony of your life before Christ, how and when you accepted Jesus Christ as your Savior and Lord, and how your life has been since accepting Christ, on another sheet of paper and attach it to this application. You will also participate in the one on one zoom call with the director (Joshua Luevano), where you will be asked some basic questions about your faith and your walk with Christ!

Legal Violations

We are compelled to ask the following questions in order to protect the children and youth in our camp ministry:

- Have you ever been convicted or pled guilty to physical abuse, indecent exposure, child sexual abuse, incest or sexual molestation? YES NO
- Have you ever been accused of physical abuse, indecent exposure, child sexual abuse, incest or sexual molestation? YES NO

Applicant PRINT NAME

Date

Applicant SIGNATURE

Agreement and Signatures

COUNSELOR/ASSISTANT COUNSELOR DUTIES and EXPECTATIONS AT KANSAS BIBLE CAMP

As a camp counselor or assistant counselor, you will serve in a variety of roles. Please be flexible to serve where needed throughout the week. Your overarching responsibility is to oversee the cabin and interact with its members as their cabin counselor or assistant counselor. Please review the following list to familiarize yourself with the week's expectations.

A Counselor or Assistant Counselor at Kansas Bible Camp will be expected to:

- Turn in any medications, including over the counter medicines, to the camp nurse.
- Learn the names of your cabin members as soon as possible, and work on learning the names of campers within other cabins.
- Keep campers on schedule by getting them up and ensuring that they are ready for the day.
- Guide your campers to maintain the cabin in an organized manner. There will be daily cabin inspections.
- Monitor bathing/ hygiene habits of your cabin members.
- Guide your cabin members through the daily schedule, making sure that every cabin member arrives at all of the activities on time.
- Coach and participate with your team members during the recreation games so that everyone is participating and enthusiastic.
- Be present and interact with campers during meal times and free time.
- Maintain discipline within your cabin members throughout the activities and report concerns to the Camp Director.
- Have personal conversations with your cabin members to determine his/her relationship with Jesus Christ, and provide spiritual counseling.
- Lead your cabin members in the "Cabin Devotions and Discussions." Please maintain positive topics of discussion, without "ghost stories" or other inappropriate things.
- Supervise and remain in cabins after "lights out" so that campers remain in their own cabins and get adequate sleep.
- Do not participate in other improper activities with campers or others that will hurt their feelings or be demeaning to anyone involved.

You are expected to attend the staff orientation on the afternoon of Sunday, July 23rd and the morning of Monday, July 24th. You are also expected to attend staff prayer meetings on the mornings of camp. Additional staff meetings will be held as needed throughout the week of camp. You will assist with the camp registration process on the afternoon of Monday, July 24th. At Kansas Bible Camp, we require staff members to hold to and demonstrate biblical standards. It is our intention to communicate to the campers that their relationships with God, their parents and their church are the most important. By signing below, you are agreeing to the camp standards and guidelines, including our desire to consistently exhibit Jesus Christ to the campers. **Your Pastor's Signature is communicating to the camp director that this applicant displays the maturity of an expected counselor, and is thus signing as a recommendation to accept this applicant to our staff at KBC.**

Applicant's Signature: _____ Date: _____

Pastor's Signature: _____ Date: _____

Kansas Bible Camp Medical Information Form

Please turn this form in with your registration

EMERGENCY CONTACT INFORMATION:

Name: _____ Relationship: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____

Please list any special medical needs, concerns, or medications that you will require with you during your time at Camp:

If Counselor is a MINOR under the age of 18, please complete the following:

MINOR'S INFORMATION (please print):

Full Name of Parents or Guardians _____

Address: _____ City: _____ State: _____ Zip _____

Name of Minor _____ Gender: _____

Date of Birth: ____/____/____ Grade completed in Spring 2023: _____

(Some medical facilities may require a Social Security Number to provide treatment. We will contact you if we need this information)

Please initial for permission for your child.

My child may be given Acetaminophen for minor pain/headache: Yes or No

My child may be given Ibuprofen for minor pain/headache: Yes or No

MEDICAL HISTORY:

Have Minor (s) had all school-required vaccinations? Yes No

Date of last tetanus shot: _____

Do Minor(s) have a communicable disease or medical condition that may be a risk to others?

Yes or No

If yes, please describe:

Do Minor(s) have any drug allergies? Yes or No

If yes, please describe:

Please describe any special considerations regarding Minor(s) (medical conditions, food allergies, dietary restrictions, activity limitations, asthma, adhd, behavioral issues/concerns, etc.):

Notary: (EVERYONE MUST NOTARIZE)

Parent/Guardian Signature: _____

On the _____ day of _____, 20____, before me, _____, Notary Public,

Personally appeared _____, in the State of _____

and the county of _____. Notary stamp and signature:

Prescription Medication Form

If your youth does NOT take medications, you do not have to fill out this form!

Please send medication in original bottle.

Any and all medications including over the counter medications and supplements that your youth will be taking must be accurately described on this form.

Name of Minor: _____

Known allergies: _____

Parent/Guardian Name: _____ Cell Phone: _____

Medication(s) to be taken during event:

1) Name: _____ **Dosage:** _____

Circle time to be taken: Breakfast Lunch Dinner Evening Snack Bedtime As Needed

2) Name: _____ **Dosage:** _____

Circle time to be taken: Breakfast Lunch Dinner Evening Snack Bedtime As Needed

3) Name: _____ **Dosage:** _____

Circle time to be taken: Breakfast Lunch Dinner Evening Snack Bedtime As Needed

4) Name: _____ **Dosage:** _____

Circle time to be taken: Breakfast Lunch Dinner Evening Snack Bedtime As Needed

Health Insurance Information

Health Insurance Company: _____ Phone Number: _____

Policy Number: _____ Group Number: _____

Please attach a copy of your current medical insurance card.

I hereby give permission for this medical information to be shared on a need to know basis.

Parent or Guardian Signature _____ Date _____

Witness Signature _____ Date _____