

# Joshua Generation

## Application Form

Return all forms to: **YWAM Boston**

23 Emerson Street, Newton, MA 02458

412.600.1096 JG@ywamboston.org



### Section 1

I wish to attend the JG Summer Outreach: **(Check One)**

◇ North East Coastal Tour July 1—20 \$485 + \$35 Registration Fee

Non-refundable registration fee enclosed \_\_\_ \$35

#### Personal Information: Please Print

Name \_\_\_\_\_ Nickname \_\_\_\_\_

Last/Family First Middle

Permanent Address \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ Age \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Sex \_\_\_ Birth date \_\_\_\_\_ **T-Shirt Size S M L XL (Circle One)**

**In Case of an emergency contact:** (Full Name) \_\_\_\_\_

(Relationship) \_\_\_\_\_ (PO Box/Street) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ (Country) \_\_\_\_\_

(Phone) \_\_\_\_\_ (Fax) \_\_\_\_\_ (Office) \_\_\_\_\_

**Alternate emergency contact:** (Full Name) \_\_\_\_\_

(Relationship) \_\_\_\_\_ (PO Box/Street) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_ (Country) \_\_\_\_\_

(Phone) \_\_\_\_\_ (Fax) \_\_\_\_\_ (Office) \_\_\_\_\_

**Home Church:** (Name) \_\_\_\_\_

(pastor's Name) \_\_\_\_\_ (Length of Attendance) \_\_\_\_\_

(PO Box/Street) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

(Church Phone) \_\_\_\_\_ (Fax) \_\_\_\_\_



Name \_\_\_\_\_

Personal Information

(please answer the following questions to the best of your ability.  
These questions are intended to help us better get to know you...)

1.) *Why do you want to be involved with Joshua Generation? How much of this is your own decision? How has God directed you to be involved in JG? Please list scriptures or other ways in which God is guiding you.*

2.) What are your expectations for:

A.) *Boot Camp*

B.) *Outreach*

3.) *If this is not your first JG trip, then in what ways have you grown since your last JG experience?*

# Joshua Generation Confidential Health Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Personal History: Please answer all questions. Explain any "yes" answers in the spaces below. *Have you ever had, or currently have any of the following?*

Are you under a doctor's care of any condition? Yes No Please Explain.

Skin Conditions	Y	N	Shortness of Breath	Y	N	Stomach Ulcer	Y	N
Eye Trouble	Y	N	Hay Fever/ Asthma	Y	N	Gall bladder Problems	Y	N
Ear Trouble	Y	N	Heart Trouble	Y	N	Jaundice	Y	N
Head Injury	Y	N	High Blood Pressure	Y	N	Hepatitis	Y	N
Recurrent Headaches	Y	N	Low Blood Pressure	Y	N	Intestinal Trouble	Y	N
Epilepsy	Y	N	Rheumatism	Y	N	Recurrent Diarrhea	Y	N
Fainting Spells	Y	N	Arthritis	Y	N	Diabetes	Y	N
Mental Disorders	Y	N	Back Problems	Y	N	Kidney Disease	Y	N
Nervous Disorders	Y	N	Dislocation of Joints	Y	N	Anemia	Y	N
Weakness	Y	N	Broken bones	Y	N	Venereal Disease	Y	N
Paralysis	Y	N	Eating Disorders	Y	N	Tumor/Cancer	Y	N
Insomnia	Y	N	Anorexia Nervosa	Y	N	<i>Females Only</i>		
<i>Allergies</i>			Bulimia	Y	N	Irregular Periods	Y	N
Penicillin	Y	N	Surgery	Y	N	Severe Cramps	Y	N
Sulphonamides	Y	N	Appendectomy	Y	N	Excessive Flow	Y	N
Serum	Y	N	Hernia Repair	Y	N			
Other Specify	Y	N	Tonsillectomy	Y	N	Mumps	Y	N
Foods Specify	Y	N	Others Specify	Y	N	Other.. Specify	Y	N
Chicken Pox	Y	N	Scarlet Fever	Y	N			
Measles	Y	N	Tuberculosis	Y	N			

Are you taking any medications at this time? *Yes No*  
If yes... Explain...

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any physical handicaps which require special attention? *Yes No*  
If yes... Explain...

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of health Insurance Company \_\_\_\_\_

Policy # \_\_\_\_\_ DOB \_\_\_\_\_

## Medical Permission Form

In case of emergency, I give permission to Youth With A Mission Boston's leadership authorities and it's representatives to obtain medical treatment for my child (\_\_\_\_\_) in my absence.

Parent's Name (please print) \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

# JG Questionnaire

**This is a required part of the application process and must be returned in order for this process to be completed. This information will help us in our planning.**

Would your parents be willing to do laundry during boot camp? YES NO

Would your parents be able to volunteer in the kitchen? YES NO

If yes, what day(s) and what meal \_\_\_\_\_

Do you know any of the following dances/dramas?

Tomorrow YES NO

Boogie Bounce YES NO

Joy YES NO

Breathe In YES NO

Different Now YES NO

Save Myself YES NO

None Like You YES NO

Heaven Came Down YES NO

Part: \_\_\_\_\_

Redeemer YES NO

Part: \_\_\_\_\_

Doors YES NO

Part: \_\_\_\_\_

Suggested Songs for dance or drama: \_\_\_\_\_

Have you ever been involved in a dance or drama production? Please Explain.

Do you have a desire to help choreograph a dance? YES NO

Please list four of your favorite worship songs:

What musical instrument do you play? \_\_\_\_\_ How long? \_\_\_\_\_

Rate your ability on a scale of 1 to 10 \_\_\_\_\_

Would you feel comfortable playing on the worship team? YES NO

Do you sing? YES NO Would you sing on the worship team? YES NO

Do you have any experiences working with sound equipment? YES NO

Additional comments: \_\_\_\_\_

Have you ever spoken in front of a large group? Do you have a fear of speaking in front of people? Please explain.

Please describe any outreach activities that you have participated in. Please list any previous **Joshua Generation** outreaches, mission trip(s), etc.

Are you involved in any sports team? Please list.

# Release Form

Please Read & Fill out Completely

I hereby certify that my child, \_\_\_\_\_ (name) has permission to participate in the Joshua Generation training program and outreach trip chosen with Youth With A Mission Boston from \_\_\_\_\_ (dates).

I agree and do hereby release and discharge any person engaged in the activity described above from all claims present and future, known or unknown, in any manner arising out of the described activity. I further understand and agree that this release shall hold harmless any leader or other person engaged in the activity described above from any and all liability relating to my child and from all personal injury or illness that my child may suffer. I, furthermore, agree to hold them harmless from any loss of property that may occur to my child during the activity described above.

I understand that no child will be allowed to participate in this activity until this form is signed by his/her parent or guardian.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I have read the JG manual and am familiar and responsible for all the information it contains. I promise to adhere to the guidelines and instructions in the manual and given by my leaders.

Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

Parents Signature \_\_\_\_\_ Date \_\_\_\_\_

# What To Bring List

*Your name must be on ALL of your clothing and ALL of your personal belongings!*

Please pack your things in a small soft suitcase or a duffle bag. Space will be limited so please pack light.

- 1.) Back Pack- school type
- 2.) Bible- small
- 3.) Notebook and pen- for notes and journaling
- 4.) 2 mesh bags for dirty clothes- 1 light and 1 dark
- 5.) Sleeping bag- large
- 6.) Camera- optional
- 7.) Water bottle
- 8.) Sun screen
- 9.) 2 sets of loose fitting clothes to practice in during boot camp for 7 days
- 10.) ABSOLUTELY NO TANK TOPS OR SPAGHETTI STRAP TOPS
- 11.) Underwear for 10 days
- 12.) Light jacket or sweatshirt
- 13.) Bathing suit: Girls- ONE piece Boys- NO speedo type swimwear
- 14.) Beach shoes/ flip flops- for showers, pool, and ocean
- 15.) Umbrella or Poncho
- 16.) Towels- 1 beach towel and 1 regular bath towel with wash cloth
- 17.) Toiletries- Please bring toiletry bag to store all personal hygiene items. These items are not to be stored in the bathrooms! If we find clothing, hair dryers, curling irons, dirty laundry, towels, etc. they will be picked up daily and put in lost and found.

## Performing Clothes

- 1-2 pairs of khaki (light tan) pants for churches- Docker type pants, no bell bottoms, and no tight pants
- Boys: 2 pairs of Khaki shorts
- Girls: 2 pairs of Capri's, NO SHORTS ALLOWED
- White socks
- ALL white tennis shoes. NO exceptions. If you don't bring them you will be buying them.

## What NOT to Bring

CD player, non-Christian CD's- MP3's, glow sticks, cell phones, or chewing gum.

# Your Personal Testimony

Please write out or type your testimony. It must include how you gave your life to Christ, how God has shown His faithfulness to you through answered prayers, Him working in your life, etc and what God is showing you right now.

How long have you been a Christian? How is your relationship with God presently? Is there anything you would change? What are you struggling with right now?

# JG Reference Form

(School Teacher/ Youth Pastor/ Pastor)

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

Dear Friend,

This applicant is in the process of discerning whether participation in Joshua Generation is the Lord's desire for him or her this summer. Would you please help in this discerning process by truthfully filling in this form. We appreciate your honesty in providing the following information.

## Relationship

How long have you known the applicant? On what level do you know them?

## Spiritual Maturity

Does the applicant have a personal relationship with the Lord Jesus and an understanding of who He is? Please explain.

Does the applicant seek to obey God's Word and the conviction of the Holy Spirit in his/her life?

Since you have known the applicant, have you seen growth in his/her relationship with the Lord? Please explain attitude and behavioral changes consistent with the Word of God, whether the applicant experiences answers to prayers, etc.

Is there anything else you would like to say about the applicant's spiritual maturity?

## Emotional Maturity

How is the applicant at expressing feelings, both good and bad?

How does the applicant take constructive criticism?

How does the applicant cooperate with others in a group/ team settings?

*JG Reference form Continued*

Describe the general temperament and personality of the applicant. Does it differ significantly among friends vs. parents and/or adults? How does the applicant respond to authority figures?

Is this applicant usually punctual or late?

How is the applicant at solving personal problems? At helping others deal with or solve a problem?

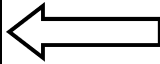
Is the applicant comfortable with meeting new people?

*Physical Ability*

Do you feel the applicant's physical health is adequate for two weeks filled with physical activity, travel, and/or irregular schedule?

Lazy	<input type="checkbox"/>	Underweight	<input type="checkbox"/>	Overweight	<input type="checkbox"/>
Sloppy	<input type="checkbox"/>	Moody	<input type="checkbox"/>	Stubborn	<input type="checkbox"/>
Nervous	<input type="checkbox"/>	Fearful	<input type="checkbox"/>	Proud	<input type="checkbox"/>

Please check all the following descriptions that apply to the applicant:



Do you recommend this person to be a participation in the Joshua Generation program? Please explain any reservations you may have.

Additional Comments:

Signature: \_\_\_\_\_

Address: \_\_\_\_\_

Phone # \_\_\_\_\_ Position: \_\_\_\_\_

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

Thank you for your help. Please be prompt as possible in filling out and returning this form to:

YWAM Boston  
 Joshua Generation  
 23 Emerson Street, Newton, MA 02458