

For staff use only:

Date: _____ #: _____ |YB: _____ |State: _____

OBSESS 2024 June 19 – 23 Application

Please attach picture of yourself along with this application. Sending an Applications without a picture can affect your position on the acceptance/waiting list.

Please send by **April 12th** to: Grace Hochstetler
7501 Brush College Rd
Woodburn, IN 46797

Name _____

Age _____ Birthday _____

Address _____

City _____ State _____ Zip Code _____

Phone Number: _____ Email _____

Church _____ Pastor _____

Please ask a parent, preferably your father, to fill out the section below.

Parent Name(s) _____

What goals do you have in your daughter's participation in OBSESS?

Could you commit to praying for your daughter during the weekend?

Would you welcome follow up after OBSESS (questionnaire, etc.)?

IMPORTANT:

Make sure all info on the Application is clearly legible especially Email address & Ph#. As much as possible we will try to honor the postmarked date for order of receipt. In addition to mailing the Application & Picture, send an Email to: info@obsess.live, and in the Subject put: **Application Sent and Your Full Name**

This will help ensure we will have your email address correct.

We will confirm receipt of applications by email starting around **April 1st**.

?s contact us at **260.226.7102**

Medical Form

In case of an emergency, please contact: _____

at this number: Cell Phone: _____ Work Number: _____

Home Number: _____

Date of last Tetanus or TDAP vaccine: _____ (recommended be up-to-date to attend camp)

Do you have asthma? Diabetes? Epilepsy? If so, please explain:

Are you taking medication? If so, please explain:

Do you have disabilities? If so, please explain:

Do you have any critical dietary restrictions? If so, please explain:

Do you have any heart conditions? If so, please explain:

Do you have phobias or fears? If so, please explain:

Have you had any past injuries or surgeries? If so, please explain:

Medical Insurance Coverage

Company: _____ Policy Number: _____

Address:

Phone Number: _____ Fax: _____

I authorize by signature that the information provided is truthful and correct.
Furthermore, I give my consent to the weekend leaders or other medical personnel
to treat me/my daughter in an emergency situation.

Signature of Applicant:

Parent/Guardian Signature:

Date: _____

About You

We'd like to get to know you and about your journey before you come for OBSESS. Here are some questions we'd like to have you answer in an essay style with 75-100 words. Use a separate paper for your answers, corresponding each one with the same number as the question. Staple it to this page when you are done. Your answers will remain confidential, so please be honest! :)

1. What is your purpose in life?
2. What does loving others like Jesus mean to you?
3. Describe your journey with God and how He makes life worth living.
4. Describe your relationship with your father.
5. Describe your relationship with your mother.
6. How does social media/technology affect you in good and bad ways?
7. How do you, as a young lady, reflect the character of God?