



5103 Old Cape Road East, Jackson, Missouri 63755
Partnering Together to Advance God's Kingdom!

Camp Director Application

Name: _____ Phone: _____

Email Address: _____ Age: _____

Church where you are a member: _____

Areas you serve in your church: _____

Pastor's Name and Phone: _____

Briefly share your salvation story (you may attach an additional page if necessary):

Are you in full agreement with the Baptist Faith & Message: YES / NO
If NO, please indicate any difference you have:

Partnering together to advance the Kingdom of God locally and throughout the World!

Bro. John Vernon, Director of Missions
Cell: 573-275-9339
dom@capebaptist.net

Mrs. Margaret Tallent, Administrative Assistant
Office: 573-334-3511
office@capebaptist.net



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Why do you wish to serve as a Camp Director?

What do you believe is the purpose of Camp?

What is your preferred age range to lead at Camp?

Do you prefer all girls, all boys, or mixed gender camps?

If selected to serve as Camp Director, you will need to consent to a background check as part of our Child Protection Policy.

Signed: _____

Date: _____

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