

Rocky Bayou Christian School

Specialty Camp

2101 N. Partin Drive, Niceville, FL 32578
(850) 729-7227 ext 270

A Ministry of the Northwest Florida Christian Education Association (NFCEA)

APPLICATION for Specialty Camp VOLUNTEER and PAID HELPERS AGES 13-17

Summer of 2010

Date of Application: _____ Age (must be 13) _____ Birth date (mm/dd/yyyy) ____/____/____

Name (First, Last) _____ Telephone _____

Address _____

I would like to work as a volunteer helper (13-17) / paid helper (15-17). (Circle your choice)

What specialty camp would you prefer to work with? Science, Sports, Music, PSAT/SAT, Reading, Scrapbooking, Chess and Computer. Write the name of the specific camp(s) if you have one.

Why would you like to work with the Specialty Camp? _____

How many summers have you been a helper for a Specialty Camp? _____

Describe your present relationship with the Lord. _____

Indicate which weeks you are available to work this summer.

- | | | |
|---------------------------------------|---------------------------------------|---|
| <input type="checkbox"/> June 21 - 25 | <input type="checkbox"/> June 28 - 2 | <input type="checkbox"/> Jul 6-9 (No camp July 5) |
| <input type="checkbox"/> July 12 - 16 | <input type="checkbox"/> July 19 - 23 | <input type="checkbox"/> July 26 - Jul 30 |

Certifications held – none are required to work with a specialty camp

- CPR First Aid

All minors, not enrolled at RBCS, must provide **one of the following** to establish proof of age. An age certificate issued by the school board or a photocopy of your birth certificate, driver's license, passport, visa, or identification card issued by the Florida Department of Highway Safety and Motor Vehicles.

Turn all applications in to Mr. Raymond Allen. 729-7227 ext 276

My child may be a helper for Rocky Bayou Christian School Specialty Camp. I give permission for any photos taken of my child to be used in advertising for the programs or I will note it.

Parent/Guardian Name (Print)

Parent/Guardian Signature