

FILL OUT AND
RETURN THIS PAGE

2024 TEEN VOLUNTEER APPLICATION



GENERAL INFORMATION

TV Name: _____ Grade (2024-5) _____ Birth Date: ____/____/20____

Contact Parent* Name: _____ Application Date: ____/____/20____

*Note: All communications will be through one contact parent's phone or emails.

T-Shirt
Size

Contact Parent's Email: _____ Parent's Cell: _____

Street Address: _____ City/St: _____ Zip: _____

2nd Address (if any): _____ City/St: _____ Zip: _____

Home Phone: _____ Your Phone*: _____

Church: _____ City: _____

Do you have any physical or other limitations that require special attention? Yes No
(If yes, please explain on back of page)

Have you ever been charged or convicted of an act of sexual abuse, physical abuse, or other crimes? Yes No

I consent to having a full criminal background check done. Yes No

Signature: _____ Date: _____
(Teen Volunteer)

Parent/Guardian Consent: _____ Date: _____
(Signature - Required if applicant is less than 18 years of age)

Last Name

First Name

PREFERRED WEEKS OF SERVICE

Please label your **first, second** and **third choice** of when you would like to volunteer at the camp. Note that younger TV's will generally be used with the youngest camper groups. To ensure an appropriate age spread, you must have completed 10th grade to be a TV at Adventure Camp or Jr High Camp.

- | | | |
|----------------|--------------------------|--------------------------------|
| ___ Any Week | ___ July 8-12 | Kids' Camp Grades 1-3 |
| ___ June 17-21 | ___ July 15-19 | Elementary 2 Grades 4-6 |
| ___ June 24-28 | ___ July 22-26 | Jr. High Girls/Guys Grades 7-9 |
| ___ July 1-3 | ___ Jumpstart Grades 1-3 | |

Signature: _____ Date: _____
(Applicant)

Signature: _____ Date: _____
(Parent/Guardian)

Application Deadline is March 1!	TV Training Event is April 5-6!
---	--

Mail or Email Applications to:
Miracle Bible Camp
 Dan Niebeling, Program Director
 P.O. Box 450
 Longville, MN 56655
 Phone (218) 682-2714
 Email: dniebeling@gmail.com
www.miraclebible.com

FILL OUT AND
RETURN THIS PAGE



All staff, including Teen Volunteers, participate in an on-line child protection training program. Parents are encouraged to view the material along with their students.



PERSONAL TESTIMONY

1. When did you receive Christ? Tell us about how it came about (you may continue on another sheet):
2. How often do you attend church? List any ways in which you help out in your church (for example, children's ministry, helping in the kitchen, cleaning, etc.):
3. Describe an experience you have had working with children or youth in which you took a difficult situation and turned it into a positive experience:

CONTRACT

I hereby affirm that all statements in this application are true and complete to the best of my knowledge. I understand that untrue, misleading, or omitted information herein may result in dismissal regardless of the time of discovery by the camp.

I authorize investigation of all statements herein and release the camp and all others from liability in connection with the same.

I authorize Miracle Bible Camp to use any photos, video or sound recordings taken of me during my summer ministry experience in future promotional materials.

→ Read the documents listed below at www.miraclebible.com/aboutus/staff

- _____ (Initial) I have read and understand Teen Volunteer Information. ↗
- _____ (Initial) I have read, understand and agree to abide by the MBC Staff Lifestyle Standards. ↗
- _____ (Initial) I have read, understand and agree with the MBC Statement of Faith. ↗
- _____ (Initial) I waive my right to view all references, including those made by persons listed below.

Signature: _____ Date: _____
(Applicant)

Signature: _____ Date: _____
(Parent/Guardian)

REFERENCES

Please list and provide contact information on three persons **not related to you** who know you well enough to offer insight into you and your character. **You** will provide them with a copy of the **Staff/TV Recommendation** form or direct them where to find it on our website. They should fill it out and mail/email it directly to the camp.

Name _____ Phone (_____) _____ Email _____
(Pastor or church leader)

Name _____ Phone (_____) _____ Email _____

Name _____ Phone (_____) _____ Email _____