

Mission Camp Macon

Mission Camp Commitment and Recommendation

Please read and completely fill out this page first

Mission Camper's Name: _____ Age: _____

Are you coming with a church group? YES NO If "yes"

Mission Camper's Church: _____

Important: please read the following general information about the areas of ministry need for MCM before you sign below. **You will only be helping with one of these areas during the week.**

- a. **Teen Camp** – lead, minister to, work with and play sports with teenagers from Macon, MS each morning Tuesday through Friday; be prepared to share your testimony with participants and to share a brief Bible Study each morning (training provided); this is primarily intended for mission campers who enjoy the various sports activities that we will offer and who would be willing to be available to use those activities to share Christ with other teens.
- b. **Kids Camp** – minister to, work with, and play with children (ages 7-11) in Macon each morning Tuesday through Friday; be a part of the various aspects of providing a quality day camp experience for children and share Christ with them through games, crafts, stories, music, puppets, and one-on-one ministry.
- c. **Work Camp** – do light skill manual labor to serve needy people in the Macon community and to address special community needs, be the MCM "prayer force" each morning, and/or canvass the community for the Friday **Camp Macon Family Night** event.

Mission Camper's Commitment: I am willing to do whatever is needed during Mission Camp Macon to lift up the name of Jesus Christ to the community of Macon, MS. I am indicating my areas of ability, preference, and experience on the back of this page. I am also submitting a one page typed testimony about my present walk with Jesus Christ including why I want to serve as a mission camper for Mission Camp Macon. I commit to be praying for God to use me as an ambassador for Christ (2 Cor. 5:20) for MCM and I commit to pray for a mighty work of God to be done in Macon, MS.

Signature _____ date _____

Minister's Recommendation: (required) I recommend this young person for the work that he/she indicated on the reverse side of this page. I acknowledge that he/she is qualified for the tasks that he/she listed and I will make sure that supervision is given for his/her preparation for Mission Camp Macon to ensure that the preparation instructions that we receive are carried out completely prior to Mission Camp.

Signature of Minister: _____ date _____

Minister's address and phone # if he isn't attending M.C.M. with you:

_____ phone: _____