# Future Ministers Camp Application June 14-17, 2024

1. NAME				
ADDRESS				
		ZIP		
EMAIL	PHONE:			
2. NAME of PARENTS				
3. Where do you attend school?				
What year of school? Grade point average				
5. List your school activities, honor	rs, leadership, etc			
7. Have you been baptized into Chr	rist? Do you faithfull	ly attend worship?		
8. Do you have public speaking exp	perience?			
9. Have you spoken before a congre	egation?			
10. Can you lead prayer?	Can you lead si	inging?		
11. Have you attended other trainin CAMP/PROGRAM	ng camps/programs? (preaching, sp LOCATION	peech, leadership, etc.) List below: YEARS ATTENDED		
12. Write a paragraph explaining ye	our interest in evangelism:			

3. Do you have any commitments that would req	uire you to leave camp early?	
4. If yes, explain:		
5. Do you use alcoholic beverages, tobacco, or a	ny other drugs?	
6. If you have been part of Future Ministers Cam	np before, how many years have you att	ended?
7. What size t-shirt would you like?		
all statements on this application are True:		
	Signature of Applicant	Date
arental Permission for Camp Attendance		
•	Signature of Parent or Guardian	
	Signature of Latent of Guardian	ı
	Phone number	

Please provide the recommendation of at least two of the following where possible:		
Recommendation of an Elder:		
	Signature of Elder	Phone
Recommendation of Minister:		
	Signature of Minister	Phone
Recommendation of Youth Minister:	· ·	
I games	Signature of Youth Minister	Phone
(Applicant)	to do my very best to make Future Ministers (	
it can be. I agree to follow all guidelines and will give my very best to each class and my fu effort to the preparation and delivery of the se and I want to grow closer to God and to the o	ll attention to each speaker. I also will give m ermon topic I am assigned. I want this to be a	y complete
On my honor as a Christian gentleman, I agree this commitment. I understand that by signing consequences of breaking any of them.		-
A	pplicant Signature	Date

## Future Ministers Camp

Sponsored by the Graymere church of Christ 1320 Trotwood Avenue Columbia, TN 38401 June 14-17, 2024

#### EMERGENCY MEDICAL RELEASE

This section must be completed and signed by a parent or guardian.

Child's name	
Name of Insurance company	
Policy Number:	Group Number:
Insurance Company Address	
Mother's Employer	Work Phone
	Home Phone
Father's Employer	Work Phone
	Home Phone
Is your son presently taking any medication, ha	as allergies or any food restrictions?
If so, please define	
	he Future Minister's Camp or an elder of the Graymere est judgment in any emergency requiring medical attention.
Signed:	Date:
injuries. Maury Regional Hospital is less than staff member or elder gives permission for the	most convenient hospital emergency room for any incurred one mile from the Graymere building. The camp director, hospital staff to perform treatment as necessary, or objectionable to you. Where possible we will always try to
Parent/Guardian	
Comments:	

### Graymere church of Christ 1320 Trotwood Avenue Columbia, TN 38401 Phone 931-388-4796

#### RELEASE OF LIABILITY AGREEMENT

This form must be signed by the Parent or Guardian before any child can be allowed to participate in the Future Ministers Camp at the Graymere church of Christ. This form must be received by the Graymere Church prior to July 14, 2024.

I recognize that there are risks, including those of injury and even death, in all activities initiated and carried out under the auspices of the Graymere church of Christ. I freely assume those risks on my own and my child's behalf. I agree to release and hold harmless from liability the Graymere church of Christ, its staff, members, volunteer workers, and other employees and agents, as well as camp staff, counselors, and campers, in the event of injury or death of my son resulting from any theory of liability while engaging in the Future Ministers Camp. I agree to not make any claim or file any lawsuit against the Graymere church of Christ for injuries or damages related to my child's participation in the Future Ministers Camp.

This release is in behalf of the following Child or Children:	
1	
2	
I understand that this is a legal binding contract and that the church activities are pr consideration for this signed Release of Liability Agreement (Please initial	
I HAVE CAREFULLY READ THIS RELEASE OF LIABILITY AGREEMENT A UNDERSTAND ITS CONTENTS. I AM AWARE THIS CONTRACT RELEASE CHURCH OF CHRIST FROM LIABILITY AND I SIGN OF MY OWN FREE W	S THE GRAYMERE
Parent/Guardian signature Date	
Address	
City and State Phone #	

This form is valid for the period of the Future Ministers Camp.