

## LEADER Registration Form

### I. Personal Information

Name of Church: \_\_\_\_\_

Name of Leader: \_\_\_\_\_ -Age: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you a Christian?      Yes      No

\*On the back of this page please share your salvation testimony.

### II. Emergency Contact Information

(1) Name: \_\_\_\_\_

Relationship \_\_\_\_\_

Phone Number \_\_\_\_\_

(2) Name \_\_\_\_\_

Relationship \_\_\_\_\_

Phone Number \_\_\_\_\_

Please remember that we are a Christian Camp. We need to be Christ-like examples to the Campers. We should always use proper language. By signing, I agree to accept all assigned responsibilities and to abide by all camp and committee expectations.

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