

GROUP LEADER application for Mt. Zion Baptist Camps

Name: _____ Age: _____ Educational Level: _____

Mailing address: _____ City/Zip: _____

Cell Phone: _____ Please list number where you receive text messages.

Church Membership: _____

Email address: _____

BACKGROUND CHECKS ARE REQUIRED for Everyone over 18. Results will be sent to Mt. Zion Baptist Association. Cost is \$18.95, if you are able and would like to help cover this cost, please attach a check made out to Mt. Zion Association.

Mark the Camp you are asking to work with. Please complete a different application for each camp.

Girls, grades 4- 6 Boys, grades 4 - 6 Youth & JR High, grades 7-12

WALK-IN GROUP LEADERS ARE NOT ALLOWED. YOU MUST HAVE A BACKGROUND CHECK AND BE APPROVED BY THE CAMP DIRECTOR.

Girls - Tuesday, July 10 Youth - Tuesday, July 17 Boys - Tuesday, July 03

Group Leaders meeting will be announced closer to date of Camps. If you are selected please be prepared to attend this meeting.

Are you a Christian? _____ List the church activities that you take an active part in: _____

List the activities that you like best: _____

List Special talents: _____

Mark the activities listed below that you would be willing to lead or help with:

Crafts Music Bible Study Missions Nature Projects Recreation

Other (If other describe) _____

Mt. Zion T-Shirt (circle one) S M L XL XXL XXXL

PASTOR RECOMMENDATION: As this applicant's pastor I recommend this applicant's request to serve as a group leader in the camp indicated above. To the best of my knowledge this person is qualified to work with the age group indicated.

Signed _____

You MUST have your Pastor's recommendation to be considered.

Applicant's Signature: _____

YOU WILL BE NOTIFIED IF YOU ARE SELECTED TO SERVE AS A GROUP LEADER.

Please return this form to the Associational Office

2460 Sunny Meadow Dr

Jonesboro, AR 72404

Phone: 870-935-5134, billie@mtzba.com

