



**APPLICATION INSTRUCTIONS
FOR SUMMER MISSIONARY SERVICE**

Phone (423)365-9565 * Web Page: www.cedine.org * EMail: cedine@cedine.org * Fax: (423) 365-6111

Please send all parts of the application to:

**Cedine Bible Camp
Attention Camp Director
333 Cedine Camp Rd
Spring City TN 37381**

What the application involves:

Application. Be sure to answer every question.

Pastoral Reference.

Please have the pastor/youth leader of the church you are attending complete and return this form. If your church is without a pastor or the pastor is related to you, then have one of the church officers complete and return the form. You are responsible to fill in the top portion of the form.

Academic Reference.

Please give this form to a teacher, guidance counselor or professor to complete and return. You are responsible to fill in the top portion of the form. If you have been out of school (high school/college) for more than a year, you may send another Christian character.

Work Reference.

Please give this form to someone who can vouch for your work ethic. You are responsible to fill in the top portion of the form.

Christian Character References.

Please give this (these) form(s) to someone who can testify to your Christian commitment. You are responsible to fill in the top portion of the form.

Staff Manual.

Please read and bring to camp with you. You can find it on our website: Cedine.org

Interviews .

All potential staff, including returning staff, will be interviewed in person and/or by telephone. Interviews will be scheduled after all the application materials have been received.

When you will be notified:

When your application and references have been received, they will be reviewed and you will be notified as soon as possible after a decision is made. **You may call camp and inquire as to whether or not your application and references have been received.**

APPLICATION FOR SUMMER MISSIONARY SERVICE



BIBLE MISSION

CAMP, RETREAT AND CONFERENCE CENTER

333 CEDINE CAMP ROAD • SPRING CITY, TENNESSEE 37381-6132

Phone (423)365-9565 * Web Page: www.cedine.org * EMail: cedine@cedine.org * Fax: (423) 365-6111

Name _____ Title _____ Home Address _____

City _____ ST _____ Zip _____ Sex _____ Age _____ Birthday Month _____ Day _____ Year _____

Phone _____ Cell Phone _____ EMail _____

Married ___ Single ___ Divorced ___ Separated ___ Living together ___

In case of emergency notify _____

Relationship _____

Address _____

City _____ ST _____ Zip _____

Phone _____

Church you are a member of ? _____

Pastor _____

Phone _____

Address _____

City _____ ST _____ Zip _____

Church you normally attend (if different from the above)? _____

Pastor's Name _____ Phone _____

Address _____ City _____ ST _____ ZIP _____

What is your main reason for applying to Cedine Bible Camp? _____

If you have dependent children please list their ages: _____

College _____ Address _____

City _____ ST _____ Zip _____ Phone _____ EMail _____

What position do you desire? (Counselor, cook, activity instructor, office secretary, nurse, etc.) _____

Dates Available: Summer of 20 _____ From _____ To _____ Shirt Size _____

Your Picture-not required but
Helps us to begin praying for you and to get to
know you better!

Name _____ Date Received _____ Entered on Computer _____ By _____

EDUCATION (Circle the year completed by June) High School - 1 2 3 4 ; College/Bible Inst - 1 2 3 4

Post Graduate - 1 2 3 4: School now attending (if any) _____

What field of study have you pursued since high school? _____

What courses in Personal Evangelism and Discipleship have you taken? _____

What experience in Personal Evangelism and Discipleship have you had? _____

What courses have you taken in camp counseling? _____

If none, are you willing to take a correspondence course and/or online training in Camp Counseling? _____

SPIRITUAL - Briefly write your testimony as to how and when you came into a personal relationship with Jesus Christ. _____

Are you sure you are saved now? _____ Why? _____

Could you lose your salvation? _____ If so, under what circumstances? _____

How would you explain the way of salvation to a camper? List facts that must be understood along with supporting Scripture _____

Do you have a daily Bible reading and prayer time? _____

What is the origin of man? _____

What is man's present spiritual condition? _____

Why? _____

What is your view of the authority of the Scripture? _____

How can a person be filled with the Holy Spirit? _____

What do you believe about speaking in tongues and public healing meetings? _____

What is your position concerning women as Pastors or Ministers? Please support your view with Scripture. _____

When was the last time you used tobacco? _____ Alcoholic beverages? _____

Hallucinatory drugs _____

Are you willing to forget "race" and live with others as a true child of God? _____

Have you ever been convicted of or pleaded guilty to a crime? _____ If yes, explain. _____

If you prefer, you may refuse to answer the next 2 question, or you may discuss your answer in confidence with the camp director rather than answering it on this form. Answering yes, or leaving the question unanswered, will not automatically disqualify an applicant for work at the camp.

Were you a victim of abuse or molestation while a minor? _____

Do you have any physical weaknesses, limitations or past history that would affect your ministry with us? _____

If yes please explain _____

List all previous youth work in which you have been involved and the name and address of the church or other organization where the work was performed _____

CAMPING INFORMATION

What camps have you attended? _____

What camps have you worked at and what position did you hold? _____

In the following list, put 1 before activities you can organize and teach: 2 for those in which you can assist in teaching: 3 for those with which you are slightly familiar.

- ___ Archery ___ Softball ___ Canoeing ___ Hiking ___ Horseback riding ___ Riflery ___ Water Skiing
- ___ Volleyball ___ Basketball ___ Crafts ___ Biking ___ Fishing ___ Choir ___ Animal Care

Swimming classification (check one) ___ Advanced ___ Intermediate ___ Beginner ___ Non-Swimmer

Please list any certifications you have _____

Please list any talents or skills God has given you: _____

FINANCIAL INFORMATION

- 1. Are you willing and able to serve as a summer missionary with no promised pay? _____
- 2. Because this is a mission program the camp fees are set to cover only food, lodging and other benefits, but no salaries. College age staff serving all summer may receive money from the summer staff fund. This fund is made up of gifts from churches and individuals interested in this ministry.
- 3. If applying for the entire summer how much financial help will you need? _____

PROCESSING INFORMATION:

Character References are Required.

Please give/send the enclosed Reference questionnaires to those who will fill them out for you. Please ask them to mail it to Cedine. You must fill in your name and the position you are applying for on each reference questionnaire. Please list the names and address of those you are giving these forms to.

1. Pastor:

Name _____ Address _____

City _____ ST _____ ZIP _____ Phone _____

2. Christian Character (not a family member):

Name _____ Address _____

City _____ ST _____ ZIP _____ Phone _____

3. Employer:

Name _____ Address _____

City _____ ST _____ ZIP _____ Phone _____

4. Academic:

Name _____ Address _____

City _____ ST _____ ZIP _____ Phone _____

The information contained in this application is correct to the best of my knowledge. I authorize any references or churches listed in this application to give Camp Cedine any information (including opinions) that they may have regarding my character and fitness for my responsibilities at Camp Cedine. In consideration of the receipt and evaluation of this application by Camp Cedine I hereby release any individual or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by in this application.

I have read the Staff Manual and heartily agree with Cedine's doctrinal statement. I understand the position, policies and guidelines and will follow them to the best of my ability.

Signature _____ Date _____

Are you also interested in MAPS (Ministry Apprenticeship and Practical Studies) 15 month internship? _____

PASTORAL RECOMMENDATION FOR SUMMER STAFF
CEDINE BIBLE CAMP AND CONFERENCE CENTER
 333 CEDINE CAMP RD, SPRING CITY, TN 37381
 Phone (423) 365-9565 FAX (423) 365-6111

This section to be completed by applicant:

Applicant's Name _____ Dates Available _____ Phone _____
 Address _____ City _____ State _____ Zip _____
 E-mail _____ Position Applying for _____

The above named person is applying for summer ministry staff at Cedine Bible Camp. The personal information requested below supplements their application and personal interview. It is of great importance to us to obtain objective and valid statements from persons who have some personal knowledge of the applicant's ability and characteristics. Any information which you give us will be regarded as strictly confidential. Please send this form directly to Cedine Bible Camp.

For Staff Returning From The Previous Summer

Please list any changes since the last time you filled out this form.

Please Print Clearly

1. How long have you know the applicant? _____
2. Is the applicant a Christian? _____ For approximately how long? _____
3. Have you seen the applicant in response to understanding the Scriptures, witnessing, and prayer life?

-
-
4. Does the applicant appear to be growing in his/her Christian experience? Please explain

-
-
5. What spiritual gifts are evident in the applicant's life? _____

-
-
6. Describe the applicant's pattern of church attendance. He/she attends:

All services regularly 1 or 2 per week Less than once a month

7. Is the applicant a member of your church? _____

8. Please indicate which statement best describes the applicant in relation to each characteristic listed below.

	Most of the time	Some of the time	Not Often	Hardly ever
Able to follow instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loyal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoing and friendly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An able leader of others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistent in Christian testimony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined in personal habits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiastic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to adjust to different situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to cope with other's problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easily offended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclined to criticize others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moody	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work without close supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work in a team situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average. "3" if average and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

- | | | |
|-----------------------|-----------------------------|------------------------------------|
| ___ Personal Grooming | ___ Sense of Humor | ___ Willingness |
| ___ Tact | ___ Initiative | ___ Attitude toward authority |
| ___ Dependability | ___ Courtesy | ___ Attitude toward hard work |
| ___ Judgment | ___ Initial Impression | ___ Public speaking ability |
| ___ Punctuality | ___ Ability to make friends | ___ Honesty and personal integrity |

10. There is a possibility that the applicant would serve as a camp counselor. Would you consider the applicant qualified to counsel your child or teenager? yes no

11. Please list one strength: _____

12. One weakness of the applicant: _____

13. Please check your choice of recommendation:

- | | |
|---|--|
| <input type="checkbox"/> I strongly recommend | <input type="checkbox"/> I recommend with some reservation |
| <input type="checkbox"/> I recommend | <input type="checkbox"/> I do not recommend |

14. Please give your opinion on this applicant's over all suitability to work in a ministry setting such as Cedine Bible Camp.

Your Name (please print) _____ Date _____

Address _____

Church/Position _____ Phone _____

E-Mail _____ Signature _____

Thank you for the early return of this form as it will expedite the candidate's application process.

Camp Director
333 Cedine Camp Rd
Spring City, TN 37381

ACADEMIC RECOMMENDATION FOR SUMMER STAFF
CEDINE BIBLE CAMP AND CONFERENCE CENTER
 333 CEDINE CAMP RD, SPRING CITY, TN 37381
 Phone (423) 365-9565 FAX (423) 365-6111

This section to be completed by applicant:

Applicant's Name _____ Dates Available _____ Phone _____
 Address _____ City _____ State _____ Zip _____
 E-mail _____ Position Applying for _____

The above named person is applying for summer ministry staff at Cedine Bible Camp. The personal information requested below supplements their application and personal interview. It is of great importance to us to obtain objective and valid statements from persons who have some personal knowledge of the applicant's ability and characteristics. Any information which you give us will be regarded as strictly confidential. Please send this form directly to Cedine Bible Camp.

For Staff Returning From The Previous Summer

Please list any changes since the last time you filled out this form.

Please Print Clearly

1. The applicant's homework assignments are (check all that apply)

- neat messy
- done well often have careless errors
- on time often late

2. The applicant's motivation would best be described as:

- Excellent-highly self motivated
- Good-effectively motivated
- Average-motivated if there is an external reward
- Poor-rarely motivated by any means

3. Please indicate which statement best describes the applicant in relation to each characteristic listed below.

	Most of the time	Some of the time	Not often	Hardly ever
Able to follow instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loyal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoing and friendly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An able leader of others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistent in Christian testimony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined in personal habits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiastic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to adjust to different situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to cope with other's problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easily offended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclined to criticize others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moody	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work without close supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work in a team situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average, 3" if average and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

___ Personal Grooming	___ Sense of Humor	___ Willingness
___ Tact	___ Initiative	___ Attitude toward authority
___ Dependability	___ Courtesy	___ Attitude toward hard work
___ Judgment	___ Initial Impression	___ Public speaking ability
___ Punctuality	___ Ability to make friends	___ Honesty and personal integrity

5. Please list one strength: _____

6. One weakness of the applicant: _____

7. Please check your choice of recommendation:

<input type="checkbox"/> I strongly recommend	<input type="checkbox"/> I recommend with some reservation
<input type="checkbox"/> I recommend	<input type="checkbox"/> I do not recommend

8. Please give your opinion on this applicant's over all suitability to work in a ministry setting such as Cedine Bible Camp.

Your Name (please print) _____ Date _____

Address _____

Organization/Position _____ Phone _____

E-Mail _____ Signature _____

Thank you for the early return of this form as it will expedite the candidate's application process.

WORK RECOMMENDATION FOR SUMMER STAFF
CEDINE BIBLE CAMP AND CONFERENCE CENTER
 333 CEDINE CAMP RD, SPRING CITY, TN 37381

This section to be completed by applicant:

Applicant's Name _____ Dates Available _____ Phone _____
 Address _____ City _____ State _____ Zip _____
 E-mail _____ Position Applying for _____

Phone (423) 365-9565 FAX (423) 365-6111

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For Staff Returning From The Previous Summer

Please list any changes since the last time you filled out this form.

Please Print Clearly

1. Please rate the applicant on the following:

	Superior	Above Average	Average	Poor	Not Observed
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gives advance notice for time off	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rarely misses work due to illness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learn new tasks quickly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility/Adaptability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Considerate of co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Polite and helpful to customers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listens and follows directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thoroughness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectiveness in supervising others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Does the applicant respond well to authority?

3. Does the applicant accept criticism well?

4. How well does the applicant work under pressure?

5. Does the applicant go beyond his/her required tasks?

6. Does the applicant take the initiative to get tasks done that he/she sees need to be done or has not been assigned?

7. Is the applicant willing to come in, if able, and work on days he/she has off?

8. Please list one strength of the applicant:

9. Please list one weakness of the applicant:

10. Additional Comments

Your Name (please print) _____ Date _____

Address _____

Organization /Position _____ Phone _____

E-Mail _____ Signature _____

Thank you for the early return of this form as it will expedite the candidate's application process.

Camp Director
333 Cedine Camp Rd
Spring City, TN 37381

CHRISTIAN CHARACTER RECOMMENDATION FOR SUMMER STAFF

CEDINE BIBLE CAMP AND CONFERENCE CENTER

333 CEDINE CAMP RD, SPRING CITY, TN 37381

Phone (423) 365-9565 FAX (423) 365-6111

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Applicant's Name _____ Dates Available _____ Phone _____

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For Staff Returning From The Previous Summer

Please list any changes since the last time you filled out this form.

Please Print Clearly

1. How long have you know the applicant? _____
2. Is the applicant a Christian? _____ For approximately how long? _____
3. Have you seen the applicant in response to understanding the Scriptures, witnessing, and prayer life?

4. Does the applicant appear to be growing in his/her Christian experience? Please Explain

5. What spiritual gifts are evident in the applicant's life? _____

6. Do you feel that the applicant has a tender heart towards God and a teachable spirit? _____

7. What do you consider to be special about the applicant? _____

8. Please indicate which statement best describes the applicant in relation to each characteristic listed below.

	Most of the time	Some of the time	Not often	Hardly ever
Able to follow instructions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loyal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoing and friendly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An able leader of others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consistent in Christian testimony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined in personal habits.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiastic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to adjust to different situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to cope with other's problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easily offended	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclined to criticize others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moody	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work without close supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work in a team situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average, "3" if average and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

- | | | |
|-----------------------|-----------------------------|------------------------------------|
| ___ Personal Grooming | ___ Sense of Humor | ___ Willingness |
| ___ Tact | ___ Initiative | ___ Attitude toward authority |
| ___ Dependability | ___ Courtesy | ___ Attitude toward hard work |
| ___ Judgment | ___ Initial Impression | ___ Public speaking ability |
| ___ Punctuality | ___ Ability to make friends | ___ Honesty and personal integrity |

8. How do you think this applicant will do as a member of our staff?

9. Please list one strength:

10. one weakness of the applicant:

11. Please check your choice of recommendation:

- | | |
|---|--|
| <input type="checkbox"/> I strongly recommend | <input type="checkbox"/> I recommend with some reservation |
| <input type="checkbox"/> I recommend | <input type="checkbox"/> I do not recommend |

12. Please give your opinion on this applicant's over all suitability to work in a ministry setting such as Cedine Bible Camp.

Your Name (please print) _____ Date _____

Address _____

Organization /Position _____ Phone _____

E-Mail _____ Signature _____

Thank you for the early return of this form as it will expedite the candidate's application process.

Camp Director
333 Cedine Camp Rd
Spring City, TN 37381