

Thank you for applying for the **Adventures In Leadership** camp of the Northwest Conference, at Adventurous Christians, Grand Marais, Minnesota, **June 14-21, 2025**. Your thoroughness in filling out the application is appreciated. You will receive additional forms (e.g. Medical Release form) upon acceptance to AIL. Applications are due Monday, March 10. A \$100 deposit must accompany this application. The deposit will be refunded if you are not selected for AIL. You will be notified of your status by March 31.

PLEASE PRINT:

Name					
Addres	SS	City		State	ZIP
Date o	of Birth (M/D/Y)	M/F Current Grade _			
Phone	e()	Check this box if	we can text you at	this number.	
E-mai	I	Please check this en	mail regularly, as th	is is the way we	communicate with you.
High S	School	City _			State
Churc	h	City _			State
Pastor	r/youth pastor		Their E-n	nail:	
1. 2. 3.	How long and in what been active? (youth List your academic, le community (clubs, at List any other talents Describe how you can Share some of your of Explain why you wan	the following prompts in a set to ways have you been involve group, Bible studies, worship, eadership/service and extraculateletics, music, drama, students or interests not listed above me to know Jesus Christ and character strengths and weak into join the Northwest Confeuld like to be challenged to group to the state of the sta	d in your church? choir, service projective activities a t government, Sco (if you play an inst what your relation nesses. How are your ence's Adventures	In what areas of ects, mission trip and awards throu uts, etc.) rument, writing, ship with Him is lu working on the sin Leadership C	leadership have you s, etc.) Igh your school and/or singing, sports, etc.) like today. Igh: Igh: Igh: Igh: Igh: Igh: Igh: Igh:
8.	support you in the g What leadership role	rowth. s are you considering for the (upcoming year?		
List th	ne name and contact i	nformation of two references	S:		
a. P	Pastor/Youth Leader Re				
	Name/Title:		Phone:	Email	· ·
b. S	School or Community F	Reference Form (<u>not a family</u>	member):		
	Name/Title:		Phone:	Email	:

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: ginny@northwestconference.org. *Applications will not be considered until all forms have been received.*

Applications must be postmarked by Monday, March 10, 2025. You will be notified of your acceptance status by Monday, March 31. Space is limited to 28 students. Please make your check payable to: **The Northwest Conference**. 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 ginny@northwestconference.org.



To	Whom	Ιt	May	Concern:
10	V V I I O I I I	ıι	1.1d A	COLICELLI.

The undersigned hereby gives permission for my/our child,	, to attend the Adventures In
Leadership camp and participate fully in the activities spons	sored by the Northwest Conference on June 15-21, 2025.

Parent Commitment

Please read and sign below:

If my child is selected, I commit to their full participation in the AIL experience. I recognize that AIL involves high physical, emotional, and spiritual rigor. I also understand that certain risks are inherent in a wilderness camp experience, and I am willing to assume the physical risks involved. I understand that this is a church-sponsored camp, so my child is expected to conduct themselves in a manner appropriate as a representative of Jesus Christ. If not, I understand that my child will be sent home at our own expense, with no refund.

Signed	Date	

Student Commitment

Please read and sign below:

If selected, I commit to full participation in the AIL experience. I recognize that AIL involves high physical, emotional, and spiritual rigor. I also understand that certain risks are inherent in a wilderness camp experience, and I 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 I will conduct myself in a manner appropriate as a representative of Jesus Christ. If not, I understand I will be sent home at my own expense without a refund.

Signed	Date	

Applications must be postmarked by March 10, 2025, and mailed to the Northwest Conference office, or scan and email to ginny@northwestconference.org.



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ary W below pletec	with the Northwest Conference called Adaters Canoe Area. It is a physically, emotion and send us your careful evaluation of the applications must be postmarked by Model reference forms.	onally, and s nis student's	eaders piritual charac	ship. AIL Ily rigore ter and	takes ous exp growth	place t erienc areas	his sumr e. Please as soon	mer in the Bound- e complete the form as possible. Com-
In wha	at capacity and how long have you know t	he applicant	:?					
Please	e indicate your knowledge of this applica	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.						
	commend this applicant for the Adventu ecommend this applicant with the follow							
☐ Ple	ase contact me to discuss the applicant of	over the pho	ne. You	ı can re	ach me	at ()	
Name	(print)			_				
Signat	ture			_ Date _				
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Addre	ess							
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Phone	. ()	E-mail addr	ess					

Mail reference to:

Adventures In Leadership The Northwest Conference 3106 47th Av. S. Minneapolis, MN 55406-2360 Or, scan and email reference to: ginny@northwestconference.org



Mail reference to:

SCHOOL-COMMUNITY REFERENCE FORM

Water low ar pleted comp	with the Northwest Conference call rs Canoe Area. It is a physically, emo nd send us your careful evaluation of d applications must be postmarked leted reference form.	otionally, and spirit of this student's ch by Monday, March	_eaders tually ri naracter	ship. All igorous r and ar)25 . No	_ takes experie eas of g applica	place tence. P growth	his sumr lease col as soon ill be cor	mplete the form be as possible. Com- nsidered without a	ry e-
Pleas	e indicate your knowledge of this a	applicant:							
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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	
□lre	additional comments or concerns of ecommend this applicant for the Acecommend this applicant with the	dventures in Leade							
	econimena this applicant with the	Tollowing reserva	itions						
☐ Ple	ease contact me to discuss the appl	licant over the pho	ne. You	ı can re	ach me	at ()		
Name	(print)			_					
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Phone									

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