

MidSouth District Children's Camp Volunteer Roster

Please use this form to list all volunteers from your church planning on attending children's camp. The district requests that any church sending a minimum of four children of the same gender to provide a counselor of the same gender.

Name	Gender	Camp ¹	NazSafe ²	Recommended ³
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N
	M F	E T	Y N	Y N

(additional comments can be added on the back of this form)

Church: _____ Position at Church: _____ I verify that document is accurate and true to the best of my knowledge and belief.

Name: _____ Signature: _____

1. E=Early Elementary Camp (June 29 -July 2) T=Tween Camp (June 22-26)
2. Has this person completed all requirements of your local church's Nazarene Safe Program?
3. Does this person have the recommendation of the pastor to serve as a counselor at children's camp?