

**RYC Adult Leader Application (Returning Staff)**

This year will mark the 14<sup>th</sup> year of RYC, and we are thrilled that you want to be a part of it! Since you have been to RYC in the past, you know how important these positions are, and how much they have an impact on the campers that attend.

Please complete and submit this application by April 15<sup>th</sup> 2020 to be considered for RYC '20. All applications will be reviewed and approved by the RYC Executive Planning Committee.

**General Information**

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

T-Shirt Size: S M L XL Other: \_\_\_\_\_

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

City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Home): \_\_\_\_\_

Phone (Cell): \_\_\_\_\_

E-Mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Are there any possible conflicts with the June 15<sup>th</sup> week in your schedule? (Please list)

\_\_\_\_\_

There is a discounted Staff rate of \$300. Please check below if you will be covering this individually or if your church will be assisting.

If you feel the cost of camp will prevent you from serving, please reach out to discuss options for financial assistance prior to RYC.

\_\_\_\_ Individually

\_\_\_\_ My Church

Rank the following positions in the order of preference (Top choice as "1")

\_\_\_\_ **High School Counselor** (*Fully engaged with campers*)

\_\_\_\_ **Middle School Counselor** (*Fully engaged with campers*)

\_\_\_\_ **Games Guy** (*Running camp activities*)

\_\_\_\_ **Production Team** (*Administrative and Media responsibilities*)

Church Name (where you are a communicant member): \_\_\_\_\_

Has anything changed regarding your church membership since you last served at RYC?

\_\_\_\_\_

Briefly describe your current walk with Christ:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree that the above information is completed correctly to the best of my knowledge and will be held confidential by the RYC Administration staff, as needed.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Legal Information**

Our ministry to the students comes first. It is our responsibility to build a team of staff members that is able to provide godly relationships with the students. Any illegal misconduct by RYC staff, employees, volunteers, guest leaders, and guests, regardless of age, is contrary to Biblical principles. There is nothing within the requirements or purview of identified and expected job descriptions, responsibilities, or expected general behavior patterns that would allow for or encourage illegal misconduct. It is forbidden. All who come, visit, or work at RYC are expected to manifest behavior that excludes any illegal behavior. Note that submission of this form provides your consent for the RYC oversight team to conduct a background check if necessary.

**Session Approval**

To be filled out by Moderator or Clerk of Session at church where you are a communicant member:

This person is a member in good standing, is suitable for work with the students at RYC, and the Session recommends this person as a RYC Counselor (or Staff Person) and for the ministry of the conference.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

**Medical Information**

\_\_\_\_\_  
Name of Insurance Provider (Company Name)      Policy Number      Group Number

(      )

\_\_\_\_\_  
Name of Insured (Primary Policy Holder Name)      Claims Phone Number

\_\_\_\_\_  
Emergency Contact Name      Emergency Contact Cell Phone

\_\_\_\_\_  
Known Allergies or Required Dietary Restrictions

\_\_\_\_\_  
Special Health Considerations (Asthma, Diabetes, Epilepsy, Other)

\_\_\_\_\_  
Medications: Indicate Any Medications You Will Be Taking At RYC. Include Dosage And Timing Information.

\_\_\_\_\_  
List Any Other Medical Or Physical Restrictions While At RYC

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics and waive my right to informed consent of treatment. This waiver applies only in the event that the listed contact cannot be reached in the case of an emergency. I release RYC, Presbytery of the South, Lake Sherwood OPC and individuals from liability in case of accident during, or activities related to, RYC.

\_\_\_\_\_  
Signature      Date