



SOUTH CAROLINA CAMPERS ON MISSION (COM) ENROLLMENT APPLICATION

Complete one form for EACH person.

Name _____ Date _____

Spouse's Name _____

Address _____

City _____ State _____ Zip _____ Preferred Phone _____

Email address _____ Birthday _____

Member of another state COM chapter? Y N If so, what chapter? _____

Have you ever participated in a mission project? Y N If so, what? when? _____

Project coordinated by what church/ organization _____

Church Name _____ Been a member how long? _____

Address _____ City _____

State _____ Zip _____ Pastor's Name _____

Church Denominational Affiliation _____

What are your interests? Skills? Experience? Any special training?

Mark any of the following ministry areas that interests you:

Campground ministries

Church planting

Raceway ministry

Construction/maintenance

Disaster relief/rebuild

Seafarers ministry

Fairs/festivals/special events

Community prayerwalking

Revivals/preaching

Clowning/balloons/facepainting

Sharing personal testimony

Landscaping

Cooking/Serving

Music (instrument)

Music (voice)

Children's programs/camps

Social media/website

Arts/crafts

Medical / Dental

Administration

Vacation Bible school/Backyard Bible clubs

Emergency Contact

Name _____ Relationship _____ Phone _____

Please complete this form for each person interested in joining SC Campers On Mission. Either 1) Scan and email to SC COM Secretary Sharon Ward at ward10@sc.rr.com or 2) mail to 2701 Little River Neck Road, North Myrtle Beach SC 29582. You'll be contacted by one of the SC COM officers to help you get involved in ministry.