

Vacation Bible School  
Killam's Point Day Camp  
Junior Counselor (JC) Application

Please indicate your week of preference with "1" being the most favorite.  
(Although all attempts will be made to give first or second choice, this is not always possible.)

\_\_\_ Camp E.D.G.E., July 5-9                      \_\_\_ Galactic Blast, August 2-6  
\_\_\_ Baobab Blast, July 12-16                      \_\_\_ Down by the Sea, August 9-13

JC's Name and Nickname \_\_\_\_\_ Gender: M F

Current Grade as of 4/10 \_\_\_\_\_ T-shirt Size: YS YM YL AS AM AL AXL

Medication \_\_\_\_\_

Allergies \_\_\_\_\_

Parents/Guardians Name \_\_\_\_\_ E-Mail \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Address \_\_\_\_\_

**Alternate Emergency Contact Information**

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

Daytime Phone: \_\_\_\_\_ Alt. phone number: \_\_\_\_\_

**Transportation Option (MUST choose 1)**

Church Member \_\_\_ Church Bus Stop \_\_\_ Orchard House Bus Stop \_\_\_

\_\_\_ I have \_\_\_ have not been a JC at Killam's Point Day Camp VBS before

Photo Release - Please check appropriately according to preference.

I \_\_\_ will / \_\_\_ will not allow my child's picture to be taken for camp photos for publicity purposes.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

-----For office use only-----

Check Amount \_\_\_\_\_ Check Number \_\_\_\_\_ Paid? \_\_\_\_\_

Additional Info \_\_\_\_\_