



MERSEYSIDE CHRISTIAN
YOUTH CAMPS
 BE PART OF IT

Staff Registration Renewal Form

Please complete this form together with your application for an enhanced CRB disclosure. Please use BLOCK capitals

Completing this form is part of the process of making sure all our volunteers are as prepared as possible to work with God's precious gifts, children and young people.

If you attend a week at camp you will be part of a team which has the responsibility for the physical and spiritual lives of children and young people. Consequently, we would ask you to prayerfully think about your application and your ability to undertake the role you are considering, whether you are willing to undertake training and attend pre-camp preparation meetings.

When you have determined which week of camp you will be going to, please fill in a form for a specific week

Title:..... Surname: Forename(s):

Address:

..... Postcode:

Tel No: (Day) (Eve) Mobile

E-mail address:

Contact Address: (if different from above)

..... Postcode:

What church do you attend?

What is your understanding of being a Christian?

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How and when did you become a Christian?

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In order to assess training needs for camp, please provide the following information:
Please state any experience you have in youth or children's work, either inside or outside the church:

Please state any practical experience (e.g. crafts, IT, photography, sports interests etc.) :

Please state any relevant qualifications or practical training certificates you have (e.g. food hygiene, life saving, first aid, climbing, canoeing, coaching etc.) : please give details and the dates qualifications were obtained:

Please state any experience you have had of leading/speaking at meetings (adult or children/young people) :

What is your present job or occupation?

Do you have experience/training in catering? No / Yes* If yes, what?

Would you be willing to serve as part of a catering team? No / Yes*

Can you play a musical instrument? No / Yes* If yes, what?

Please specify any training needs you feel you may have

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If you have been to any other camps, please specify the organisation, your role and when you went

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Please state any other experience you have which would be of benefit at camp

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Would you be willing to attend short courses paid for by MCYC? No / Yes*

* Please delete as applicable

Thank you for taking the time to fill in this application form.
If you are unsure about any part of this form or how to complete it, please contact our office on 0151 651 0258
We will pray for you and your application. God bless you.

**Please return this form as soon as possible to
MCYC, PO Box 136, Prenton, Wirral, CH43 1WR**

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