

SECTION 2 [ALL APPLICANTS]

PERSONAL:

Name and location of assembly you attend regularly : _____

Indicate how many weeks per month you attend each meeting. (0,1,2,3,4): [] The Lord's Supper [] Special Meetings
 [] Sunday Morning [] Sunday Evening [] Mid-Week Bible Study/ Prayer Meeting [] Youth Meetings

What role(s) do you take in your local fellowship? [] Sunday School Teacher [] Youth Leader [] Helper _____
 [] Service (Cleanup, Building/Grounds Maintenance) [] Publicly Participate in Worship [] Visitation/Tract Distribution
 [] Lead Singing / Play Instrument [] Public Prayer [] Lead Bible Study [] Speak at Youth Meetings [] _____

EDUCATION:

High School Student	Yes	No	Graduated	Yes	No
College Student	Yes	No	Graduated	Yes	No
College you plan to attend in the Fall _____					
Other Education: _____					

JOB STATUS:

Check one: Full Time Student [] Student, employed part time []
 Check one: Employed [] Unemployed []
 Most recent employer and position _____
 Address _____
 Supervisor's Name _____
 Work Phone Number _____

PREVIOUS EXPERIENCE:

Have you ever been a camper at Camp Horizon? [] Yes [] No When? _____
 Have you ever worked on staff at any Christian camp in the past? [] NO [] Camp Horizon [] Other Camp
 Other Camp Name: _____ Years Worked: _____ Supervisor: _____
 Describe your duties, responsibilities and overall experience at any Christian camp, or any other experience you may have related to the position you are applying for (i.e., nurse, cook, etc). **Please check all that apply.**

- [] COLLEGIAN [] ALL SUMMER STAFF [] NURSE [] DIRECTOR [] KITCHEN STAFF [] SPEAKER
 [] COOK [] ASST. COOK [] MAINTENANCE [] BOAT DRIVER [] CRAFT INSTRUCTOR
 [] COUNSELOR [] JUNIOR STAFF [] PROGRAM [] Office Helper [] Other _____

NOTES:

Do you have *experience* in any of the following? (Please mark each with a **T**, **L**, or **leave it blank**)

T: I can Teach this	L: I have done it & could Learn to teach this.	Blank: I have NO interest in teaching this.
[] Archery	[] Handicrafts	[] Soccer
Just for fun... [] Basketball	[] Music	[] Swimming
Please circle the [] Canoeing	[] Nature Craft / Hiking	[] Volleyball
activities you [] Drama	[] Riflery	[] Other _____
took as a camper [] Fishing	[] Sailing	[] Other _____
[] Games	[] Skiing	[] Other _____

List in order of preference the activities (from the list above) you feel qualified and would desire to teach this summer:

1. _____ 2. _____ 3. _____ 4. _____

Describe other special talent, skills, or abilities that you think could be used at camp and at what level (teaching ability). _____

List any recognized certifications you have (such as NRA, Red Cross, WSI, First Aid, CPR, Lifeguard Training, etc.). Please send copies of certifications (if available).

Do you play a musical instrument? [] YES Which one(s)? _____

Would you be willing to play at camp? Chapel? [] Yes [] No Special Music/Banquet? [] Yes [] No

Do you work well with children (ages 8-10)? [] Yes [] No {Junior Camp} For All Summer Staff this will

Do you work well with children (ages 11-13)? [] Yes [] No {Youth Camp} help us decide which weeks to

Do you work well with Teenagers (ages 14-17)? [] Yes [] No {Varsity Camp} have you counsel. Be honest!

EXPLAIN WHY YOU WANT TO SERVE AT CAMP HORIZON THIS SUMMER.

SECTION 3 [ALL APPLICANTS]

DOCTRINAL STATEMENT

- I BELIEVE
- That the Bible is the divinely inspired Word of God;
- In the Triune God - Father, Son and Holy Spirit;
- In the full deity and the full humanity of the Lord Jesus Christ;
- That because of the fall of man, the substitutionary death and bodily resurrection of the Lord Jesus Christ was both necessary and sufficient for the redemption of man;
- That when a person puts their faith in Jesus Christ, that Christian can never lose their salvation;
- That the Holy Spirit's work is that of convicting, regenerating, sanctifying, and indwelling of every believer;
- In the necessity of the new birth - that salvation is by faith in Jesus Christ alone;
- The importance of a life fully committed to the will of God;
- In the expectation of the personal return of the Lord Jesus Christ;
- That the "sign gifts" (Tongues/Healings) were for the foundation of the church and were temporary. These gifts were not and are not an indication of the filling or baptism of the Holy Spirit.

I fully accept and believe this doctrinal statement of Camp Horizon. [] Yes [] No (please explain)

CAMP HORIZON - STAFF - AND PARENT AGREEMENT:

(Must be signed by the applicant **and** the parent or legal guardian of all applicants under 18 years of age.)

- I understand that all staff members will be leaving the campground at least once per week on outings. Camp Horizon has permission of the staff member's parent/guardian to take the staff member on supervised trips off the Camp property (canoe trips, sailing trips, staff night out or other supervised outings). Permission to ride with in a non-Camp Horizon vehicle (a personal vehicle) with a driver that is not assigned that role by the director must be in writing. A faxed form or letter that is signed by the same person signing this form is acceptable. Email is not. Minors may drive their personal vehicles between Camp Horizon and home only. Special permission will be considered by written request of parent only.
- I understand that Camp Horizon endeavors to practice the highest in Christian principles on and off the campground.
- I realize that I represent not only Camp Horizon but also the Lord Jesus Christ.
- I understand that the use of all tobacco, alcoholic beverages, and drugs is strictly prohibited by Camp Horizon staff.
- I promise that if I am accepted to work at Camp Horizon, I will willingly follow the rules of Camp and the supervision of the Camp Director.
- I promise to work as a team member with my peers and do my part to help every team member succeed this summer.
- I understand that I will be expected to provide the name of a person from my home assembly that will serve as my **Accountability Contact**. This is the person, (in addition to my parents if I am under age 18), that the Camp Director will contact should disciplinary counsel or action be required.
- I understand that the failure to follow camp rules will result in progressive discipline that may lead to being sent home. I agree to make restitution where indicated by my actions (i.e. repair or pay for repairs to property).
- Most of all, I promise to do all things heartily as unto my Lord and Savior, Jesus Christ.
- I agree to a background check by the FDLE (all applicants) and for my local authorities (applicants over age 17) to release criminal records to: Steve Slusser - Director, Camp Horizon - Leesburg Florida.
- I certify before God that I am of good moral character and have not been convicted or are under investigation or prosecution for a crime or event involving - domestic violence, child abuse, sexual abuse, or controlled substances.
- I have read the waterskiing / tubing consent on the health form and give my permission (and/or accept the agreement) for this staff member to ski. [Otherwise, draw a line through that statement and initial to show NO PERMISSION.]

My Accountability Contact (should be one of your references)

Phone Number

Signature of Applicant.

Date

Signature of parent or guardian (only if the applicant is under age 18).

Date

NOTICE: Be sure to give an elder or leader of your local fellowship the "CONFIDENTIAL STAFF RECOMMENDATION" to complete and return to camp. They may choose to complete the online form at www.camphorizon.org.

Evangelistic Horizons Unlimited, Inc

Camp Horizon

7369 Sunnyside Drive
Leesburg, Florida 34748



Address Service Requested

SECTION 4

On the web? Please friend the Camp Director (and be linked to staff members past and present).

FaceBook: Mr.Steve

Xanga: steve_slusser

MySpace: camphorizon (real name Steve Slusser)

EVERYONE PLEASE ANSWER QUESTIONS ONE AND TWO (ON A SEPARATE PAPER)

ON A SEPARATE PIECE OF PAPER, ANSWER THE FOLLOWING QUESTIONS IN YOUR OWN WORDS TO THE BEST OF YOUR ABILITY.

- 1) How do you know for sure that YOU have eternal life? When & How did you come to faith in Christ?
- 2) What are your spiritual goals for the next year? What motivates you to serve at Camp Horizon this summer?

NEW APPLICANTS PLEASE ANSWER QUESTIONS THREE AND FOUR (ON A SEPARATE PAPER)

- 3) A camper says....
"I got saved at Vacation Bible School but I haven't been very good since. I think I lost it. Do I need to be saved again?"
- 4) Explain how to lead a child to faith in Christ. Keep it simple, basic, and use Scripture where appropriate.

Section 5 YOUR DREAM SUMMER (ye have not because ye ask not)

ROLES: Counselor, Kitchen Staff, Maintenance, Hospitality, or Instructor (teaching _____)

Week	DIRECTOR	SPEAKER	YOUR ROLE(s)	NOTES
Varsity One	Conrad Campbell	Keith Keyser		
Youth One	Rick Blount	Malcolm Skelton		
Junior One	Billy Skelton	Dave Bosworth		
Varsity Two	Calvin Fritchey	Thomas Wheeler		
Youth Two	Frankie Gomez	David Dunlap		
Junior Two	Bill Fisher	Buck Matthews		

We would like to make sure that most folks do not counsel two weeks in a row and that NOBODY counsels 3 weeks in a row. If you expect to teach a specific craft, you should include that information. Most collegians will serve one week in the kitchen. Some All-Summer Staff will serve two weeks in the kitchen.

This is your chance to make your wishes known. Please use it wisely. You may attach a note if desired.

For those serving on a weekly basis, this will help us to know your expectations (i.e. Counsel & Basketball).

NOTE: Your dream sheet should match your preferences on page 2.

[] Mark here for: SEE ATTACHED NOTE REGARDING PREFERENCES FOR SERVICE

Staff Health Information **FIRST NAME:** _____ **LAST NAME:** _____

Personal characteristics:

Height	Weight	Hair	Eyes	Race
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Allergies to medicines or foods: _____

Describe any special healthcare needs: _____

I am being treated for, or may have problems with (please circle all that apply & attach an explanation if needed):

Heart Tonsils Hay Fever Ears Hernia Sinuses Diabetes Skin Problems Asthma/Breathing [] - Other (explain)

[] **See attached notes / documents** **SPECIAL CARE:** []-Contacts []-Glasses []-Braces []-Retainer []-Other

All medications must be checked in with the Camp Nurse, who will administer the prescribed dose / frequency. You will receive a form to list medications and dosages. This is to be given to the nurse at registration with all medications in a zip-lock bag. **Prescription drugs must be in their original labeled containers.** Over the counter medications (vitamins, minerals, etc) must be **in their original bottle** with complete instructions for use. Asthmatic campers may keep their inhalers - you may choose to bring a backup inhaler to leave with the nurse. Topical creams, eye drops or ear drops may be kept in the cabin. **If you have a special need, please attach a note that explains this in detail.**

PARENT/STAFF HEALTHCARE AGREEMENT (READ CAREFULLY BEFORE YOU SIGN)

I give permission for the Health Counselor (RN, LPN, Medic) to administer any of the following over-the-counter medications or a generic equivalent (**except those I have put a line through**):

- For Pain / Fever:** Acetaminophen (Tylenol) Ibuprofen (Motrin) Aspirin
- Topical:** Antibiotic Ointment (Neosporin, Bacitracin, Polymixin) Benadryl Calamine
- Campho-phenique Benzocaine (tooth drops) Hydrocortisone Wax (for braces)
- Antihistamine:** Benadryl Triaminic Neosynephrine Afrin Dimetapp Sudafed
- Expectorant:** Robitussin Mucinex
- Eye Care:** Artificial Tears Wetting Drops Visine/Murine
- Gastrointestinal:** Emetrol Imodium Pepto-Bismol Antacids (i.e. Tums, Mylanta, or Maalox)
- Metamucil/Citrucel laxative / stool softener of choice
- Fungus:** Lotrimin tolnaftate clotrimazole
- Sore Throat:** Cloraseptic Zinc **Swimmer's Ear:** Swimmer's Ear Drops
- Lice:** "Rid" (Generic: Permethrin) *****Please check your camper for lice before arrival*****

Please attach copy of insurance card (both sides). The parent/guardian is responsible to provide adequate medical insurance and will be responsible for any and all medical bills incurred due to emergency care. A qualified nurse or paramedic on the campgrounds will provide First Aid, and if necessary, staff members will receive professional medical care at Leesburg Regional Medical Center, which has a fully staffed emergency room and an urgent care walk-in clinic. PARENTS WILL BE CALLED FOR APPROVAL if the staff member is under 18 or if they are included on their parent's health insurance.

The following is understood and agreed to by the staff member and their parent or guardian (if under age 18):

- The staff member applying to Camp Horizon is in good physical and emotional health and amenable to normal Camp authority and discipline.
- The parent/guardian signing below is in legal custody of the minor staff member and is legally responsible for payment of the fees or other healthcare expenses incurred by the staff member. Conditions of custody, if applicable, will be fully communicated to Camp Horizon.
- Camp Horizon is empowered to obtain emergency or urgent medical treatment if necessary. All expenses are the parent's (or adult staff's) responsibility.

WATER-SKI / TUBING CONSENT (Minors Only)

I/We, the parent or legal guardian of _____(name of staff under age 18) and the named staff member acknowledge that there are certain inherent risks associated with the sport of water-skiing and that we accept the consequences of those inherent risks. Further, we understand that the named minor must observe and obey the camp rules pertaining thereto and agree not to act in a reckless manner while participating. I/We give our consent for the named minor to participate in the water-ski program of Camp Horizon

- MY CHILD DOES HAVE PERMISSION TO WATERSKI --[_____]
- MY CHILD DOES NOT HAVE PERMISSION TO WATERSKI -----[_____]

Please initial only one of these lines.

Signature of Staff Member signifies agreement with the statements above.	Date	BOTH The Staff Member AND a Parent / Guardian MUST SIGN (if under age 18)
Signature of PARENT or GUARDIAN signifies agreement with the statements above.	Date	

ID CODE: Please provide a code for identification verification purposes so that we know it is you if we get a phone call.

Ski agreement is for the entire summer program including weeks of service on staff as well as camper weeks. Campers who serve on staff at any time during the summer remain under their staff agreement to follow the rules of Camp Horizon. You do **not** need to complete the camper health form in addition to this one.