

VOLUNTEER REGISTRATION

Anyone wishing to volunteer at GCC MUST have approval from their Church leadership or the Dean of the Camp in addition to verbal confirmation from the Camp Manager

Volunteer Name: _____

Address: _____ City/State/Zip: _____

HOME PHONE: _____ EMERGENCY PHONE: _____

HOME CHURCH: _____

Over 18? YES NO

If Under 18

Parent/Guardian: _____

Age of Camper: _____ Date of Birth: Mo. _____ Day _____ Yr. _____

Grade entering this Fall: _____

Guardian Signature & Date: _____

I Would like to Volunteer for:

Volunteer at GCC Before? YES / NO

Signature of Pastor/Church Representative: _____

Print Pastor/Church Representative: _____

OR

Date of Verbal Confirmation from Camp Dean _____ / _____ / _____

Date of Verbal Confirmation from Camp Manager _____ / _____ / _____

Volunteer Signature:

Mail completed form to: Guadalupe Christian Camp, 56 Christian Camp Rd., Carlsbad, NM 88220