

# WORK TEAM 2010 REGISTRATION



**Camp Challenge**  
Ministries

**OFFICE**

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<b>Team Name</b>	
<b>Team Leader</b>	
<b>Work Team Dates</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Email</b>	
<b>Primary Phone</b>	
<b>Gender</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Church</b>	
<b>Pastor</b>	
<b>Church Phone</b>	
<b>Church Address</b>	
<b>City, State, Zip</b>	

**OFFICE ONLY**

Date Received: \_\_\_\_\_

Conf. Sent: \_\_\_\_\_

Paperwork complete: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<b>Team Leader Covenant</b>  <b>As the designated Team Leader, I agree to:</b>	<ol style="list-style-type: none"> <li>1. Be responsible for daily Bible studies and / or devotional time with the team (either yourself or assign a team member).</li> <li>2. Keep Camp Challenge informed of changes to the plans, size or make up of the work team.</li> <li>3. Handle any team or participant discipline problem that may arise while at the ministry location.</li> <li>4. Submit yourself and our team to the authority of Camp Challenge Ministries leadership.</li> <li>5. Submit this Team Leader Covenant prior to your arrival at Camp Challenge.</li> <li>6. Submit one Volunteer Application/Work Experience form for each member of your team including yourself.</li> <li>7. Submit a Drivers Form for two members of your team.</li> <li>8. Submit a Travel Information form for your group as soon as you make your travel reservations. Please send all forms no later than 6 weeks before your trip.</li> <li>9. Keep the team to a maximum of 14 unless special arrangements have been made. Team Members under the age of 18 will have some limits in work assignments due to state regulations.</li> </ol>
	_____ Signature <span style="margin-left: 200px;">Date</span>

# WORK TEAM 2010 REGISTRATION

## TEAM LEADER CHECK LIST

**Team Name:** \_\_\_\_\_

**Team Leader:** \_\_\_\_\_

✓ Please check when complete

Work Team Registration / Team Leader Covenant		
Team Travel Information		
Designated Driver Form		
<b>Names of Team Members</b>	<b>Volunteer Application</b>	<b>Work Experience / Skills Form</b>
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		

# WORK TEAM 2010 REGISTRATION

## WORK TEAM TRAVEL INFORMATION

Team Name: \_\_\_\_\_

Team Leader: \_\_\_\_\_

Work teams coming to Camp Challenge by plane need to make airline reservations to Anchorage International Airport (ANC).

Camp Challenge is one (1) hour driving time from Anchorage Airport.

Please fill out this form and send it to the Camp Challenge Office as soon as travel arrangements have been made.

By Plane:

Arrival

Departure

Date:

Date:

Airline:

Airline:

Flight Number:

Flight Number:

Arrival Time:

Departure Time:

By Car:

Expected arrival date: \_\_\_\_\_

Departure Date: \_\_\_\_\_

Notes:

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# WORK TEAM 2010 REGISTRATION

## VOLUNTEER APPLICATION

Camp Challenge Ministries is a religious organization and all Work Team staff is expected to live by Biblical principals.

Please attach a  
current photo  
here

<b>Team Name</b>	
<b>Work Team Dates</b>	
<b>NAME</b>	
<b>Address</b>	
<b>City, State, Zip</b>	
<b>Email</b>	
<b>Primary Phone</b>	
<b>Other Phone</b>	
<b>Birthday / Age</b>	/ / <b>Current Age:</b>
<b>Gender</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Vocation</b>	
<b>Emergency Contact</b>	Name _____ Phone _____

<b>Church</b>	
<b>Phone</b>	
<b>Pastor's Name</b>	

## HEALTH INFORMATION

Allergies:  Yes  No

If YES, please list allergies: \_\_\_\_\_

Medication(s) used: \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Date of last physical exam: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Food Restriction(s): \_\_\_\_\_

Any restrictions camp personnel should know about: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Telephone: \_\_\_\_\_

Insurance Provider: \_\_\_\_\_ Policy # \_\_\_\_\_ Phone # \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No If YES, please explain on a separate sheet.

Have you ever been charged with child or sexual abuse?  Yes  No If YES, please explain on a separate sheet.

This health history is correct as far as I know. I am able to engage in all activities of my program. In the event of an emergency, (if I am unable to make decisions for myself, and my relatives cannot be reached) I hereby give permission for the camp director or team leader to secure proper and prudent medical treatment on my behalf.

I understand the possible risk while in this program, and hereby release Camp Challenge Ministries, its employees, agents and camp staff from any and all claims, demands, actions, or causes of actions of any sort of injuries sustained during the period covered by this release.

I certify the information in this application is true to the best of my knowledge.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Applicant Signature (if under 18 years of age a parent/guardian signature is required) \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Parent/guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# WORK TEAM 2010 REGISTRATION

Work Team Experience / Skills

Name: \_\_\_\_\_

Vocation	Very Experienced Can perform <b>without</b> supervision	Experienced Can do; may need advice	Familiar Can do <b>with</b> supervision	No Experience Will help
<b>Appliance Repair</b>				
Small				
Large				
<b>Build</b>				
Framing				
Finish				
Roofs				
Decks				
Stairs				
<b>Burner Service</b>				
Gas				
Oil				
Used Oil				
<b>Cabinets</b>				
Build				
Repair				
<b>Chainsaw</b>				
Tree Falling				
<b>Cleaning</b>				
<b>Concrete</b>				
Forms				
Pour				
Finish				
<b>Driving/Operating</b>				
<b>Electrical</b>				
Residential				
Commercial				
<b>Flooring</b>				
Carpet				
Vinyl				
Tile				
<b>Furniture</b>				
Build				
Repair				
<b>Kitchen</b>				
<b>Paint</b>				
Roll				
Cut In				
Stain				
Mask				
<b>Plumbing</b>				
Repair				
Rough In				
<b>Sheetrock</b>				
Hang				
Mud & Tape				
<b>Sheet Metal</b>				
Fabrication				
Installation				
<b>Vehicle Maintenance</b>				
<b>Welding</b>				
Repair				
Fabrication				
<b>Misc. (fill in)</b>				