

WV NAZARENE *Primary & Junior Camp*

VOLUNTEER APPLICATION 2025

Primary Camp Grades 1, 2, 3
Sunday June 8 – Friday June 13
Mail To:
Brenda Koontz
PO Box 13235
Charleston, WV 25320
beekoontz@gmail.com

Junior Camp Grades 4 & 5
Monday June 16 – Friday June 20
Mail To:
Audra Wilkinson
158 Lincoln Heights
Alum Creek, WV 25003
audrajthomas15@gmail.com

Send Volunteer Application to the director of the camp you want to attend.

Name of Volunteer: _____ **Birthdate:** _____ **T-shirt Size** _____

Address: _____ **City/State/Zip:** _____

Email: _____ **Cell Number:** _____

Nazarene Church you attend: _____ **Pastor's Name:** _____

How long have you attended this church: _____ **Are you a Member: Y N How long?** _____

What positions have held in the Church of the Nazarene (Sunday School, Quizzing.....)?

Do you abide by the rules of the Church of the Nazarene? Y / N

Will you abide by the rules of the Church of the Nazarene? Y / N

Have you completed a background check? Y / N

Have you ever been charged with or convicted of sexual assault? Y / N

(Please make a copy of your insurance card and attach the copy to this form.)

Which Camp do you want to attend?

_____ **Primary Camp (Must be 14 or older)**
 _____ **Junior Camp (Must be 14 or older)**
 _____ **Middle School Camp (Must be 21 or older)**
 _____ **Senior High Camp (Must be 21 or older)**

In what area would you like to assist?

_____ **Counselor (In student dorm)**
 _____ **Sports Worker**
 _____ **Teacher**
 _____ **Teen Worker**

Volunteer Signature: _____

(Application must include a pastor's recommendation.)

PASTOR'S RECOMMENDATION

I have read the application above and to the best of my knowledge, I can recommend this volunteer to work with the children and youth at our Nazarene Camp in Summersville, WV.

Pastor's Signature: _____ **Church:** _____ **Cell Phone:** _____

Please write your *Statement of Faith* on the back of this form.