

# Heartland America 2018 ARKANSAS Youth Camp

## CAMP STAFF APPLICATION PACKET



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# 2018 Arkansas

# Youth Camps



Camp Kahoka - Mountain View, AR

## Kid's Camp

June 7-11, 2018

Ages 7 - 12

Directors: Jason & LaCinda Whittington

7217 Glenn Hills Drive

Sherwood, AR 72120

Phone: (870) 219-5635 Email: lacinda.whittington@heartlandcogop.org

## Senior Camp

June 12-16, 2018

Ages 13 - College

Directors: Tom & Stephanie Thompson

1729 Osceola Drive

North Little Rock, AR 72116

Phone: (501) 590-6444 Email: stephanie.thompson@heartlandcogop.org

## Camp Tuition



**Early Registration:** (Postmarked by May 15) **\$ 135**  
(Includes t-shirt & activities)

**Registration:** (After May 15, or at the Door) **\$ 150**

\* \$10 Discount per child for Families with 3 or more Campers

\* No student will be registered at camp without proper parent/guardian signature and authorization to participate in camp activities.

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**NOTE: Applications and other camp forms may be downloaded from our regional website OR you may register and pay online at:**

**[www.heartlandcogop.org](http://www.heartlandcogop.org)**



# Arkansas Youth Camp Staff Application

Camp Kahoka  
A Church of God of Prophecy Ministry  
Regional Office: (918) 251-9667 Fax: (888) 285-1732

Camp Website: www.campkahoka.com  
Regional Website: www.heartlandcogop.org  
Regional Office Email: office@heartlandcogop.org  
Camp Kahoka: 734 Ben Cartwright Lane, Mountain View, AR 72560

INSTRUCTIONS: Mail or email application directly to the Directors of the camp for which you are applying OR register online at [www.heartlandcogop.org](http://www.heartlandcogop.org)

### KID'S CAMP

Jason & LaCinda Whittington  
7217 Glenn Hills Drive  
Sherwood, AR 72120  
(870) 219-5635

Email: [lacinda.whittington@heartlandcogop.org](mailto:lacinda.whittington@heartlandcogop.org)

### SENIOR CAMP

Tom & Stephanie Thompson  
1729 Osceola Drive  
North Little Rock, AR 72116  
(501) 590-6444

Email: [stephanie.thompson@heartlandcogop.org](mailto:stephanie.thompson@heartlandcogop.org)

Please include the following with this application: Declaration of Good Moral Character and Camping Ministry Covenant

## General Information

Name: \_\_\_\_\_ Male:  Female:  Marital Status: Single  Married

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Present Age: \_\_\_\_\_ Email Address: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Camp You Would Like To Work In:  Kid's Camp  Senior

Church You Attend: \_\_\_\_\_

Pastor: \_\_\_\_\_ Pastor's Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Are you physically fit to participate in camp? \_\_\_\_\_ Are you willing to attend Staff Training Sessions? \_\_\_\_\_ Are you willing to be at camp on time and stay until Director releases you from duty? \_\_\_\_\_ Will you agree to abide and promote camp rules? \_\_\_\_\_ Is this your first camp to work as staff? \_\_\_\_\_ Please list prior experience: \_\_\_\_\_

Why do you want to work in Youth Camp? \_\_\_\_\_

Who to contact in case of emergency: Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Have you ever been charged with a crime against children?  Yes  No (If Yes, please explain fully on a separate sheet of paper.)

Have you ever been charged with a felony?  Yes  No (If yes, please explain fully on a separate sheet of paper.)

Have you ever been convicted of a felony?  Yes  No (If yes, please explain fully on a separate sheet of paper.)

Are you willing to allow a background check to be done?  Yes  No

PLEASE MARK T-SHIRT SIZE: ADULT:  Small  Medium  Large  X-Large  2X-Large  3X-Large

YOUTH:  Small  Medium  Large  X-Large

## Statement of Certification and Understanding

I certify that all the information provided on this application is accurate to the best of my knowledge. I have read and understand the camp rules and regulations, and also understand that by signing this application I am agreeing to abide by those rules. I understand that failure to do so could result in dismissal from camp. I also agree that the Church of God of Prophecy (local, regional, and international offices), and its officers, servants, or staff shall not be held responsible for damages for any accident or sickness involving me.

Staff Applicant: \_\_\_\_\_ (If Under 18) Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

# Medical Information

\*\*\*\* PLEASE ATTACH A COPY OF THE FRONT AND BACK OF YOUR INSURANCE CARD \*\*\*\*

Name of Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_

Please indicate with a check mark any of the following medical problems that apply to the camper. If it is a current problem, please provide date of the most recent occurrence; if a past problem, approximate date.

Rheumatic Fever	TB
Diabetes	Heart Trouble & Related Problems
Asthma	Ivy, Oak Sumac Poisoning
Convulsions	Fainting
Sleep Walking	Kidney Trouble
Recent Illness	Other:

Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

Allergic Reactions to: \_\_\_\_\_

Most Recent tetanus shot: \_\_\_\_\_ Blood Type: \_\_\_\_\_

Medications taken on a regular basis:

\_\_\_\_\_ Treating \_\_\_\_\_ Frequency \_\_\_\_\_

\_\_\_\_\_ Treating \_\_\_\_\_ Frequency \_\_\_\_\_

\_\_\_\_\_ Treating \_\_\_\_\_ Frequency \_\_\_\_\_

Other Pertinent Information \_\_\_\_\_

**MEDICAL CONSENT:** In case of an emergency, I understand that every effort will be made to contact me (parent or guardian). In the event I cannot be reached, I hereby give permission to the Camp Director, Camp Nurse, and physicians **selected by the camp to secure proper treatment for, to administer "over-the-counter" (OTC) or prescription medications, to** hospitalize, order injection, anesthesia, and/or surgery for the camper. I understand that my insurance has the primary responsibility of payment should my child need treatment. The camp insurance is secondary. I understand that all medications, including OTC must be administered by the camp medical personnel and that medications will be collected at time of registration.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Staff Signature (If over 18) \_\_\_\_\_ Date \_\_\_\_\_

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FOR OFFICE USE ONLY

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

**Pastor's Endorsement: Date Received \_\_\_\_\_ Pastor Approved: \_\_\_\_\_ Yes \_\_\_\_\_ No**

Staff Acceptance Signature \_\_\_\_\_ Date \_\_\_\_\_



Arkansas  
**Pastor's Endorsement For Camp Staff**  
A Church of God of Prophecy Ministry

INSTRUCTIONS: Pastor is to mail/email this form directly to the Camp Director OR submit online at [www.heartlandcogop.org](http://www.heartlandcogop.org)

**KID'S CAMP (Ages 7-12)**

Jason & LaCinda Whittington  
7217 Glenn Hills Drive  
Sherwood, AR 72120  
(870) 219-5635

Email: [lacinda.whittington@heartlandcogop.org](mailto:lacinda.whittington@heartlandcogop.org)

**SENIOR CAMP (Ages 13-College)**

Tom & Stephanie Thompson  
1729 Osceola Drive  
North Little Rock, AR 72116  
(501) 590-6444

Email: [stephanie.thompson@heartlandcogop.org](mailto:stephanie.thompson@heartlandcogop.org)

**Applicant Information**

To Be Completed By Applicant: Name \_\_\_\_\_

How long have you been a Christian \_\_\_\_\_ Are you Spirit Filled? \_\_\_\_ Yes \_\_\_\_ No

Applying to Work in: \_\_\_\_ **Kid's Camp** \_\_\_\_ **Senior Camp**

Position Applying for: \_\_\_\_ Cabin Leader \_\_\_\_ Cabin Leader In Training \_\_\_\_ Teacher \_\_\_\_ Worship Leader/Team

\_\_\_\_ General Help / Kitchen \_\_\_\_ Other: (List Position) \_\_\_\_\_

**Church & Pastor Information**

The Following To Be Completed By Pastor:

Name of Church \_\_\_\_\_ Location of Church (City) \_\_\_\_\_

Name of Pastor \_\_\_\_\_ Number of Years at Church \_\_\_\_\_

**General Information**

Do You know the Applicant Personally? \_\_\_\_\_ If so, for how long? \_\_\_\_\_

Does the Applicant attend regularly at your church? \_\_\_\_\_ If Not, how often do they attend? \_\_\_\_\_

Are they a Member of your church? \_\_\_\_\_ How long have they been a member? \_\_\_\_\_

What positions or services do they currently do, or hold at your church? \_\_\_\_\_

Are they consistent in their Christian example? \_\_\_\_\_ Please Explain \_\_\_\_\_

In your opinion, are they qualified for the position they are applying for? \_\_\_\_\_ Please Explain \_\_\_\_\_

Would you recommend them to work in another area of camp instead of the area they are applying for? \_\_\_\_\_ If yes, explain \_\_\_\_\_

If working directly with children in a cabin, or other direct contact, would you place your children or grandchildren in their care? \_\_\_\_\_

Is there any particular area that you might be concerned about should they be asked to serve in camp? \_\_\_\_\_

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Other Comments or Perspectives \_\_\_\_\_

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**PASTOR'S RECOMMENDATION:**

I Recommend Them

I Recommend Them Under The Following Conditions: \_\_\_\_\_

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I Wish To Speak Directly To The Camp Director Before I Recommend Them Fully

I Cannot Recommend Them At This Time

Pastor's Signature \_\_\_\_\_ Date \_\_\_\_\_

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FOR OFFICE USE ONLY

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

Action Taken \_\_\_\_\_

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

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Staff Signature \_\_\_\_\_ Date \_\_\_\_\_

# HEARTLAND CAMPING MINISTRIES PROGRAM STATEMENT

(KEEP THIS PAGE FOR YOUR REFERENCE)

**KID'S CAMP:** (Ages: 7-12)  
Jason & LaCinda Whittington  
7217 Glenn Hills Drive  
Sherwood, AR 72120  
(870) 219-5635  
Email: lacinda.whittington@heartlandcogop.org



**SENIOR CAMP:** (Ages 13-College)  
Tom & Stephanie Thompson  
1729 Osceola Drive  
North Little Rock, AR 72116  
(501) 590-6444  
Email: stephanie.thompson@heartlandcogop.org

*Please read the following before completing the camper application. Parents, if the camper is younger than 18 years, please review this statement with him or her.*

STATEMENT OF EQUITY: All applications will be accepted on a first-come, first-served basis with no regard to race, color, creed, sex, or nationality.

PARTICIPATION: We are interested in the moral, social, physical, and spiritual growth of each camper. Each camper will be expected to participate in the full camping program and all activities unless the parent or guardian indicates otherwise on the application.

REGULATIONS: For the safety of all campers and staff, the following items will not be allowed: fireworks, drugs, guns, knives, laser pointers, or weapons of any kind. The camp reserves the right to perform an inspection of all belongings. No use of drugs, alcohol, tobacco, or profanity will be allowed. **Campers, please do not bring the following items: valuable jewelry, large amounts of money; computer; video games; CD's, radio, MP3 players, iPods, Kindles (or any other such device).**

ITEMS TO BRING: Please bring the following items: flip-flops or other shoes to be worn in the shower and to the pool/lake; toiletries, towels, and washcloths; casual clothes, closed toe shoes, and socks; an umbrella; sheets for a twin bed, a pillow; a quilt, blanket or sleeping bag; bathing suit or swim trunks (and shirt and shorts you don't mind getting wet); water shoes or shoes to wear to/from the pool; a flashlight; a Bible, paper, and a pen. Snack shack money. (This may be age group specific. Check camp application for details.)

BEHAVIOR: In the event that a member of the camp staff considers a camper's behavior to be unacceptable, extra duties may be used as corrective disciplinary action. For extreme cases, the camper may be sent home without refunding tuition.

DRESS CODE: The intent of our camp dress code is to provide an equitable dress code for all campers that will encourage modesty above legalism. Parents and church leaders are urged to see that only clothing which meets the policies and regulations of the camp policies are brought to camp.

CAMPERS: Please bring clothing to camp which fully complies with the following regulations:

- ⇒ Modesty — Since this is a Christian Camp with a distinctly Christian atmosphere, the New Testament principle of modesty should always be the standard dress at camp. While on our campground, camper may not wear apparel that exposes the midriff, is extremely tight fitting, or has writing on the back of pants or shorts. Apparel may not display or promote *alcohol, drug, sexual, or inappropriate language or pictures*. It is the responsibility of the local church pastor/youth director/camp sponsor to see that each camper is aware of our camp policy and to reinforce these policies before camp begins. The camp staff is to model the standard of modesty and enforce the camp dress code, taking into consideration that wisdom dictates an appropriate response specific for each situation.
- ⇒ Dresses and Shorts — Camp dress is to be casual, neat, and clean. Shorts are thumb to finger-tip to the knee in length. Slits in dresses and skirts should also be modest in length. All apparel must cover the shoulder. Dresses must include accessory wear under or over any straps that do not cover the shoulder.
- ⇒ Shirts and Shoes — Tank tops are not allowed at camp. Sleeveless shirts are acceptable, but must go from the neck to the shoulder seam and not be split down the side. Shoes and shirts must be worn at all times outside cabins, except while swimming.
- ⇒ Swimming Attire — Speedos, or thong type swimsuits will be unacceptable. Extremely revealing swimsuits will require adequate covering (t-shirt, etc.). Determining the appropriateness of swimming attire will be at the sole discretion of the camp staff. Please bring shorts, shirts, or robe (and shoes/flip flops) to wear to/from the pool.

CELL PHONE POLICY: We endeavor to create an atmosphere that minimizes distractions and maximizes a total "camping" experience. We ask that campers turn their phones off, and turn them in at check-in. We guarantee the privacy and security of the phone. The phones will be returned upon check-out from camp. NOTE: We want our campers to feel safe and secure. If a camper wishes to call home, our Cabin Leaders are instructed to make sure they have access to their phone to make the call. Calls will be allowed to Parents/Guardians only, except in the case of an emergency. Parents/Guardians are more than welcome to call the Camp Kahoka phone any time to check on their camper. That number is: (870) 269-8777.

# Camp Kahoka

734 Ben Cartwright Lane — Mountain View, AR 72560

Camp Kahoka is located approximately 9 miles south of Mountain View on Highway 5. Exit South off of Highway 5 and follow signs to camp.

**KID'S CAMP:** (Ages: 7-12)

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## REGISTRATION AND PICK-UP INFORMATION

Registration begins at 2:00 PM

Pick-Up Campers after 9:30 AM

All Campers MUST be picked up NO LATER than 10 AM. Arrangements for early drop-off, or late pick-up must be made in advance by calling the Camp Director.

Everyone must go through Registration BEFORE entering the cabin areas.

NO CAMPER WILL BE DISMISSED WITHOUT PROPER CHECK-OUT PROCEDURES.



it's  
camp time!





## Section 16

## Camping ministry covenant

## The Meaning of This Covenant:

I understand that a covenant is a promise, that it is not merely a mutual acquaintance but a commitment to responsibility and action.

## Acknowledgment of What Camp Ministry Looks Like:

Church of God of Prophecy Camping Ministries believe that ANY PERSON WHO PARTICIPATES IN ANY FORM OF SERVICE TO THIS BODY, NO MATTER HOW MENIAL IT MAY APPEAR TO BE, IS INVOLVED IN MINISTRY LEADERSHIP. WE FURTHER BELIEVE THAT God intended THESE MINISTRIES be carried out in the spirit of a servant. Although our talents, personalities, and gifts may vary, Scripture clearly teaches a leadership style that is uniquely Christian. It has been given to us by the Lord of the church. Jesus has demonstrated this leadership style and commanded us to do likewise.

*"Do nothing from selfish or empty conceit, but with humility of mind let each of you regard one another as more important than himself; do not merely look out for your own personal interests, but also for the interests of others. Have this attitude in yourselves which was also in Christ Jesus, who, although He existed in the form of God, did not regard equality with God a thing to be grasped, but emptied Himself taking the form of a bond-servant, being made in the likeness of men. And being found in appearance as a man, He humbled Himself by becoming obedient to the point of death, even death on a cross." Philipians 2:3-8 (NASB).*

Servant leadership is much more than a leadership style we act out and master like other management styles. Servant leadership begins with the heart, with our attitude, and with our motives. A servant-leader can be characterized by submission, love, compassion, persistence in the pursuit of God's will, and self-sacrifice. Reflections from Scripture on servanthood are the following: Philipians 2:3-8; John 6:38-40; 15:12,13; 17; and 1 Corinthians 13.

## Accepting the Responsibility of Modeling a Biblical Lifestyle: Code of Ethics:

I understand that consistent modeling requires diligence in the pursuit of the biblical lifestyle. There are some things that we can do to renew ourselves from the inside-out. There is a need to "keep short accounts with God" (confession). We must be sensitive to sin so that we can easily identify it and recognize its presence in our own lives. We must immediately go to God and ask forgiveness.

Believing that God is calling me to serve children or youth through Camping Ministries, I will do the following:

- My first priority as a Camp Staff member, teaching/supervising/leading children or youth, will be to seek the welfare of the children/youth physically, socially, educationally, and spiritually.
- **I will also try to understand and respect the child's/youth's cultural backgrounds.**
- I will not do anything that will damage a child's/youth's trust. I will try to protect the child/ youth from all forms of abuse while he or she is in my care.
- If I suspect that a child/youth may be hurt by the abusive actions of attitudes of another person, I will report that suspicion to a responsible person so that it can be investigated properly.
- I will answer a child's/youth's questions openly and honestly.
- I will expect the children/youth to act on the basis of camp guidelines, and if a child/youth consistently breaks them, I will seek help from Deans, Directors and others to assist me in responding to the child/youth.
- If a child/youth is distressed, I will try to offer comfort and help. I will encourage the child/youth to find the appropriate help for their needs.
- I will pray for each child/youth and let them know that I care about them.
- I understand that if my character or morals should be inappropriate and/or criminal at any time during my volunteer service, my service will be terminated without expressed cause or prior notice, regardless of other oral or written statements prior to, at, or following the date of volunteer service.
- I have read, and am willing to comply with all guidelines and policies set forth in the Heartland America Camp Staff Manual, including the verbal and written policies that are particular for each camping facility. I will honor the leadership of those who have oversight of the particular camp in which I will be serving as a member of the Camp Staff.

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Signed

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Date

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Print Name

## DECLARATION OF GOOD MORAL CHARACTER

I, \_\_\_\_\_, a candidate to serve as volunteer in the Camping Ministries of the Church of God of Prophecy, hereby attest, under penalty of perjury, that I am of good moral character, and that I have not been found guilty of, regardless of adjudication, or entered a plea of *nolo contendere* or guilty to, any criminal in my country of origin, or under any similar statute of in the United States of America. I also attest that I do not have a delinquency record that is similar to any of these offenses relating to:

1. Murder, manslaughter, aggravated manslaughter of an elderly person or disabled adult, or aggravated manslaughter of a child, vehicular homicide, or killing of an unborn child by injury to the mother.
2. Aggravated battery or aggravated assault, or simple battery or assault of a minor.
3. Kidnapping, false imprisonment or removing minors from the state or concealing minors contrary to court order.
4. Sexual battery.
5. Prostitution.
6. Lewd and lascivious behavior and indecent exposure.
7. Arson.
8. Incest.
9. Child abuse, aggravated child abuse, neglect of a child, negligent treatment of children, contributing to the delinquency or dependency of a child, and sexual performance by a child.
10. Obscene literature.
11. Adult abuse, neglect or exploitation of aged persons or disabled adults.
12. Drug abuse prevention and control, only if the offense was a felony or if any other person involved in the offense was a minor.
13. Fraudulent sale of controlled substances, only if the offense was a felony.
14. Forcible felony.
15. Assault, if the victim of the offense was a minor.
16. Battery, if the victim of the offense was a minor.
17. Abuse, aggravated abuse, or neglect of an elderly person or disabled adult, lewd or lascivious offenses committed upon or in the presence of an elderly person, or disabled adult and exploitation of an elderly person or disabled adult, if the offense was a felony.
18. Theft, robbery, and related crimes, if the offense is a felony.

I understand that I must acknowledge the existence of any records relating to the foregoing list of offenses regardless of whether those records have been sealed or expunged. I also understand that I am also obligated to notify the Heartland America Regional Office of the Church of God of Prophecy of any possible disqualifying offenses that may occur while employed/volunteering in a position subject to the screening requirements.

I further attest that I have not been judicially determined to have committed abuse, neglect, or exploitation against a child nor has there been a confirmed report of abuse, neglect or exploitation which has been uncontested or upheld. I have not committed an act which constitutes domestic violence.

I hereby release and agree to hold harmless from liability any person(s) or organization(s) who in good faith, provides information to complete a background investigation. I also agree to release and hold harmless the Church of God of Prophecy, the Regional Overseer, Ministry Directors or any other church member from any present or future claim of any kind resulting from any alleged liability for conducting a background investigation which may include, but not limited to, criminal courts, state and county repositories of criminal records.

Under the penalties of perjury, I declare that I have read the foregoing, and the facts alleged are true to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Current Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Witness Signature (Must Be 18 Yrs of Age)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness Signature (Must Be 18 Yrs of Age)

\_\_\_\_\_  
Date