

# Highland Lakes Camp and Conference Center

5902 Pace Bend Rd. N. • Spicewood, TX 78669  
 1.888.222.3482 • 512.264.1777  
 www.highlandlakescamp.org

## Team Servant Application

Date: \_\_\_\_\_

Name (Last, First, Middle):		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Age:	Date of Birth:
Address		Height:	Weight:	T-shirt Size:
		Social Security Number:		
Home Phone:	Classification at the end of Spring semester:			
Cell Phone:	What are your plans for life after high school?			
E-mail Address:	Tentative Vocational Choice:			
List school organizations to which you belong, and offices held:		List ministry-related or church-related work experiences, part-time, full-time, or volunteer:		
If you have now, or have had any of the following, please indicate: <input type="checkbox"/> Asthma <input type="checkbox"/> Seizures <input type="checkbox"/> Diabetes <input type="checkbox"/> Heart Trouble <input type="checkbox"/> Tuberculosis <input type="checkbox"/> Stomach Trouble <input type="checkbox"/> Migraine <input type="checkbox"/> Nervous Disorder Headaches <input type="checkbox"/> Psychiatric Counsel <input type="checkbox"/> Mononucleosis <input type="checkbox"/> Recent Serious Injury or <input type="checkbox"/> Severe Allergies            Surgery (Describe below): (List below):		Do you have a physical disability or serious illness? <input type="checkbox"/> Yes <input type="checkbox"/> No   If yes, specify below:		Are you currently under any medication? <input type="checkbox"/> Yes <input type="checkbox"/> No   If yes, list below:
		Date of last Tetanus shot:		
Family or personal insurance policy: Insurance Co.: Insurance Co. Address:		My health is: <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor		Check if applicable: I use: <input type="checkbox"/> Tobacco <input type="checkbox"/> Drugs <input type="checkbox"/> Alcoholic Beverages
Policy & Group #:				
Check the weeks you wish to serve. You may choose to serve one or two weeks.				Have previously served in the Team Servant program? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when?
<input type="checkbox"/> June 12-19 <input type="checkbox"/> July 17-24 <input type="checkbox"/> June 19-26 <input type="checkbox"/> July 24-July 31 <input type="checkbox"/> June 26-July 3 <input type="checkbox"/> July 31-August 7 <input type="checkbox"/> July 3-10 <input type="checkbox"/> August 7-14 <input type="checkbox"/> July 10-17				

## EMPLOYMENT HISTORY

Please list the most recent employer first.

1. Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Phone: \_\_\_\_\_ Dates: \_\_\_\_\_  
Position: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_
2. Company: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Phone: \_\_\_\_\_ Dates: \_\_\_\_\_  
Position: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

## CHURCH MEMBERSHIP

Present Church Membership: \_\_\_\_\_ Regular Attendee?  Yes  No  
Church Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Pastor's Name: \_\_\_\_\_ Youth Minister's Name: \_\_\_\_\_  
How long a member there? \_\_\_\_\_ Church Convention Affiliation:  Southern Baptist  Other \_\_\_\_\_  
List your church involvement and leadership experience (ex. VBS, SYATP, Youth Council, etc.): \_\_\_\_\_  
\_\_\_\_\_

## MISSIONS

Have you ever been on a Mission Trip? \_\_\_\_\_ If yes, when? where? \_\_\_\_\_  
Define servant leadership: \_\_\_\_\_  
\_\_\_\_\_  
What does "serve wholeheartedly" (Ephesians 6:7) mean to you? \_\_\_\_\_  
\_\_\_\_\_  
Have you surrendered to the ministry?  Yes  No If so, when? where? \_\_\_\_\_  
Have previously served at a Baptist encampment?  Yes  No If so, when? where? \_\_\_\_\_

## ABOUT YOUR PARENTS (FOR EMERGENCY PURPOSES ONLY)

Father's Name:	Mother's Name:
Address:	Address:
Occupation:	Occupation:
Home Phone:	Home Phone:
Work Phone:	Work Phone:
Cell Phone:	Cell Phone:

## TESTIMONY

In no more than 1,000 words, please attach a brief autobiographical sketch, including the following information:

1. Tell how and when you became a Christian and about your personal growth in your relationship with Christ.
2. What is God teaching you right now about where you need to be and what you need to be doing within the next year?
3. Explain how God is currently using you in your youth group.
4. Why do you want to participate in the Team Servant program?

## PERSONAL REFERENCES

**NO APPLICANT WILL BE CONSIDERED FOR APPROVAL UNLESS MANDATORY PERSONAL REFERENCE REQUIREMENTS ARE MET.** Please fill-in the contact information for three (3) references. In relation to the ministry, choose two (2) from the following list: pastor, associate staff member, Sunday school teacher, church leader (elder, deacon, etc.), or director of a campus ministry you are actively involved in. In relation to your personal life, choose one (1) from the following list: friend, older adult friend, employer, work supervisor, or teacher. Please select people who have known you for at least three years. To ensure we receive the required recommendations, please follow the procedures listed below:

1. Provide us with the name, address, and telephone numbers of three (3) specified personal references.
2. Make three (3) copies of the enclosed Recommendation Form. Keep the original for your files.
3. Distribute one Recommendation Form to each of your three (3) stated personal references.
4. Communicate to your personal references the importance of them returning the form within ten (10) days of receiving. It is suggested that you provide each of your references with a self-addressed, stamped envelope for the quick handling of your request.
5. Each personal reference should mail their completed Recommendation Form directly to:  
**Highland Lakes Camp and Conference Center • Attn: Team Servant Program**  
**5902 Pace Bend Rd. N. • Spicewood, TX 78669**
6. Personally follow up with your personal references to ensure they have completed and mailed your recommendation form within ten (10) days of receiving.

MINISTRY RELATED			
Name and Relation to You	Address	Home Phone	Work Phone
Name and Relation to You	Address	Home Phone	Work Phone
PERSONAL			
Name and Relation to You	Address	Home Phone	Work Phone

When the application has been completed, please mail it as soon as possible to:  
**Highland Lakes Camp and Conference Center • Attn: Team Servant Program**  
**5902 Pace Bend Rd. N. • Spicewood, TX 78669**

Each applicant must:

- Possess a lifestyle that demonstrates a genuine love for and faith in Jesus Christ as Lord and Savior.
- Have completed the 9th grade.
- Be actively involved in a Baptist church
- Possess a passion to share the gospel with individuals in need of salvation.
- Possess a willingness to use your God-given gifts to serve wholeheartedly.
- Be in good physical and emotional health, able to withstand the rigors of nonstop Christian service.
- Complete the application process within ten (10) days of receiving.

I, \_\_\_\_\_, guarantee that to the best of my knowledge all the above information requested has been completed accurately and completely.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



## RULES FOR TEAM SERVANTS

The following rules are listed so that you may know in advance what will be expected of you. The Leadership Team of Highland Lakes Camp urges you to become familiar with and abide by these rules. By respecting these guidelines, you will assist in making our time together a tremendous time of focusing on God and will demonstrate that you are seeking to imitate the lifestyle of Christ Jesus (Eph. 5.1-2). Your example in following these rules will also serve as an example to those around you (1 Tim. 4.12).

1. **Close-toed shoes MUST be worn while working.** The State of Texas requires that you wear close-toed shoes at all times while on duty as a Team Servant. You may only wear sandals or flip-flops during free time to evening worship times.
2. **Head coverings and sleeved shirts MUST be worn while working in the kitchen.** The State of Texas requires that head coverings (bandannas, caps, hair nets, etc.) and sleeved shirts be worn while preparing or serving food.
3. **Under NO circumstances are girls to be in boys' rooms or boys in girls' rooms.** You may stand outside the door in the hallway, but as soon as any part of your body crosses the threshold of the door you have broken this rule. Violation of this rule will lead to immediate dismissal from Highland Lakes Camp. **NO EXCEPTIONS.**
4. **Refrain from public display of affection (PDA) with members of the opposite sex.** This is a week for you to work on your relationship with God and to serve him by ministering to others. The Team Servants program is not designed to help you "pick up" a boyfriend or girlfriend, so put your love life on hold for a week and concentrate on serving God.
5. **Clothing should reflect a godly attitude, and not divert the attention of those around you from their focus on God's word and his purpose in their lives.** Casual clothing is acceptable during all activities throughout the day, unless otherwise indicated. Although it is difficult to indicate every detail of acceptable dress, your clothing should reflect a godly attitude and not divert the attention of those around you from the Lord's purpose for them. Tank tops, spaghetti strap or strapless shirts, blouses, or dresses are not appropriate. Shorts and skirts must be no shorter than fingertip length with arms and hands straight down at sides while standing. Low-cut dress necklines and/or sheer clothing are also not allowed. Shorts will not be allowed during the evening worship services. Students wearing clothing determined to be too short or too revealing will be asked to change. Only one-piece swimming suits are allowed. Repeated disregard for dressing inappropriately will be considered a violation of the rules.
6. **Team Servants must attend ALL scheduled activities.** This includes Bible study sessions, work times, meals, evening worship times, and nightly devotions. There are **NO EXCEPTIONS** unless you are injured, sick, or in the care of a nurse. Being present at all times allows you opportunities to discover how you can apply biblical truths to your own life and in the lives of those you interact with.
7. **Team Servants must wear nametags at all times.** Each Team Servants participant will be issued a nametag upon arrival at Highland Lakes Camp, which is to be worn during all activities throughout the day. Your nametag is your "ID badge" throughout the week that identifies you as unique ministers of HLC&CC. We ask that you wear your nametag above the waist so that it can be easily seen.
8. **Team Servants MUST be in their rooms by 11 PM.** All Team Servants are required to be inside their assigned rooms by 11 PM. Your curfew is for your safety, your mental and physical well-being, and because the daily schedule is very demanding.
9. **Team Servants who are ill or injured must be either in the Highland Lakes Camp Office, medical clinic, or hospital.** In the event of illness or injury, Team Servants will not be permitted to remain in their dorm rooms. If you are ill or injured you will be required to seek medical assistance in the medical clinic until you are able to return to the regularly scheduled activities. This allows us to be certain that your health needs are being met.
10. **Team Servants must indicate what medications they will use at Highland Lakes Camp.** All medications you use or bring are to be listed on the Registration/Medical Release Form and checked by the Highland Lakes Camp nurse at the time you check-in. Do not share any medication, including over-the-counter medications, aspirin or other pain relievers, or prescriptive medication. This protects the safety and liability of students and staff.
11. **Drugs, alcohol, any form of tobacco, firearms, knives or any other kind of weapon, or fireworks are NOT allowed.** These items can be destructive to you and/or those around you.
12. **Students are to respect all adult leaders and follow their instructions.** All of adults -- members of the Highland Lakes Leadership Team and the Summer Missionaries -- are in places of authority over you. They have been trained and instructed in how to guide you for each particular event. Their instructions are not suggestions, but words to be heard and followed immediately. Each adult wants you to be happy and to help you have one of the greatest times of your life.

By signing this form, you are entering into a contract with Highland Lakes Camp and Conference Center. Your signature indicates that you know that if you fail to use good judgment and common sense in following these rules, appropriate disciplinary action will be taken, including being dismissed from Highland Lakes Camp and immediately returned home at your own expense or your parents' expense.

I have read all the rules above. I understand them and agreed to abide by them.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

# TEAM SERVANT RECOMMENDATION FORM

## Highland Lakes Camp and Conference Center

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Name of Applicant: \_\_\_\_\_

In our consideration of students to serve in the Team Servant program during the approaching summer, we would appreciate your input regarding the student indicated above. Please take a few minutes to answer each question carefully and honestly, and then mail the completed form to the above stated address within ten (10) days of receiving. Please rate the applicant by checking one or more items under each of the headings below. Do not rate areas in which you are uncertain or have not had an opportunity to observe. Additional comments or explanation of your rating is appreciated.

### Spiritual Condition

- No evidence of salvation
- Professes faith in Christ
- Growth is evident
- Disciple-maker

### Leadership

- Makes no effort to lead
- Tries but lacks ability
- Has some leadership promise
- Strong leadership ability

### Teachability

- Rigid, argumentative
- Highly opinionated
- Open-minded
- Willing to receive instruction

### Physical Condition

- Frequently incapacitated
- Somewhat below par
- Fairly healthy
- Rugged and vigorous

### Teamwork

- Frequently causes friction
- Usually cooperative
- Prefers to work alone
- Most effective in teamwork

### Perseverance

- Easily discouraged
- Needs encouragement to press on
- Persists in most circumstances
- Persists even under adversity

### Intelligence

- Learns and thinks slowly
- Average mental ability
- Alert, has a good mind
- Brilliant, exceptional capacity

### Responsiveness

- Slow to sense how others feel
- Reasonable responsiveness
- Responds with unusual insight

### Self-Image

- Insecure
- Self-confident
- May be prone to boast
- Modest, true estimate of self

### Achievement

- Does only what is assigned
- Starts but does not finish
- Meets average expectations
- Resourceful and effective
- Superior creative ability

### Emotional Adjustment

- Yields to urges and cravings
- Tense, fearful, worried
- Easily angered, frustrated
- Downhearted, blue, depressed
- Maintains balance, self-controlled

### Friendliness

- Avoided by others
- Tolerated by others
- Liked by others
- Well-liked by others
- Sought by others

1. How long have you known the applicant? \_\_\_\_\_
2. Do you know anything in his/her character that might keep them from working well with children?  Yes  No If so, please specify \_\_\_\_\_  
\_\_\_\_\_
3. How is he/she gifted for Christian service? \_\_\_\_\_
4. Do you have any reason to doubt the applicant's personal integrity?  Yes  No If so, please specify \_\_\_\_\_  
\_\_\_\_\_
5. How would you evaluate his/her personal family relationships? \_\_\_\_\_
6. Do you have any reservation in recommending this person to serve in the Team Servant program?  Yes  No If so, please specify \_\_\_\_\_  
\_\_\_\_\_

### Reference Contact Information

Name: \_\_\_\_\_ Relation to Applicant: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Office Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Church/Business: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date