

CAMP JUBILEE

SUMMER MISSION TEAM

(Must be 16 years of age or older)

Summer Mission Team—June 28 - July 26, 2022

Be sure to have all paperwork in before June 13th so that your application can be reviewed. We will contact you ASAP to confirm your acceptance as a SMT. \$75.00 per Team Member is requested to help cover your staff shirts, food, and insurance for the month. If that is a problem for you, please contact Bro. Doug or Mrs. Christina ASAP. Be sure to bring spending cash for trips to town, for personal supplies, and eating out with the group. We will eat out on Sundays while traveling to church. **Please do not arrive until opening time.**

*Exodus 15:2 The LORD is my strength and song, And He is become my salvation; He is my God, and I will **prepare** Him an habitation, My father's God, and I will exalt Him.*

*Deuteronomy 6:5 And thou shalt **love** the Lord thy God with all thine heart, and with all thy soul, and with all thy might.*

*****When printing forms, be sure to print one-sided due to several forms needing notarization.*****

To Those Who Are Giving Recommendations:

As a pastor and/or church leader, we are asking you to take your recommendations seriously. The Summer Mission Team program is not a program to reform youth with behavior problems or addictions. We realize there is a great need in the world for a program to help troubled youth, but the Summer Mission Team is not that program.

Each year we try to be gracious with the staff who have abused our codes and rules. We have tried to work with them in an effort to keep from being forced to dismiss anyone. However, it is time to make our goal and purpose clear. Our main goal is to present the gospel to children and youth who come to camp. Staff members should already be grounded in their faith in Christ, rooted in their belief, and in control of their behavior before agreeing to serve as a Summer Mission Team Member.

A Summer Mission Team Member should be someone who has displayed a love for Christ, a love for children and youth, an ability to work with adults, a willingness to follow instructions, and a desire to see the lost saved. We need people who are willing to work and work hard at preparing for the opportunity to share Christ on a day to day basis with campers. We do not just dress up pretty and stroll around looking good and smelling good, carry our Bibles and talk about Jesus. We spend long hard hours getting ready for campers to come by cleaning, scrubbing, sweeping, preparing, and setting up each building. Then we clean up, eat, and fellowship before lights out. Bright and early the next day we start all over. Be sure volunteers and their parents/guardians know hard work is involved. Each SMT volunteer should have a reputation known to the church and surrounding community as being a Christian. We need youth that you would choose to be around your own children--youth with confidence in themselves and what they believe. We desire someone who will be a strong Christian role model for children, youth, and other SMT members. I regret that it is necessary to be this direct in our search for SMT members, but it is far better to be selective than to have to send someone home. **Please prayerfully consider your recommendations. Thank You!**

Please mail completed application to:

Camp Jubilee

PO Box 186

Cumberland Gap, TN 37724

Contact Christina Odle with any questions.

(912) 288-3353

Email: camp.jubilee.tn@gmail.com

I, _____, understand that my appearance is important as a Christian and as a member of the Summer Mission Team. Girl's shorts should be **no shorter** than 5 inches above the knee. Boys will not go without a shirt at any time or wear shorts that are more than 5 inches above the knee. (Measure your shorts before you come-please don't make us do it.This will be addressed this year, so please check your shorts prior to packing for camp.)

I, _____, understand that each rule has been set due to past experiences.

I, _____, understand that rules must be set and enforced in order to maintain a Christian based program.

I, _____, understand that if I abuse a rule I leave Bro. Doug or Mrs. Christina no alternative but to dismiss me from the SMT Staff of Camp Jubilee. This will be done in a private and loving manner, but it will be done.

I, _____, have read and signed each of the above statements with full understanding and I am in agreement.

I, _____, have joined in prayer with _____, who witnessed me signing each of the above and who will be in prayer with me and for me as I serve on the staff at Camp Jubilee this summer.

I, _____, have prayerfully considered this agreement and I will accept all responsibility for my behavior. I understand that if I choose to break this agreement I will be dismissed from the staff. At such time my parents/guardians will be phoned (if under 18) and will be asked to pick me up by the next day. I will be immediately relieved of all duties from that point on. If a SMT member is over 18 and has driven to camp alone, but still lives at home, the parents will be notified of dismissal and the departure time to ensure safe arrival back home.

Please do not put us in the situation where this must be done.

SMT Applicant: _____

Parent/Guardian: _____

Church Leader: _____

Pastor: _____

*We will not excuse inappropriate clothing. Anyone who wears shorts that are too short/tight or shirts that are too short/tight/low cut will be asked to change. This will also apply to adults who wear their clothing too short or tight. We will determine whether appearance is appropriate.

Commitment Pledge For Summer Mission Team Members

I, _____, pledge to faithfully serve in any assigned area as a member of the Summer Mission Team Staff of Camp Jubilee.

I, _____, pledge that during my time at Camp Jubilee or on the road representing Camp Jubilee that **I will not smoke, use inappropriate language, chew tobacco products or dip, partake in any types of drugs, dress inappropriately, etc.** I understand that if I choose to break this pledge I will be dismissed from the Summer Mission Team.

I, _____, pledge that if I am aware of the use of tobacco products, drugs, inappropriate language, etc. by anyone associated with Camp, **I will in Christian love come directly to Brother Doug and Mrs. Christina and disclose such information.** Such behavior is detrimental to the ministry of Christ and Camp Jubilee. It is your responsibility as a Christian and as a member of the Summer Mission Team to protect the campers and the reputation of this ministry. If you feel something should be reported, please do so without fear of your name being disclosed.

I, _____, pledge to behave myself in a Christian manner at all times. **I will not at any time with anyone (my own age or adults) encourage a relationship.** Camp Jubilee is not a "Meet Your Mate" facility. **This rule will be strictly enforced!** From day one, if we feel your behavior is inappropriate-you will be dismissed! **If you feel you cannot control your emotions** and behave for 3-6 weeks, **please do not come.**

I, _____, pledge that **I will not leave Camp at any time day or night without permission to do so.** Regardless of your age, while you are serving as a member of the Summer Mission Team, your whereabouts are to be accounted for. If you are reported as leaving at any time, day or night, without letting the directors know, you will be dismissed.

I, _____, pledge that **my soul interest is in serving Christ and having the opportunity to share Christ** through the ministry of Camp Jubilee. I pledge to have my mind on Christ, the intentions of my heart pure, and my goal set to serve Christ at all times.

I, _____, pledge that I will not be alone with anyone of the opposite sex during free time, during laundry time, or at any other time whether on or off camp grounds, etc.

NOTARIZED PERMISSION FORM FOR SPECIAL ACTIVITIES

(ACTIVITIES ARE SUBJECT TO CHANGE)

_____ has my permission to participate in the off camp activities
 (Name)
 while at Camp Jubilee. _____ will be attending camp on the
 (Name)
 following dates _____ with _____.
 (Dates Attending) (Church or group name or as SMT)

_____ has my permission to participate in the off and on camp
 (Name)
 water activities of Camp Jubilee. _____ will be attending camp
 (Name)
 on the following dates _____ with _____.
 (Dates Attending) (Church or group name or as SMT)

Signature of Parent/Legal Guardian

Date

****Notarization Required****

Notary Signature

Date

****Notarization Required****

MEDICAL FORM-CAMP JUBILEE

MAILING INFORMATION

NAME: _____

ADDRESS: _____

PHONE: _____

RELATIVE NAME: _____

(Person to contact in the event of an emergency)

ADDRESS: _____

PHONE: _____

Health Insurance Information Health Insurance

Company: _____

Insurance Company Address: _____

Policy Number: _____

Insurance Company Phone Number: _____

**PLEASE ATTACH A COPY OF YOUR INSURANCE CARD
TO THE BOTTOM OF THIS FORM.**

Notary Signature

Date

Permission Form

*****I hereby grant permission for my child, _____, to
(Child's name)

attend Camp Jubilee on the following dates, _____, and to be under
(Dates attending camp)

the care of _____ from _____.
(Person in charge from your church/group) (Name of church or group)

In the event of a medical emergency, I understand that every effort will be made to contact the parents or guardians of the campers. In the event that the parents or guardians cannot be reached, I give my permission for _____ to select, but is not limited to the
(Person in charge)
following: a hospital, physician, order injection, anesthesia, or surgery for my child as named above. I also affirm that the information on the previous medical form is correct and complete.

Many of our activities are a Christian Camp/Agritourism setting. Therefore, under Tennessee law, there is no liability for an injury or death of a participant in an Agritourism activity.

Signature of Parent/Legal Guardian

Date

****Notarization Required****

Notary Signature

Date

Summer Mission Team Application

Name _____
Last Mi First

Address _____

City _____ State _____ Zip _____

Age _____ Occupation _____ Phone _____
(If student, name of school or college)

Birthdate _____ Male _____ Female _____

Name of Employment _____ Position _____

Church Attending Regularly _____ Member: Yes or No

Church Address _____

City _____ State _____ Zip _____

Pastor's Name _____ Phone Number _____

Does the Pastor know you personally? Yes or No

If you answered no, please suggest the name of another minister or church leader to whom we could go to for additional information regarding your application.

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

What training or experiences have you had in the area of church related work such as VBS, Sunday school teacher, music leader, trainings, classes, etc.?

What experiences have you had in evangelism such as visitation, mission work, etc.?

Answer the questions below briefly and include scripture references. These would be scriptures that you would use when sharing Jesus with others.

Why do we need to be saved?

What did Christ do to save sinners?

Give an example of you explaining to someone how to be saved.

How do you know that you are a Christian? (Include how and when you were saved.)

To be an effective part of the Summer Mission Team, it is important that you are first a Christian and that you are willing to share what Jesus has done in you and share with others how they too can be saved. I understand that I may be asked to share my salvation experience and that I need to be able to share the basic plan of salvation with any individual that comes forward during a worship service.

Signature

Date

We require at least two letters of recommendation from people who have either worked with you or know of your work experiences with youth and children. Please give addresses and phone numbers of the people you have requested to send us a recommendation letter.

Commitment:

I, _____, as a SMT member at Camp Jubilee, agree to conduct myself at all times in a **Christ like manner**. I agree to abide by all rules set by the camp and agree to serve to the best of my abilities in the position I am assigned.

I, _____, also understand and agree to the **“No Couples”** policy set by camp. I agree that while on the job at a Christian camp I need to **focus on the campers and their needs** and I cannot do this if I am distracted by a relationship. I understand that I will be asked to leave if this becomes a problem and I furthermore agree to **accept full responsibility for my actions**.

I, _____, will diligently pray for God to lead me as I lead others at camp. **I will prepare myself through Bible study and prayer** each day prior to and during my camp stay. I will seek God’s guidance in all that I say and do and will have faith and trust His leadership.

I, _____, understand that whatever my age, **I am under the authority of the Directors of Camp Jubilee** and will graciously serve under those in charge.

Commitment Signature: _____

Witnessed By: _____

I AM GIFTED IN THE FOLLOWING AREAS: (CHECK ALL THAT APPLY)

Teaching _____	LifeGuard _____	Sports _____	Singing _____	Crafts _____
Piano _____	Guitar _____	Horn _____	Drama _____	Keyboard _____

Other (Please list below what “other” area you are gifted in.)

I enjoy working with ages _____.

I am gifted and have had experiences in teaching children. yes ____ no ____

I have worked in VBS. yes ____ no ____ If yes, in what area(s)? _____

Do you drive? Yes ____ No ____

If yes, will you be bringing your own vehicle to Camp? Yes ____ No ____

If yes, please complete the section below.

Make & model of vehicle _____ Year _____

Color _____ Tag # _____

Please send a picture of yourself to be filed with all of your other registration information for our Summer Mission Team Folder.

ATTACH PHOTO HERE

Psalm 139:14 *I will praise thee; for I am fearfully and wonderfully made: marvelous are thy works; and that my soul knoweth right well.*

T-SHIRT ORDER FORM

Individual T-Shirt Order Section

(For Summer Mission Team Workers, Staff, and others not coming in a group)

I, _____, will need...

_____ Adult Small

_____ Adult Medium

_____ Adult Large

_____ Adult X-Large

_____ Adult XX-Large

_____ Adult XXX-Large

PACKING FOR CAMP:

****Enough Clothes---be sure to bring enough clothes, but don't bring anything you don't want damaged. Camp has a way of making new clothes old and old clothes older.

- _____ Pants (blue jeans)
- _____ Toothbrush & paste
- _____ Shorts (**no short-shorts**)
- _____ Shaving supplies
- _____ T-shirts & tops
- _____ Bath soap & supplies
- _____ Bath Towels
- _____ Swimwear (**one piece only**)
- _____ Night wear (pajamas)
- _____ Bible
- _____ Flashlight
- _____ Prescribed medications, if needed
- _____ Over the counter medications (ex: for headache or stomach aches) Please don't try any new medicines; bring only medicines you are familiar with.
- _____ Bug spray (a brand you are familiar with)
- _____ Sunscreen
- _____ Old tennis shoes (very important because of rocks, sticks, and stumps)
- _____ Flip flops
- _____ Bed sheet set (Twin Size)
- _____ Watch
- _____ Clothes hangers
- _____ Lotion
- _____ Sunburn lotion
- _____ Camera (please bring disposable cameras rather than your mom's new digital camera)
- _____ Pillow
- _____ Blanket
- _____ Backpack
- _____ Sleeping bag
- _____ Hair supplies (if you have long hair you may need something to keep hair up)
- _____ Hat (optional)
- _____ Spending money for trips out, snacks, extra supplies, etc.

Medical & Liability Release Form

Participant's Full Legal Name: _____

By signing this form, I agree that I have read and do agree that Ronnie Owens, Ronnie Owens Ministries, Camp Jubilee, Inc., or staff will not be held in any way responsible for any accidents or injuries either coming or going during this trip. This will include but is not limited to accidents that may occur on or off camp, or in relation to any equipment I may be using. This includes the waterslide, pool, climbing wall, or participation in any other activities.

I understand that I am taking this trip and participating in any activities with full knowledge that any and all accidents/injuries will be my responsibility in all aspects. This will include and is not limited to any and all legal and medical responsibilities. I understand that Ronnie Owens, Ronnie Owens Ministries, Camp Jubilee, Inc., or staff is not responsible for any accidents that may occur during this trip. This includes, but is not limited to, accidents, death, or dismemberment.

I understand that Ronnie Owens, Ronnie Owens Ministries, Camp Jubilee, Inc., or staff does not provide a guide for tubing, hiking, or any other off camp activity. I understand that Ronnie Owens, Ronnie Owens Ministries, Camp Jubilee, Inc., or staff will provide no lifeguard or medical personnel for any and all off camp activities or trips. I also understand if I become separated from the group and become lost, injured, dismembered or if death were to occur that Ronnie Owens, Ronnie Owens Ministries, Camp Jubilee, Inc., or staff is not responsible.

I understand that I am to wear a life jacket at all times during the tubing trips and have been instructed to do so for my safety. I understand that Ronnie Owens, Ronnie Owens Ministries, Camp Jubilee, Inc., or staff is not responsible for any injury, death, or dismemberment in relation to any equipment or equipment used on or off camp and that I am taking full responsibility for any and all activities.

By signing this document I am confirming that I have read this document in its entirety and I am in full understanding and agree to all of the above terms.

SMT Participant _____ Date _____

Parent/Guardian Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

(This form must be signed by **both parents** and/or **legal guardians** if under the age of 18, if still living at home, or if the participant is still the responsibility of parents or guardians. This document must be signed by participants 18 and over including all adults, chaperones, and any and all people participating in any and/or all activities in relation to Ronnie Owens, Ronnie Owens Ministries, or Camp Jubilee, Inc.)

Notary Signature _____ Date _____

Witness _____ Date _____

Photo/Video Permission Form

I, _____, the parent/legal guardian of
 (printed name of parent/legal guardian)

_____, grant Ronnie Owens, Ronnie Owens
 (name of camper/chaperone)

Ministries, Camp Jubilee, Inc., or staff my permission to use photos/videos taken
 of _____ for any legal use, whether in print,
 (name of camper/chaperone)

digital, or web-based format, including but not limited to: publicity, copyright
 purposes, illustration, advertising, social media, newsletters, and/or web content.

Furthermore, I understand that no royalty, fee, or any other compensation shall
 become payable to me by reason of such use. I hereby authorize and hold harmless
 Ronnie Owens, Ronnie Owens Ministries, Camp Jubilee, Inc., and staff from any
 reasonable expectation of privacy or confidentiality associated with any images or
 video taken by Ronnie Owens, Ronnie Owens Ministries, Camp Jubilee, Inc., or
 staff.

Parent/Legal Guardian Signature

Date

Notary Signature

Date

Directions to Camp Jubilee

If using GPS, type in 3316 Owens Ridge Rd. Sneedville, TN instead of Tazewell.
GPS could read Owens Rd—that will work.

Coming from south:

Take I-40 to 640 East to the Broadway exit. Turn left.
Come through Maynardville into Tazewell.
Go to the last red light which will be at Hwy 345/Cedar Fork Rd and turn right.
Go 8 ½ miles.
Turn right onto 63 East/Alanthus Hill Rd.
Go 5 miles, come to a dead end, and turn left.
Go 1 mile; then turn right onto Powell River Rd.
Camp is ½ mile on the left.
Follow Camp signs.

Coming from north:

On I-75, take the first Corbin, KY exit and turn left toward Middlesboro, KY.
Go all the way through Middlesboro. Stay in the right lane through the tunnel. Once outside the
tunnel, take the ramp to Hwy 58.
Go 13 miles to Ewing, VA and turn right at the flashing light/People's Bank Rd.
Go 1 block to a dead end and turn left onto Thomas Walker Rd.
Go 1 mile and turn right onto Hwy 744/Willow Tree Rd. (will cross into TN).
Go 6 ½ miles and turn left onto Powell River Rd.
Camp is ½ mile on the left.
Follow Camp signs.

Camp Contact Information:

Camp Office (423) 733-8581
Doug Odle (276) 346-7487
Christina Odle (912) 288-3353

Email: camp.jubilee.tn@gmail.com

Follow us on social media:
Facebook—Camp Jubilee-TN
Instagram—camp.jubilee.tn

Please mail payments and all paperwork to PO Box 186, Cumberland Gap, TN 37724 and remember
to make checks payable to **CAMP JUBILEE**.