



## CAMP SPEAKER APPLICATION 2025

Fishing Lake Bible Camp

PO Box 1060

Wadena, SK S0A 4J0

[fishinglakebiblecamp@gmail.com](mailto:fishinglakebiblecamp@gmail.com)

### CHECKLIST

I've read the Speaker Guidelines ( )

I've filled out the Application ( )

I've got my Criminal Record Check ( )

Please return completed application  
by mail or email.

### PERSONAL INFORMATION

First & Last Name: \_\_\_\_\_

Birth Date: (m/d/y) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Gender: ( ) Male ( ) Female

Address: \_\_\_\_\_

City & Province: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email: \_\_\_\_\_

### 2025 DATES: (Please indicate availability)

( ) **Staff Training:** 11am on June 30 - 6pm on July 3

( ) **Intermediate Camp (9-11yrs):** July 7-11

( ) **Jr Teen Camp (11-13yrs):** July 14-18

( ) **Scamper Camp (fin. Gr 1-9yrs):** July 21-24

( ) **Teen Camp (14yrs-Gr 12):** July 28-31

### HEALTH INFORMATION

Health Card Number: \_\_\_\_\_

( ) Yes ( ) No Do you suffer any medical (physical or mental) conditions that may restrict normal camp activities? If yes, please explain: \_\_\_\_\_

( ) Yes ( ) No Have you been treated by a health professional for any medical conditions in the past 12 months? If yes, please explain: \_\_\_\_\_

( ) Yes ( ) No Do you have any severe allergies?  
If yes, please explain: \_\_\_\_\_

( ) Yes ( ) No Do you have any dietary restrictions?  
If yes, please explain: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Name: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

I declare this health information to be accurate to my knowledge. I hereby give permission to the doctor/nurse selected by the camp to provide me with medical treatment in case of emergency.

Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Signature \_\_\_\_\_  
MM DD YY

## CHURCH INVOLVEMENT

What church do you attend? \_\_\_\_\_

How regularly? \_\_\_\_\_

Pastor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Before submitting, have you talked with your Pastor about your application?** ( ) Yes ( ) No

*We want this to be an extension of your ministry to your church, so our preference is that your pastor knows you are serving at FLBC. We only hire staff who have a personal relationship with Jesus and are actively part of their local church.*

What has your church or community involvements been in the last two years?

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Do you enjoy speaking to kids/young adults and sharing the gospel? Have you ever done this before?

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**FAITH EXPERIENCE:** Please use an additional sheet of paper if needed.

How did you become a Christian? When?

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How would you lead someone to Christ?

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Describe your current relationship with the Lord, including your current devotional and prayer life.

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What is God currently teaching you through His Word, life experiences, and/or people?

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What areas do you feel you need future growth/development?

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What limitations would you have in being a Camp Speaker for the duration of the session?

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## REFERENCES

In addition to your Pastor's contact information that you already listed, please provide the names and contact information two adult acquaintances over 25 years of age, who are not relatives. (Please inform your references that you have used their name.)

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

All staff 18 and over of Fishing Lake Bible Camp must submit a completed copy of their **RCMP Criminal Record & Vulnerable Sector Check** prior to the first day of work. These checks can be obtained at your local RCMP or Police detachment. Inform the officer who does that check that you will be working as a volunteer at Fishing Lake Bible Camp. We can provide a letter stating you are volunteering if needed.

( ) Yes ( ) No Have you been convicted of a criminal offence? If yes, please explain:

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## REMUNERATION

Speakers are given an honorarium of \$60 per message plus mileage (capped at \$500).

## AGREEMENT

In submitting this application I declare that all of the information is accurate and true to the best of my knowledge. I agree to conduct myself in a Christ-like manner in the way that I treat others, dress, and adhere to camp rules. I agree to allow FLBC to use pictures taken while camp is in session for use in camp promotional material.

I forever release Fishing Lake Bible Camp, its trustees and directors from any loss, personal or bodily injury, accident, misfortune, or damage to myself and my property, and all claims, demands, actions and costs that may arise from participation and use of the camp grounds, waters, and facilities.

I authorize FLBC access to information with respect to my person from Police/Child Abuse registry files. I understand if I am a paid staff it will be by honorarium and not hourly.

Date         /     /         Signature \_\_\_\_\_  
MM      DD      YY                          (Signature of Applicant)