

**Baptist on Mission
North Carolina Baptist Men
Red Springs Mission Camp
114 Industrial Drive
PO Box 955
Red Springs, NC 28377**

Team Leader/Group Requirements

- **Things to Bring:** Devotional Materials/Bible – Toiletries – Towels/Wash Cloth – Bedding/Pillow (twin size) – Flashlight – Sunscreen – Sandals for the Shower - Insect Repellent – Snacks – Ice Chest – Insurance Card – Medicine – Ear Plugs (if you are sensitive to snoring) – Lawn Chair (great for free time and outdoor activities). Work clothes and shoes, refer to dress code. You will need to bring enough clothes for you stay. We encourage teams to bring their own personal tools that they prefer to use. Safety glasses, work gloves, etc. (keep your tools locked in your vehicles/trailers). Teams will need to provide their own ice.
- **Cost:** \$21 per day per person. That will cover your lodging, your meals while you are here and supplemental insurance. We recommend bringing some extra snacks which are not included in the cost. Checks should be made payable to NC Baptist Men or Red Springs Mission Camp and paid upon your arrival at the camp.
- **Youth Groups:** Age 13 and above. You must have a 1:4 ratio of adult to youth and have at least two skilled construction people per ten youth.
- **Check-in:** All team members sign-in with their completed Medical and Release of Liability forms. Orientation with the Camp Coordinator. The team leader will meet with the project coordinator for project assignments.
- **Lodging:** Males and Female will be divided into separate sleeping rooms. You will be assigned sleeping quarters. Please stay in your assigned rooms! This is absolutely necessary in order to house other volunteers. Do not take snacks into your rooms, a refrigerator will be provided for snacks and medicines, etc. (write your name & date on refrigerated items).
- **Meal Schedule/Information:**

Breakfast: 7:30am – 8:00am	Sunday-Closed All Day
Lunch: 12:00am – 1:00pm	Saturday-Bagged Lunch
Dinner: 5:30pm – 6:00pm	Saturday-Closed for Dinner

Inform the kitchen at breakfast if your team plans to go out to eat that day. Also, inform the kitchen the night before if you need bagged lunches for the next day. We order and cook our food based on the number of volunteers that we have. We need your team count daily for all three meals to make sure we do not waste food.

Should you have special diet needs, you will need to make arrangements to take care of those needs.

Saturdays there will be no evening meals served. Bagged lunches will be available for the lunch meal only. Breakfast will be served at the regular time.

- **Dress Code:** T-shirts or work shirts on the project site and at the camp. No cutoffs, ripped sleeves, shirts with offensive language/questionable graphics or text, or tight knitted tank tops will be allowed. Factory sleeveless shirts are okay. Shorts must be at least mid-thigh in length (most Softe style shorts are too short) on the project site and at the camp. Please use the same dress code when going to and from the showers and in common areas. Violations to the dress code will not be tolerated.
- **General Information:**

We encourage you to have team devotions each day/night.
Mission Camp is closed on Sunday.
Mission camp gates are locked at 10:00pm. Please be in at this time or make arrangements with the Camp Coordinator.
Quiet time 10:30 - Lights out at 11:00PM. Remember to be respectful of others sleeping!
Profanity, alcohol, drugs and smoking are not permitted! Any violators will be asked to leave the premises immediately.
Take precautions in safeguarding your personal property. We will not be responsible for stolen or lost property.
Vehicle parking is provided inside the gate in the rear of the main building. Do not block the road or entrances with your vehicles.
Refer all media requests to the Camp Coordinator.
- **Housekeeping:** Please help us with the following: Bag trash and carry to the dumpster, make a daily clean sweep of your room to check for wet clothing, towels/linens, personal items or any electrical items that have been left on (curling irons etc.). Do a general clean up each day (sinks, toilets, showers & floors) before leaving for your project site. Do not store or have food in your sleeping

area; we do have problems with red ants. Clean the showers after you use them so they will be clean and ready for the next person to use. Please keep the shower curtains inside the shower stall when taking your shower this will prevent flooding the floors with water. Pick up after yourselves in the dining hall and common areas of the facility. Do not leave anything that belongs to you behind in the showers, dining hall, worship or any other common area of the camp including outside grounds.

- **Safety First:** Prepare your team to use tools and/or have a skilled person with your team to train them. This will ensure all members have some knowledge and experience working with tools. We strongly emphasize safety on the project site and at the camp. We never anticipate having an accident but we do strongly recommend each team member have an updated tetanus shot and wear closed toe shoes at all times on the project site. For safety reasons tennis shoes or work boots are best. You must wear shoes at all times, even at the camp site.
- **Evangelistic Opportunities:** Vacation Bible Schools, Sport Camps and other community ministries can be set up by the Camp Coordinator. Arrangements will be made for these ministry opportunities with the local associations, churches, etc. You will need to provide all needed materials for your group.
- **Warehouse Procedures**
Hours 7:00am – 5:30pm
All materials used from warehouse must be checked out and entered on a materials/tools list. Please have the account number for the homeowner ready. This number will assure the homeowner's data is correct.
Do not purchase any material from sources other than our NCBM Warehouse for the homeowner without prior approval from Camp Coordinator.
All work equipment/tools must be checked out by the warehouse coordinator and returned CLEAN and ready for the next team to use. Clean up area is provided.
If the warehouse coordinator is not in the warehouse please leave all items on the floor in front of the check out counter with your name/crew chief's name with the items, the coordinator will check in the items when they return.
- **Construction Project Site Procedures:** You will be given a project site order with all the necessary information regarding your homeowner. Please fill out the sections pertaining to the work completed, work to be completed, hours/days worked and number in your crew. We MUST have the work orders returned to the office for review regarding the status of work on your homeowner. Please DO NOT take this information home with you! Return them to the office before you leave. Remember the project number assures the correct data entry for the homeowner.
Call the homeowner before going to the project site. If possible call the night before you go to the home.
Do not ever promise anything to the homeowner. Bring all requests in addition to your project request to the attention of the Camp Coordinator.
NCBM provide labor and we have partnerships with different organizations to purchase building materials only. Please to do not charge any decorative or unauthorized items to the NCBM.
Should you have questions or concerns regarding your project request contact the Camp Coordinator before continuing with the work.
We work closely with trustworthy sources such as Associations, Churches, Senior Centers, Homeless Shelters, Nursing Homes, Social Services and other organizations to locate people who are in need of our services.

The goal of NC Baptist Men's Red Springs Mission Camp is to involve churches (men, women and youth) in missions. As we serve together, using our God given skills, God will open doors for many spiritual needs to be met.

If we can assist you in any way please feel free to contact us.

We look forward to leading and serving alongside you!

Larry Osborne

Camp Coordinator

Cell: 919-264-4397

Land Line: 910-843-7700

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www.facebook.com/RedSpringsMissionCamp

www.ncmissions.org

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NORTH CAROLINA BAPTIST DISASTER RELIEF GENERAL MEDICAL INFORMATION

(To be filled out by applicant)



Name: _____ Birthday: _____ Age: ____ Sex ____
(last) (first) (middle)

Address: _____

City: _____ State _____ Zip: _____

Home phone: (_____) Work phone: (_____) Email: _____

Marital Status: _____ Weight: _____ Height: _____

Emergency Contact Person: _____ Telephone: (_____) _____

Church: _____ Association: _____

MEDICAL STATEMENT

(All information requested below **must be** filled out before participant can take part in the disaster relief program.)

Medical History:

a. General Health: _____

b. Limitations: _____

c. Any history of the following: trick knee _____ weak ankles _____ bad back _____ other _____

d. Are you subject to: diabetes _____ epilepsy _____ heart disease _____ hypertension _____ other _____

e. Appendix removed? ____ ____ Tetanus shot updated? _____

g. Medicines taken: _____ Reason: _____

_____ Reason: _____

_____ Reason: _____

h. Allergies(food, drugs, other): _____

Medications used to treat allergies: _____

i. Medical treatment received in the past year: _____

j. Have you had or been exposed to any contagious disease in the past six months? _____. If so, what? _____

Physician's Name: _____ Office Phone: (_____) _____

Address _____ City: _____ Zip _____

CONSENT

I hereby give permission for my son / daughter / self (if over 18 years of age) to receive emergency medical attention from a physician in the event of illness or injury.

Signed: _____ Date: _____

INSURANCE

Insurance issued in the name of: _____

Address of insured: _____

Name of insurance company: _____

Address of insurance company: _____

Policy number: _____

PHYSICIAN (optional)

I have examined the applicant and find that he/she is in fit health for participation in Disaster Relief Work.

Physician's Signature: _____ Date _____

Comments: _____

You must bring this with you filled out. Please leave it with the contact person when you check in. Be sure to also sign in the volunteer register when you check in. Thanks.



North Carolina Baptist Men
P. O. Box 1107
Cary, NC 27512 - 1107
(800) 395 - 5102
Fax (919) 460-6329



PARTICIPANT LIABILITY RELEASE FORM

Please read before signing, as this constitutes the agreement as a volunteer and the understanding of your working relationship as a volunteer with the N. C. Baptist Men.

As a volunteer with N.C. Baptist Men projects, I confirm that I am not going as a duly elected representative of my local Baptist church, Baptist Association, Baptist State Convention of N.C. or N. C. Baptist Men, nor as an employee of the Baptist State Convention of N.C. or N. C. Baptist Men.

I, _____, acknowledge and state the following: I have chosen to perform _____ resulting from _____.

I understand that this work is hazardous and entails risk of physical injury and often involves hard physical labor, heavy lifting, strenuous activity, long work hours, use of ladders, construction on roofs or other raised surfaces, screws, nails, broken glass, electrical hazards, falls, unloading supplies, accidents while traveling, cuts, bruises, burns, falling debris, falling trees/limbs, and other hazards foreseeable and unforeseeable that are associated with this type of activity. I recognize and acknowledge potential accidents at the disaster site, involving motor vehicles, in or about the living, sleeping and eating areas, or during activities of the disaster relief team; am fully aware of possible injuries to members of the disaster relief team, including myself. I understand these dangers and certify that I am in good health and physically able to perform this type of work.

I understand that I am engaging in this project at my own risk. I understand that this is a "grass roots" activity to support individuals adversely affected. I assume all risk and responsibility for any damage or injury to my property or any personal injury that I may sustain while involved in this project, and related medical costs and expenses. I also understand that each individual will have the responsibility of providing his or her own health and accident insurance in the event of any illness or injury experienced during this volunteer mission.

In the event that the N. C. Baptist Men arranges accommodations, I understand that they are not responsible for my personal effects and property and that they will not provide lock-up or security for any items. I will hold them harmless in the event of theft or for loss resulting from any source or cause. I further understand that I am to abide by whatever rules and regulations may be in effect for the accommodations at that time.

Parents are responsible for children that are minors and the church group leader is responsible for youth under age 18.

This waiver, release and indemnity agreement is fully understood by me and I enter the same willingly for the purposes herein above stated. I understand that this form will remain in effect for this project and all future projects unless myself or a representative of the N. C. Baptist Men give notice.

By my signature, for myself, my estate and my heirs, I release, discharge, indemnify and forever hold the property owner, local Baptist Church, my Baptist Association, Baptist State Convention of N. C. and/or the N. C. Baptist Men together with their officers, agents, servants and employees, harmless from any and all causes of action arising from my participation in this project, and travel or lodging associated therewith.

 Volunteer's Signature Date

 Address

 City State Zip

 Person to Contact in Case of Emergency

 Witness

 Parent's Signature (if volunteer is under 18 years of age) Date

() -
 Phone

 Church Association

() -
 Phone

 Date revised 1-17-07