 2020 IDAHO SOUTHERN BAPTIST CAMP

**LEADER INFORMATION**

**Leader’s Name**

**Member of what church? City**

**Have you ever been convicted of or pleaded guilty to a crime? Yes No** (circle)

**If yes, please explain. Attach a separate sheet if necessary.**

**Do you have CPR or other first aid training? Explain**

**Church attending camp with City**

**PASTOR ENDORSEMENT** (for Cabin Leaders only)

**Church Name City**

**Pastor Office Phone**

**Church/Pastor’s email**

**How long have you known this person?**

**Do you believe this person is spiritually mature, emotionally stable and physically capable enough to chaperon a week at Momentum Kids camp?**

**Do you know of any lifestyle, conduct or activity in which this individual is involved that might hinder the utmost safety of our campers or impede the program’s credibility? Please explain:**

**Pastor’s Signature: Date:**