

Hello,

We are excited about another summer here at Camp New Dawn. I just want to inform you a little about who we are and what happens around here during the summer. The purpose of New Dawn International Ministries is to provide opportunities to share the love expressed by God on the New Dawn of Christ's resurrection.

My philosophy on summer camps is to provide a schedule that is upbeat and exciting, since **camp is for the campers**. If campers have a good time they will likely return and when they return we have another chance to share and show the love God has for them, which is the reason we are here. My favorite story to tell is of a young boy that kept coming back to camp. The first few years he came he was sent home early for many reasons; including hitting the camp director in the head with a stone, throwing stones at other campers and not respecting the counselors. One summer he was sent home the first day. Yet he would always return to camp, and one year he finally made it through the whole week, barely. He is now a teenager and every one loves him. He is a great kid and will probably be a junior counselor within the next few years. It is always good to see how God can change a child's life over the years through the camping ministries.

A typical day of camp is from 7:30(ish) to 10:30(ish). Throughout the day there are many different activities, which include marksmanship (bow & arrow, BB guns & slingshot) crafts, nature, cooking, gardening, juggling, photography or any other class that a counselor can teach. Swimming time is in the afternoon, which we hope to enjoy in the two-acre pond now in the process of being dug. At least twice a day, different camp games will be played. Cove Adventure week and soccer camp schedules are a bit different, but will be equally enjoyable.

Each morning and evening campers will help out with some farm chores, which they really like. We are now building up a farm with many different types of animals so that the campers can see and experience where their food comes from. Right now we have 11 laying chickens, 6 barbado sheep and 6 long horn cows with three calves. We are planning to have a garden this summer also.

Meals will be adventurous, too. Breakfast and lunch will be served in the dining hall, but for the evening meal we will be eating outside at different locations around camp.

There are four different Bible times, one in the morning before breakfast where a staff member will give their testimony to all the campers. After breakfast each cabin goes off by them selves and has a devotional time, which is lead by the counselor. Just before lunch we play different games to help the campers learn the Bible. The last part of the day everyone will go to our amphitheater, a stage with seats going up the hill, and the counselors will perform skits and we will sing a few songs. Afterwards the counselors will take their campers back to their cabins to have a debriefing time.

I want God to be the center of this camp and, if you are accepted, you have a big part in sharing His love to the campers assigned to you. You will have a great influence over them because of the large amount of time you spend with them. Campers will look up to you and listen to what you have to say. Not only is this encouraging to you, but it also puts a lot of responsibility on you and how you act around your campers. I am sure that you will grow and hopefully you will be stretched during the summer. I also know that you are human and you will make mistakes. It is not whether or not you will fall, but how you get up afterwards that matters. I am going to ask you, as this is my first year as program director, for grace as I learn how to run a camp. Together, with God's grace and strength, I pray that we will be able to encourage and challenge each other through these five weeks of camp. I also would ask that you would start to pray for the campers that will be coming here this summer and how God is going to change their lives. Please also pray for the other staff members that will be apart of this team serving God here at Camp New Dawn.

We pay a small stipend of \$100 per week, plus room and board. If you have any questions, please feel free to contact me. Thanks!

Justin T. Hollinger

**Counselor Application  
Camp New Dawn  
226 South Cedar Lane  
Chickamauga, GA 30707**

Name \_\_\_\_\_ Birthday \_\_\_\_\_ Male/Female \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Please Check Position Desired:  
 Counselor  Nurse  C.I.T.

Are you certified in any of the following:  
 CPR  Lifeguard  WSI  Medical training: \_\_\_\_\_  
 First Aid  Archery  Riflery

Do you sing or play any musical instruments? If so, which ones? \_\_\_\_\_  
\_\_\_\_\_

Explain how/when you became a Christian? What does Jesus means to you? How you are growing spiritually?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Church attending \_\_\_\_\_ Denomination \_\_\_\_\_

Why do you want to work at Camp New Dawn?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your spiritual gifts? Who are you?  
\_\_\_\_\_  
\_\_\_\_\_

What areas of your life do you need to work on?  
\_\_\_\_\_  
\_\_\_\_\_

Has anyone threatened to file a civil or criminal action against you for physical or sexual abuse or sexual harassment?  If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

Has any employer taken or threatened to take adverse employment action against you for reasons relating to sexual abuse or sexual harassment? \_\_\_\_ If yes, explain: \_\_\_\_\_

Have you received any medical treatment, physical or psychological, for reasons involving physical or sexual abuse? \_\_\_\_ If yes, explain: \_\_\_\_\_

List the schools you attended:	Years	Degree
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Jobs (list most recent)	Years	Reason for leaving?
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Volunteer Jobs	What did you do?
_____	_____
_____	_____
_____	_____
_____	_____

Please give three references that are not relatives and one must be your pastor:

Name	Relation	Phone #	Address
_____	Pastor	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If accepted, I agree to follow the employee guidebook, become familiar with and adhere to policies and procedures to enhance the mission of Camp New Dawn and exhibit Christ in a safe environment for each camper. I will comply with a drug test and background check when requested to do so. I understand the terms of the position applied for. If I choose to raise more money for my salary, I will direct donations to New Dawn International Ministries, Inc.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

# Camp New Dawn

## Summer Camp 2006

### Medical Form

Name \_\_\_\_\_ Birthday \_\_\_\_\_ Male/Female \_\_\_\_\_  
 Address \_\_\_\_\_

In case of an emergency:

Parents Name \_\_\_\_\_  
 Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Person to notify if unable to contact parent in the event of an emergency:

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

#### Health History

Do you have or are you subject to: (check if YES)

\_\_\_\_ Asthma \_\_\_\_ Fainting spells \_\_\_\_ Convulsions \_\_\_\_ Heart Trouble \_\_\_\_ Dietary Restrictions  
 \_\_\_\_ Allergy or reaction to medications \_\_\_\_ Work, Swimming, Sport or other restrictions, \_\_\_\_\_ others

If any of the above are checked please describe: \_\_\_\_\_

Please give approximate dates of occurrences, mild or sever:

_____ Frequent Ear Infections	_____ Last Tetanus Shot	
_____ Heart Defect Disease		<u>Diseases</u>
_____ Convulsions		_____ Chicken Pox
_____ Diabetes	<u>Allergies (Check as apply)</u>	_____ Measles
_____ Hypertension	_____ Hay Fever	_____ Mumps
_____ Mononucleosis	_____ Poison Ivy	_____ Other
_____ HIV Positive	_____ Insect Stings	Do you have a problem with:
_____ Mental Disabilities	_____ Penicillin	_____ Sleep Walking
_____ Other Problems	_____ Other	

Name of Family Physician \_\_\_\_\_ Phone \_\_\_\_\_

Do you carry family medical hospital insurance? \_\_\_\_\_ Carrier Name \_\_\_\_\_

Policy ID# \_\_\_\_\_ Phone \_\_\_\_\_

Please list medication you will need to take during the summer

Name of medication	How many:	How often:	Reason for medication
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

This health history is correct as far as I know, I will engage in all camp activities except as noted. I hereby authorize the executive staff of Camp New Dawn or medical professionals they may designate to administer emergency medical assistance. I accept responsibility for payment of expenses incurred as a result of medical treatment. The undersigned further releases Camp New Dawn from any and all actions, causes of action, liability, claims and demands upon or by reason of any damages, loss, injury or suffering which may occur. I also give permission for any photos taken of myself/my child to be used in advertising and for records retained by Camp New Dawn.

Signature of applicant \_\_\_\_\_

Date \_\_\_\_\_

(If applicant is under the age of 18)

Signature of parent \_\_\_\_\_

Date \_\_\_\_\_