



CHRISTIAN YOUTH CAMPS

OF SOUTH AUSTRALIA INCORPORATED
ABN 86 857 437 624

196 EL SHADDAI ROAD WELLINGTON SA 5259
PHONE (08) 8572 7262 FAX: (08) 8572 7135
www.cycsa.org.au email@cycsa.org.au

Leadership Checklist

Thank you for considering a leadership position with CYC. This document contains two forms (Leader Commitment Agreement and Leadership Application Form) that need to be filled out in full. Each form will last for 12 months.

Please read and sign the appropriate documentation, then scan and email it to Peter Breuning at

peter@cycsa.org.au

Have you done these things?

- Pray about leading at camp
- Fill in Leadership Application form
- Sign the Leadership Agreement form
- Have you provided us with Criminal History Check (if you do not have one contact the camps coordinator)
- Read the Leadership Training Manual
- Return; Leaders Application form, Leadership Commitment Agreement form and a Criminal History Check to the above address or email
- Continue to pray for camp



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Leaders Commitment Agreement

I _____

(Please print full name)

understand that to participate in any leadership role with Christian Youth Camps, I will be committing myself to:

- Understanding and abiding by the expectations of a cabin leader as outlined in the 'Leadership Training Manual'
- Ensuring that my motivation for coming to camp, is to share the gospel of Christ
- Having a belief in God as my Savior and a good understanding of who Christ is, the purpose of the bible and a commitment to sharing my own personal Christian faith
- Participating in leadership training
- Taking the time to pray before, during and after camp
- Accepting accountability to camp directors and CYC staff
- Supervising and ensuring the safety of all campers, encouraging participation and helping to create a fun, friendly and safe environment
- Striving to achieve the aims of CYC
- Understanding that my attitude and behavior as a camper, and in my personal life, contribute to my assessment as a leader
- Living a life that demonstrates my faith in Christ and striving to become more godly in all that I do, whether at camp or outside of camp
- Follow all of the statements within the CYC El Shaddai code of conduct for volunteers

Signed: _____ Date: _____



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LEADERSHIP APPLICATION FORM

Section 1: Personal Details

Full Name: _____

Which camp you are applying to lead on: _____

Address: _____

_____ Postcode: _____

Phone: (home) _____ (Bus) _____ (Mob) _____

Email: _____

Date of birth: _____ Male: [] Female: []

Church attending: _____

Occupation: _____

Section 2: Medical Information

Do you have any dietary needs that we need to consider while you are at camp? _____

Do you have any health problems or medical conditions that we need to be aware of? _____

Emergency Contact person: _____

Phone: (Home) _____ (Bus) _____ (Mob) _____

Medicare No: _____ Number: _____ Expiry: _____

Do you have a current 'Provide First Aid' certificate of equivalent? _____

I understand that although Christian Youth Camps of SA, its staff and leaders will take utmost care, they will not accept responsibility for any illness, accident or damage to me or my property. In the event of illness or injury on camp I authorize the obtaining of medical treatment, and agree to pay for any medical and hospital treatment.

I am also aware and give my permission to allow CYC and any of their staff / leaders to complete a police check ensuring my suitability for this position.

Applicant's signature _____

Parent / Guardians Signature _____ (Required if under 18)

Section 3: Christian Leaders Endorsements

Pastor / Elder

The applicant is a regular attendee at the Church where I am a Pastor / Elder. I believe the applicant has made a personal commitment to Christ and I believe they would be suitable and able to fulfill the duties listed on the front page of this application form.

Signature _____

Date _____

Name _____

Church _____

Position / Title _____

Phone No _____

Bible Study / Discipleship / Home Group Leaders / Mentor

I believe the applicant has made a personal commitment to Jesus Christ and continues to grow in their personal walk and relationship with Him. I believe that they would be suitable and able to fulfill the duties listed on the front page of this application form.

Signature _____

Date _____

Name _____

Church _____

Group _____

Phone No _____

If you have any concerns about the suitability of this applicant please phone the camps coordinator (Peter Breuninger) on 8572 7262 to discuss further

Please scan and email the completed form ASAP to

Peter Breuninger at

peter@cydsa.org.au

It is a requirement to have these endorsements to lead on a camp!!!