

# COUNTRY OAKS BAPTIST CHURCH

## YOUTH HELPER AND CAMP COUNSELOR'S APPLICATION

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***At Country Oaks we are ALL about Jesus.***

***We ADORE Jesus by LEARNING from Jesus so we can LOVE like Jesus.***

### PERSONAL INFORMATION

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

E-mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Please provide us with your name on all social media sites you subscribe to:

Facebook: \_\_\_\_\_ Twitter: \_\_\_\_\_ Instagram: \_\_\_\_\_

Other: \_\_\_\_\_

If you are an international applicant, please provide us with the following:

Name of local person (s) you are staying with: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

### EMERGENCY CONTACT

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

# GENERAL QUESTIONS

**Tell us how you became a Christian:**

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**Why do you feel called to help out with youth at COBC?**

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**Explain why you would be a good asset to the youth program at COBC:**

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# CHURCH INFORMATION

Are you a member of COBC?

YES       NO

Have you ever been baptized? If you answered no, please explain in the space provided.

YES       NO

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Describe your current involvement at COBC:

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Please tell us about the ministry experience you have had, if any.

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**“Through completing this application to be a youth helper and/or camp counselor you are informing the COBC pastoral staff of your desire to minister to the youth of our Church. Please note that submission of this application does NOT guarantee an immediate role within our current youth program (s). As a pastoral staff we diligently pray all COBC members become active within our church body; we are willing to help find an area best suited to the applicant stated in this application. By signing and submitting this application you agree to abide by the decisions prayerfully made by the elders and/or pastoral staff of COBC concerning your involvement with the youth of our Church. And furthermore, to trust in God’s providence when it comes to the Church’s need for help at this particular time. Thank you for your interest in COBC Youth Program and your willingness to help.”**

*I certify that all of the statements in this application are true and complete to the best of my knowledge. I understand that false or incomplete documents may make my application void.*

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_