"Your attitude should be the same as that of Christ Jesus: 'Who being in very nature God, did not consider equality with God something to be grasped, but made himself nothing, taking the very nature of a servant, being made in human likeness.'" (Philippians 2:5-7)

Thank you for applying for the **Adventures In Leadership** camp of the Northwest Conference, at Adventurous Christians, Grand Marais, Minnesota, **June 11-18, 2022**. Your thoroughness in filling out the application is appreciated.

PLEASE PRINT:				
Name				
Address	City	State	ZIP	
Phone ()	E-mail	Date of Birth (M/	D/Y)	M/F
HighSchool	City		Current	:Grade
List your academic, lea	adership/service and extracurricular activi	ties and awards throu	gh your s	chool and/o
community(clubs,athletic	s,music,drama,studentgovernment,scouts,etc.	.)		
Church	City	Pastor(s)		
How long and in what wa	ys have you been involved in your church? Ir	n what areas of leadershi	p have you	u been active:
(vouth group, Bible studie	es, worship, choir, service projects, mission trip	s.etc.)		
List and all and alone and	etamantamatikatan laharan Zara I. Sara I.	**************************************		
List any other talents or li	nterests not listed above (speaking, drama, wr	iting, music, sports, etc.)		
application: (one page	ving questions on a separate piece of paper maximum per question.)			
b. Provide for us furth sons why you want to	personally came to know Jesus Christ and the per insight into a few of your character streng to be a part of The Northwest Conference's Ac especific objectives you want to accomplish the considering.	gths and weaknesses. Al <mark>dventures In Leadership</mark>	so state sp camp this	ecific rea- s summer.
List the name and phone	e number of two references:			
a. Pastor/Youth Leade	r Reference Form: Name:	Ph	ione:	
b.School-CommunityF	ReferenceForm(notafamilymember):Name:	Pl	hone:	

A **\$100 deposit** must accompany this application. The deposit will be refunded **only** if the student is not selected for Adventures In Leadership. **Applications must be postmarked by <u>Thursday, April 7.</u>** Space is limited to 28 youth. Please make your check payable to: **The Northwest Conference**

Give the appropriate reference forms to each person along with a stamped, addressed envelope so it can be mailed directly to the address below or confirm with them that they will scan and email to: jon@northwestconference.org.

Applications will not be considered until all forms have been received.

Mail application forms to: **Adventures In Leadership**, The Northwest Conference, 3106 47th Ave. S., Minneapolis, MN 55406-2360 or scan application forms and email to jon@northwestconference.org.



PARENT OR GUARDIAN CONSENT FORM

To Whom it may concern: The undersigned hereby gives permission for my/our child, ______, to attend the **Adventures In Leadership** camp and participate fully in the activities sponsored by the Northwest Conference on June 11-18, 2022. I/We authorize an adult, in whose care the minor has been entrusted, to consent to any X-ray examination, anesthetic, medical, surgical or dental diagnosis or treatment, and hospital care, to be rendered to the minor under the general or special supervision and on the advice of any physician or dentist licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. The undersigned shall be liable and agrees to pay all costs and expenses incurred in connection with such medical and dental services rendered to the aforementioned child pursuant to this authorization. Should it be necessary for my/our child to return home due to medical reasons or otherwise, the undersigned shall assume all transportation costs. Please list any allergies or special medical problems your child may have: Medical insurance: ☐ Yes ☐ No Emergency Phone Number(s) Insurance Company _____ Policy Number _____ Parent/Legal Guardian Relationship Date **Student Commitment** Please read and sign below: If selected, I am committing to full participation in the entire AIL experience. I recognize that AIL involves high levels of physical, emotional and spiritual rigor. I also understand that there are certain risks inherent in a wilderness camp experience and am willing to assume the physical risks involved. In order to benefit the most from this leadership training experience I must be willing to submit to the leadership and direction of the Northwest Conference Adventures In Leadership staff who will be responsible for my personal growth and training. It is my understanding that participants will be divided into small groups. I understand that this is a church-sponsored camp and will conduct myself in a manner appropriate as a representative of Jesus Christ. If not, I understand that I will be sent home at my own expense, with no refund. Signed Date

Applications must be postmarked by April 7, 2022, and mailed to the Northwest Conference office, or scan and email to jon@northwestconference.org.



			is app	olying fo	or a lead	dership	training	g experience with th
	west Conference. Please respond to the							
	ssible. Completed applications must be po	ostmarked b	y <u>Thur</u>	sday, A _l	pril 7, 2	022 , aı	nd no ap	plication will be cor
sidere	d without the required reference forms.							
In wha	at capacity and how long have you know th	e applicant?						
		о арриоант.						
Please	e indicate your knowledge of this applic	ant:						
a)	Teachable	Weak	1	2	3	4	5	Strong
b)	Considerate to peers	Weak	1	2	3	4	5	Strong
c)	Leadership ability	Weak	1	2	3	4	5	Strong
d)	Handles responsibility	Weak	1	2	3	4	5	Strong
e)	Works well with others	Weak	1	2	3	4	5	Strong
f)	Responds to authority	Weak	1	2	3	4	5	Strong
g)	Expresses him/herself well	Weak	1	2	3	4	5	Strong
h)	Considerate of adults	Weak	1	2	3	4	5	Strong
i)	Leads a consistent Christian lifestyle	Weak	1	2	3	4	5	Strong
Make	additional comments or concerns on othe	er side.						
		0. 0.0.0.						
	ecommend this applicant for the Adventu							
□lre	ecommend this applicant with the follow	ving reserva	ations: ₋					
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	ess							
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Phone	2 ()	F-mail add	ess					

Mail reference to:

Adventures In LeadershipThe Northwest Conference
3106 47th Av. S.

Minneapolis, MN 55406-2360

Or, Scan and email reference to: jon@northwestconference.org



SCHOOL-COMMUNITY REFERENCE FORM

as po	west Conference. Please respond to ssible. Completed applications must ed without the required reference for	be postmarked b	estions	and re	turn to	the No	rthwest	
In wh	at capacity and how long have you k	now the applicant	?					
Pleas	e indicate your knowledge of this a	pplicant:						
a)	Teachable	Weak	1	2	3	4	5	Strong
b)	Considerate to peers	Weak	1	2	3	4	5	Strong
c)	Leadership ability	Weak	1	2	3	4	5	Strong
d)	Handles responsibility	Weak	1	2	3	4	5	Strong
e)	Works well with others	Weak	1	2	3	4	5	Strong
f)	Responds to authority	Weak	1	2	3	4	5	Strong
g)	Expresses him/herself well	Weak	1	2	3	4	5	Strong
h)	Considerate of adults	Weak	1	2	3	4	5	Strong
i)	Person of high character	Weak	1	2	3	4	5	Strong
⊐ Ire	additional comments or concerns of ecommend this applicant for the Advecommend this applicant with the	ventures in Leade		•				
Signature				Date				
Positi	on							
	ess							
Addre								
				Sta	ate		_ ZIP	

Mail reference to:

Adventures In Leadership
The Northwest Conference
3106 47th Av. S.

Minneapolis, MN 55406-2360

Or, Scan and email reference to: jon@northwestconference.org