



CAMP OLLA 2022 **ON**

MONITOR ON CAMPUS REGISTRATION

NAME _____

GENDER M F *Must be 21 or older to be a monitor

AGE DURING CAMP ____ BIRTHDAY ___/___/___

ADDRESS _____

CITY _____ STATE _____ ZIP _____

MOBILE PHONE (____) ____ - ____

KNOWN MEDICAL CONDITION(S) WE SHOULD BE AWARE OF:

FOR WEEK OF

JULY 5-7

JULY 11-15

TOTAL DUE **\$80**

PAYMENT TYPE

CASH CHECK

OFFICE USE

EMERGENCY CONTACTS

#1 NAME _____ (____) ____ - ____
RELATIONSHIP _____

#2 NAME _____ (____) ____ - ____
RELATIONSHIP _____

CHURCH AFFILIATION

PASTOR _____ CHURCH NAME _____

1. HAVE YOU RECEIVED THE GIFT OF THE HOLY GHOST? Y N

2. HAVE YOU BEEN BAPTIZED IN JESUS' NAME? Y N

3. HAVE YOU BEEN CONVICTED OF ANY CRIMES INVOLVING INAPPROPRIATE BEHAVIOR WITH CHILDREN? IF YES, PLEASE EXPLAIN _____
 Y N

PLEASE ASK YOUR PASTOR TO SIGN/APPROVE THAT YOU ARE SUITABLE AS A MONITOR

Please circle your T-shirt size below so we can try to have one available for you. T-shirts are guaranteed for those who registered early online.

YOUTH XS S M L XL ADULT XS S M L XL 2XL 3XL 4XL

We ask that all guests abide by the rules and guidelines set forth by the State Board of the Louisiana District (ALJC). Understanding that the ALJC is a holiness organization, I agree to abide by all rules and guidelines that may be found of aco fla.c.com.