IMPACT CAMP – Team Leader Info Form

Name:		Gende	er (Circle O	ne): Male	Female	
Church:	Youth	Youth Minister:				
Home Address:						
City:	_ State:		Zip:			
Cell Phone:	_ Email:					
Who recruited you to be a TL?:						
Present Age:	_ Date o	f Birth:				
With which age category would you prefer to ser		■ Middle	School	☐ High S	School	
IMPACT CAMP – To	eam	Lead	er Inf	o For	m	
Name:		Gende	er (Circle O	ne): Male	Female	
Church:	Youth	Minister:				
Home Address:						
City:						
Cell Phone:	_ Email:					
Who recruited you to be a TL?:						
		Date of Birth:				
With which age category would you prefer to se	erve?	■ Middle	School	□ High S	School	