

# Youth Camp Staff/Volunteer Pastor Approval Form

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Thank you for your willingness to serve as a volunteer for our District Crusaders Camp. To ensure accountability and spiritual covering, we require all volunteers to receive approval from their local pastor.

Please complete the information below and have your pastor sign and return this form.

## Volunteer Information

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

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

City: \_\_\_\_\_

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

Have you ever been convicted of a crime involving a minor? Yes \_\_\_ No\_\_\_

I authorize Texico District UPCI to run a background check as part of this application.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Pastor's Approval

As the pastor of the above-named individual, I affirm the following:

- They are an active member in good standing at our local church.
- They are trustworthy, responsible, and capable of serving in a childrens ministry environment.
- I give my full approval for them to serve as a volunteer at our District Crusaders Camp.

Pastor's Name (Print): \_\_\_\_\_

Pastor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone/Email Contact: \_\_\_\_\_

Contact Info:

Director: Joel Guillen 575-571-1959

Secretary: Justin Newcomb 505-526-0589