

Tick the circle(s) that describe your area of interest:

Note: This is only an indicator but you may be asked to help elsewhere

Programming Position

- Cabin Leader
- Kitchen Staff
- Music Team
- PA/Sound Gear
- Video Camera/Editing
- Drama
- Banquet programmer

Activity Position

- Water Sports
- Kayaks
- Low Ropes
- Archery
- Photography
- Fishing
- Abseiling*
- Group Games

Essential services

- Nurse*
- Bronze Medallion*

Please indicate training/qualifications for positions marked with *

Photography will be taken during camp and may be posted on our website or used for future advertising and/or reporting.

Applicants must be ages 17 and older.

Please return completed form to:

Youth Department Staff Application
PO Box 253, Moonah, TAS 7009

or scan and email to wendyscott@adventist.org.au

Applications must be received by August 31, 2017. If your application is accepted you will be notified by mail BY September 5 or call 03 6273 6277



STAFF APPLICATION FORM



October 3-8, 2017

STAFF CAMP

October 1-3, 2017

TWEEN CAMP 2017

tasyouth.adventist.org.au

VOLUNTEER AGREEMENT FOR MINISTRY TO CHILDREN AND YOUTH IN THE SEVENTH-DAY ADVENTIST CHURCH

This form is to be completed by all persons considering volunteer ministry (paid or unpaid) involving contact with children or youth. It is to help the church provide a safe and secure environment for those children and youth who participate in programs and use church facilities:

Name: _____

Address: _____

Home Ph: _____ Mob: _____

E-mail: _____

Do you suffer from allergies? Yes No DOB: _____

Medicare Number: _____ No on Card: Expiry: _____

If Yes, please explain: _____

Have you any physical handicaps or conditions preventing you from performing certain types of activities relating to youth or children's ministry? Yes No

If Yes, please explain: _____

Have you ever been formally accused or convicted of child abuse, indecent exposure, assault or actual or attempted sexual molestation of a minor, or possession or distribution of pornographic materials?

Yes No Working with Children Card number _____

If Yes, please explain: _____

OTHER ATTRIBUTES

List any talents, skills, training, education, or other factors that you consider have prepared you for children's/youth ministry:

List all previous church work involving children/ youth (identify church & type of work):

Name of church where you are a member: _____

List any other church, organisation, group or club that you have been a part/member of :

Camp Philosophy

In a society of changing values and growing insecurity, Camps are a unique opportunity for Christian leaders to offer a safe healthy and spiritual environment where young people can experience an authentic Christian Community. Every young person is precious to God needing to be treasured, loved, respected and adored.

Camp is an opportunity for us to give them a glimpse of God's view of them. It is a time of great fun and laughter, a time to develop new relationships, and a time to better discover Jesus. Camp is a place where commitment and service to Jesus is made.

Referees

(1) Name: _____ Ph _____

(2) Name: _____ Ph _____

I declare that the information contained in this form is true and accurate to the best of my knowledge. I authorise any persons and/or representative listed on this form to give any information they may have regarding my fitness for children's/ youth ministry. I relinquish all such persons and/or representative from liability for any damage that may result from providing such evaluations to you, and I waive any right that I might have to inspect references provided on my behalf. In case of an emergency I give my permission for a physician selected by the camp director to give proper care such as hospitalisation, x-ray or other treatment for myself. Furthermore, I agree to refrain from any behaviour that may be detrimental to any children/youth I may encounter in the performance of my service on behalf of the Seventh-day Adventist Church.

Applicants Signature: _____ Date: _____

Parent/ Guardian (if applicant is under the age of 18);

Signature: _____ Date: _____

Name: _____