



**COUNSELOR APPLICATION**  
**SUMMER 2022**

**INSTRUCTIONS:** Please fill out the form completely and accurately as possible.  
When finished, please email it to [mlbc@bbckfalls.org](mailto:mlbc@bbckfalls.org)

**Personal Information**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Male/Female Birthday: \_\_\_\_\_ Age: \_\_\_\_\_ Grade in School in Fall of 2022: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Home Church: \_\_\_\_\_

Pastors Name: \_\_\_\_\_ Pastor's Phone#: \_\_\_\_\_

Parents Name (if under 18): \_\_\_\_\_ Parent's Phone #: \_\_\_\_\_

**Which camp(s) are you applying for (circle one or more):**

Middle School Camp (Grades 6-8)	June 20-24
Junior Camp (grades 3-5)	June 27-July 1
Day Camp (grades k-3)	July 5-8
High School Camp (grades 9-12)	July 11-15

**Where are you interested in helping?**

- Camp Counselor  Worship team
- Medical team  Recreation team
- Craft team  Lifeguard
- Zipline crew  Other \_\_\_\_\_



**Short Answer**

**List prior ministry involvement** (mission trips, youth group events, evangelism, camps, etc.)

**What skills or abilities do you possess that would help in your desired position?**

**Please share briefly on the following subjects**

When and how did you come to know Jesus as your savior?

How are you active in your faith and maintaining a relationship with God?

***I certify that all of the statements given on my application are accurate.***

Your signature: \_\_\_\_\_

Date \_\_\_\_\_

Parent signature: \_\_\_\_\_

Date \_\_\_\_\_

(if applicant is under 18)