

2019 Camp Kahoka Youth Camp Camp Staff Application Packet



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Camp Kahoka

2019 Arkansas YOUTH CAMPS

Mountain View, AR

KIDS CAMP

June 6-10

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 11-15

Ages 13-College

Directors: Shannon & Ameer Tribble

625 Larkspur Lane, Trumann, AR 72472

Phone: (870) 919-9914

Email: shannon.tribble@heartlandcogop.org

CAMP TUITION

Early Registration - May 15 = \$135

Registration After May 15 = \$150

(Registration Includes Activities, Materials, & T-Shirt)

*Full tuition due with application.

* \$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.

NOTE: Applications and other camp forms may be downloaded from our Regional Website.

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

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

KID'S CAMP

Jason & LaCinda Whittington
 7217 Glenn Hills Drive
 Sherwood, AR 72120
 (870) 219-5635
 Email: lacinda.whittington@heartlandcogop.org

SENIOR CAMP

Shannon & Ameer Tribble
 625 Larkspur Lane
 Trumann, AR 72472
 (870) 919-9914
 Email: shannon.tribble@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 _____

List any Medications to be administered at camp to be taken on a regular basis:

_____ Treating _____ Frequency _____
 _____ Treating _____ Frequency _____
 _____ Treating _____ Frequency _____

(Use another sheet of paper if necessary)

Camper is under the care of a physician for the following reasons: _____

List any dietary restrictions: (No special meals are provided, but we will inform our staff of camper's restrictions to help them choose allowed foods from our regular menu. _____

Physical restrictions, or activities not allowed: _____

Other Pertinent Information: _____

NOTE: Medications must be in original container & administered by camp medical staff - NO EXCEPTIONS!

MEDICAL and MEDIA 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. 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 my child.

***I hereby agree that my child/ward may participate in all camp activities including travel off the property. I give my permission for Camp Kahoka administration to use images and recordings of my child/ward (including social media or website use) without further compensation. I also agree to hold harmless Camp Kahoka, its staff, and volunteers from any and all liabilities, claims, demands, and causes of action whatsoever, which may arise due to the participation of myself, or my child/ward in said activities. If you have any questions/concerns, contact your camp directors via phone or email prior to camp.

Parent or Guardian Signature _____ Date _____

Staff Signature (If 18+) _____ Date _____

 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 this form directly to the Camp Director.

KIDS CAMP: (Ages: 7-12)

Directors: Jason & LaCinda Whittington
7217 Glenn Hills Drive
Sherwood, AR 72120
(870) 219-5635
Email: lacinda.whittington@heartlandcogop.org

SENIOR: (Ages: 13-College)

Directors: Shannon & Amee Tribble
625 Larkspur Ln
Trumann, AR 72472
(870) 919-9914
Email: shannon.tribble@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: ____ Senior ____ Kids 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? _____

Other Comments or Perspectives _____

PASTOR'S RECOMMENDATION:

___ I Recommend Them

___ I Recommend Them Under The Following Conditions: _____

___ 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 _____

FOR OFFICE USE ONLY

Date Received _____

Action Taken _____

Notes: _____

Staff Signature _____ Date _____

HEARTLAND CAMPING MINISTRIES PROGRAM STATEMENT

(KEEP THIS PAGE FOR YOUR REFERENCE.)

SENIOR: (Ages: 13-College)
Directors: Shannon & Amee Tribble
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(870) 919-9914
Email: shannon.tribble@heartlandcogop.org

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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 should be modest in length and not too tight (Approximately, thumb to finger-tip to the knee in length). If wearing leggings, wear a shirt that falls below the hips. Slits in dresses and skirts should also be modest in length. Strapless, spaghetti strap, or off-the-shoulder dresses must include appropriate accessory wear under or over them.
- ⇒ Shirts and Shoes — Spaghetti-strapped 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 director's contact phone (during daytime hours) to check on their camper.

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.

KIDS 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.

Signed

Date

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