

# 2017 YEAR-AROUND CAMP EVANGELISM REPORT

## NAD Camp Ministries

Reporting dates begin at the end of your Summer Camp sessions of the previous year through the end of your Summer Camp sessions this year.  
This report should be completed and sent by October 15 of this year.

CAMP NAME \_\_\_\_\_  
 CONFERENCE \_\_\_\_\_  
 UNION \_\_\_\_\_

**YEAR-AROUND CAMP STAFF (include Full-time and Part-time Staff combined)**  
 (Note: Do not include Summer Camp Staff)

# Hired Staff \_\_\_\_\_  
 # Volunteer Staff \_\_\_\_\_

Report # of Groups, not participants	# of Adventist Church Groups	# of Sessions of Outdoor School	# of Conference- Sponsored Events	# of non-Adventist User Groups	Other	Other	Other
					_____	_____	_____

**YEAR-AROUND TOTALS (Note: do not include Summer Camp totals)**

Total number of User Groups	_____
Total number of Guests	_____
Total number of Camper Days (if known) (Example: 100 guests x 3 days = 300 Camper Days)	_____
Note: Do not include Summer Camp Totals	

Form Completed By \_\_\_\_\_ Date \_\_\_\_\_

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