

KING'S KIDS South Island APPLICATION FORM

To be filled out by applicant

Attach
recent photo
here

Name: _____
Last Name First Name Middle Name

Address: _____

Phone: _____ Reading Age Below age At age Above age
(circle one)

Age: _____ Sex: M/F Birth date: _____

Applying for Outreach to: _____ Uniform Tee Shirt size: _____
Destination child 8-14, adult S/M/L/XL/XXL

Outreach dates: _____ Registration Fee Enclosed - \$20.00:
Start/Finish Dates

Church: _____ Pastor's Name: _____ Phone: _____

1. What does God mean to you? Do you pray, read the Bible, does He speak to you? _____

2. Why do you want to join this King's Kids Outreach Team? _____

3. We believe God is interested in you. What do you think He might like to do in your life while you are on outreach? _____

4. Tell us the things that you like about yourself. I like _____

What don't you like about yourself that you want God to help you change? _____

Interests:

What are your special interests?

Medical conditions _____

Special dietary requirements _____

If I am accepted on this outreach, I promise to do my best and be kind to others. I realise that there will be a lot of hard work in the training camp and even on outreach, and I promise to happily do what I am told. I know that my Heavenly Father will help me in all this if I will just ask Him, and if I really want to do it.

Signature: _____ Date: _____

We know that God has a plan for you. Please pray that the Lord leads us as we pray over your application.

Dear Mum, Dad and or Guardian

Children 9 years old and younger are required to be accompanied by a parent, those aged 10 - 12 years require a parent or guardian (max three children per guardian) who knows them well. Youth 13 years and over can come alone, although you are very welcome. We need you to fill out this form below as part of the application process.

We would like to encourage you as parents to consider participating in this outreach as an entire family. Our heart intention for these outreaches is to provide a means through which the whole family can grow in God together.

Guardians/Parent's names: _____

Address: _____

Home Ph: _____ **Cell #:** _____

Email Address: _____

Names and ages of any other children you will be bringing:

Do you have any Medical conditions? _____

Do you have any special Dietary requirements? _____

It is important to realise that to join a King's Kids outreach as a parent or guardian is not just a commitment to the child or children in your care, but also to the outreach team as a whole.

In which areas can you see yourself being involved during the outreach, please number in order of preference (1-10, 1 being first preference) where you can assist the team

- | | | |
|---|--|-----------------------------------|
| <input type="checkbox"/> Administration, secretarial, | <input type="checkbox"/> Cooking | <input type="checkbox"/> Uniforms |
| <input type="checkbox"/> Sound gear | <input type="checkbox"/> Photographer | <input type="checkbox"/> Video |
| <input type="checkbox"/> Worship/Play an instrument | <input type="checkbox"/> 1 st Aid/nurse | <input type="checkbox"/> Laundry |
| <input type="checkbox"/> Other | | |

Please describe any other area's you feel that you could offer to the team.

We look forward to having you on the team.

Juddy and Rachel Taylor
South Island Co-ordinators
King's Kids NZ

**Please complete and return to: King's Kids, PO Box 22, Oxford 7430
by 10th November 2010**

PARENT REFERENCE FORM

To be filled out by Applicant's parents

Child's Name: _____ Mother : _____
 Address: _____ Father: _____
 _____ Phone : _____
 Applying for: _____ Date: _____

Please note: Children 9 years old and younger are required to be accompanied by a parent, those aged 10 - 12 yrs require a parent or a guardian. Teenagers 13 years or older are able to come on their own, with their parents permission.

Dear Parent,

We are pleased that your child has expressed a desire to be part of this outreach. We are happy to seek God with you to determine if this is His plan for his/her life at this time. We too are committed to seeing God's best achieved for your child. King's Kids outreaches are designed primarily for those who **ALREADY** have a hunger for God and are looking for a spiritual challenge that they can take hold of. We know from experience that this outreach will only bring frustration to those who do not come with a heart to learn and grow in God. Your child's walk with God to us is more important than their ability to perform. We appreciate your frankness in supplying the information requested here.

Spiritual maturity

- How would you describe the applicant's knowledge of and friendship with the Lord?
 Lacks depth Inconsistent Genuine & Growing Mature
 Comments: _____
- Does he/she spend time alone with the Lord without prompting?
 Daily Irregularly Once in a great while Not at all
 Comments: _____
- Has the applicant seen the Lord answer his/her prayers? _____

Emotional maturity

- Is the applicant able to express good and bad feelings appropriately?
 With difficulty Sometimes Usually Without inhibition
 Comments : _____
- How does he/she respond to correction?
 Feels rejected Rebels openly Rejects but learns Accepts with thanks
 Comments: _____
- General temperament?
 Quiet & thoughtful Friendly but reserved Friendly & outgoing Bold & outspoken
 Comments: _____
- How co-operative is he/she?
 Helpful Follows willingly Independent Strong willed
 Comments: _____
- How punctual is he/she?
 Always on time Always late Usually early Usually late
 Comments: _____

Physical Fitness & Health

1. Please comment on his/her eating habits: _____

Particular dietary needs? _____

2. Level of activity : _____ (Please indicate severity)

Lacks interest Tires easily Active Athletic Hyperactive

3. Please specify any medical/health problems including allergies and note any medication he/she is on : (e.g. asthma, eczema, bedwetting, requires more sleep than normal.)

Any physical limitations? _____

4. Is he/she presently in good health? _____

5. Do you have a Community Service Card Number? _____ Exp date: _____

Performance Skills

1. Singing ability: Below average Average Above average

2. Co-ordination: Has difficulty Good Excellent

Practical Skills

1. Areas of practical skills or abilities: _____

Parents response

1. Why do you feel your son/daughter should participate in this outreach? _____

2. We believe God wants whole families involved in ministry.

Are you committed as a family to giving your child emotional and prayer support while he/she is away? _____

Are you committed as a family to seeing the necessary finances raised? _____

Emergency Data :

In case of emergency, notify:

1st choice: Name: _____ Relationship: _____
Address : _____ Phone: _____

2nd choice: Name: _____ Relationship: _____
Address: _____ Phone: _____

I/We give permission for _____
to apply for participation in the King's Kids Outreach to _____

Signature: _____ Date : _____

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