

# Butler Springs Christian Camp

## Teens—N—Training

3701 State Route 41 Hillsboro, OH 45133

937-588-2205

butlersprings.com

info@butlersprings.com

TNT Applications ***MUST be submitted before March 31*** for consideration. Dates will be on a first come, first serve basis.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Grade Entering This Fall \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Email address \_\_\_\_\_ @ \_\_\_\_\_

You will be contacted at this email address

Home Church \_\_\_\_\_ Baptized? **YES NO**

Name of Parents/Guardian \_\_\_\_\_

First Calendar Week of Camp you wish to work \_\_\_\_\_

Second Calendar Week of Camp you wish to work \_\_\_\_\_

Camp Session you plan to apply the \$180 credit \_\_\_\_\_

If camp session exceeds \$180, send payment along with TNT form. \$180 credit applied only if you complete 2 entire weeks.

Go ahead and register online for your desired camp session prior to sending this form to the camp office.

Volunteer Shirt Size:      Small              Medium              Large              X-Large              XX-Large

I want to serve in:    Kitchen              Grounds              Housekeeping

My signature give my permission for the name listed above to participate in all activities of the camp program, including the Ropes Course and to work in the designated area assigned.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teen's Signature

\_\_\_\_\_  
Date

For Office Use Only:

Accepted By: \_\_\_\_\_ Date Accepted \_\_\_\_\_

Notes \_\_\_\_\_