



Kindly indicate **ONE** age group with which you are most comfortable and competent to work and for which you are available:

**PS. Counsellor must be at least 7 years older than the upper age of the Camp.**

9 – 12 years

13 – 16 years

17 – 20 years

**Camp**

- Intermediate**
- Junior**
- Youth**

**Date of Camp**

July 11-16  
July 18 - 23  
July 25 - 30

**Age**

Ages 13 - 16 years  
Age 9 – 12 years  
Age 17 – 20 years

Have you already confirmed your vacation leave/availability for the date chosen above?

Yes  No

I will be expected to be at camp from Sunday to Saturday of specified camp week. I will attend pre-camp training/planning sessions on April 9, May 14 and June 4, 2016.

.....  
**Applicant's Signature**

..... **2016**  
**Date**

***The completed form must be accompanied by a reference (form attached) from your pastor/moderator and submitted by Fax – 924-6296, hand deliver or mail to Jamaica Baptist Union 2b Washington Blvd. Kgn.20 or email to [arlene.henry@jbu.org.jm](mailto:arlene.henry@jbu.org.jm) or [merlyn.riley@jbu.org.jm](mailto:merlyn.riley@jbu.org.jm) .***

***Planning, Training and Orientation will be conducted on April 09, May 14 and June 4, 2016. Retreats are normally held at the Ocho Rios Baptist Church.***