

LETTER OF RECOMMENDATION FOR ADULT VOLUNTEER SPONSORS

Church: _____ Phone: (____) _____
 Address: _____ City: _____ State: _____ Zip: _____

The following adult (s) will serve as sponsors for the above stated church group. We will be at Highland Lakes Camp over the dates of _____ through _____ attending _____ camp.

		STATE REQUIRED DOCUMENTATION		
NAME OF ADULT VOLUNTEER SPONSOR	DATE OF BIRTH	SEX OFFENDER BACKGROUND CHECK W/DATE	CRIMINAL HISTORY BACKGROUND CHECK W/DATE	CURRENT TRAINING CERTIFICATION PROVIDED TO CAMP
1. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
2. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
3. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
4. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
5. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
6. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
7. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
8. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
9. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>
10. _____	____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/> ____/____/____	<input type="checkbox"/>

ATTESTATION by the pastor, minister and/or church leader.

The above named individuals are known to me/us, and I/we can attest to the character, integrity and ability of each to serve as a sponsor. I/we know of no reason why any should not serve as a sponsor for children and youth under the age of (18) eighteen. I/we also attest to the fact that each of these sponsors has undergone a current background check as mandated by the State of Texas and has successfully completed the required Child Protection Training. I/we recommend them to you as persons who will represent our church or organization in the supervision of our young people.

 Pastor Signature

 Name Printed

 Date

 Church Representative / Position

 Name Printed

 Date

Refer to the enclosed Bulletin regarding the Texas Department of State Health Services CHILD PROTECTION LAWS and mandatory requirements for Camp Adult Sponsors. Proper documentation must be submitted with HLC Registration Medical/Liability Release form. Individual groups will be held financially responsible for any Health Act violation fee assessed ranging from \$500-\$1,000. per violation/per day.