



## Camp Volunteer Application

(Please download the application file to your desktop – do not complete the form online.)

Thank you for your interest in Camp Civitan. Volunteers play a crucial role in the successful operations at Camp, and we are thrilled that you would like to be a part of what we do. We recognize how valuable your time and talents are and wish to provide you with an opportunity that is engaging and fulfilling. For that reason, we ask you to please take a few moments to fill out the following forms to better help us match your abilities and interest with our available opportunities. Please fill in the application as completely as possible.

### Volunteer Information

Last Name:		First Name:		Middle Initial:	
Home Address:			City:		State:
Mailing Address (if different from above):			City:		State:
Home Phone:			Cell Phone:		
Email Address:				Unisex T-Shirt Size:	

### Guardian Information

Last Name:		First Name:			
Mailing Address (if different from above):		City:		State:	Zip Code:
Home Phone:		Cell Phone:			
Email Address:				Relationship:	

### Health Information

Insurance Company:		Policy #:			
Policy Holder Name:		Relationship to Policy Holder:			
Allergies (Food and Non-food):					Birthdate:
Dietary Restrictions:					
Current Medications (Please note: ALL medications must be signed in upon check-in):					

If accepted, a copy of your insurance card will be required. If you do not have insurance, a waiver will be available to allow participation.



**Prior Volunteer Experience**

Organization/Company #1:	Contact:
Phone:	Email Address:
Duties:	
Length of Time:	Reason for Leaving:
Organization/Company #2:	Contact:
Phone:	Email Address:
Duties:	
Length of Time:	Reason for Leaving:
Organization/Company #3:	Contact:
Phone:	Email Address:
Duties:	
Length of Time:	Reason for Leaving:

**Criminal History:**

Have you ever been charged with or convicted of a felony?  Yes  No

Have you ever been charged with or convicted of any crime involving a sex offense, an assault or the use of a weapon?  Yes  No

Have you ever been charged with or convicted of any crime involving the use, possession or the furnishing of drugs or paraphernalia?  Yes  No

Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them?  Yes  No

If you answered "yes" to any of the above questions, please explain.

**Answer only if you are 18 years or older.**

To the best of your knowledge, are you able to pass Level 1 Fingerprint Clearance?  Yes  No

**Additional Information**

Please list any experience you have working with individuals with disabilities.	
Do you speak any other Language? If so, what language(s)?	
Please list any leadership roles (club officer, team captain, etc.) you have held/hold.	
Please list any special skills, qualifications, or interests you may have.	
Please share why you would like to volunteer at Camp Civitan.	
Please share what you hope to gain from your experience at Camp Civitan.	
How did you hear about Civitan?	
Have you volunteered with Civitan before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Some volunteer duties require lifting, vigorous activity, light custodial work, and long hours. Is there any reason you might have difficulty performing these duties? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered "yes" to the above question, please provide dates or time periods.	If you answered "yes" to the above question, please explain.



**References**

#1 Last Name	First Name
Phone	How long have you known this person?
Email	Type of acquaintance (check all that apply) <input type="checkbox"/> Supervisor <input type="checkbox"/> Teacher <input type="checkbox"/> Friend Other:
#2 Last Name	First Name
Phone	How long have you known this person?
Email	Type of acquaintance (check all that apply) <input type="checkbox"/> Supervisor <input type="checkbox"/> Teacher <input type="checkbox"/> Friend Other:

**If you have not volunteered with Civitan before**, please provide the two (2) individuals listed above with the link below and have them complete the Volunteer Reference Form. These references should be individuals who have personal knowledge of your achievements, work ethic, and character. Please do not include relatives. Suggestions of appropriate references include teachers, coaches, pastors, employers, etc. **Please note: The Volunteer Reference Form must be completed by two (2) individuals before your application will be processed.**

**Reference Form Link:** <https://bit.ly/36Ep8Ze> (Please right click & open the link in a new tab/window.)

**Disclosure Statement:**

<ol style="list-style-type: none"> <li>1. I understand that dependent upon volunteer assignment, Agency volunteers 18 years of age or older must be fingerprinted and cleared by the DES Office of Investigations.</li> <li>2. If accepted, I agree to be governed and abide by all Agency rules and regulations.</li> <li>3. I understand that as a volunteer I will not receive compensation or benefits for my services. Furthermore, I understand that I am not covered under the Civitan Foundation, Inc.'s Worker's Compensation plan.</li> <li>4. I authorize inquiry regarding my character, ability, and habits of any and all persons, and agree to hold such persons harmless with respect to any information that they may provide.</li> <li>5. I certify that the information I have provided herein is true, and I understand that any misstatement or omission of facts may disqualify me or be cause for dismissal regardless of the time of discovery by the Civitan Foundation, Inc.</li> <li>6. I understand that all volunteer positions are offered for an indefinite duration, "at will," and may be terminated at any time without cause.</li> </ol>
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Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Upon completion of the Camp Volunteer Application please SAVE the file to your computer and email it to [rwalborn@campcivitan.org](mailto:rwalborn@campcivitan.org) or fax to (602) 953-2946, Attention: Volunteer Coordinator.**



**Availability**

Please **select the sessions you are available to volunteer** at Camp this summer **and rank them in order of preference** with 1 representing your first preference. If you are available all 11 sessions, please rank order weeks 1-11, if you are available fewer sessions, please rank order up to the total number of sessions you are available (i.e., available 3 sessions = ranking 1-3). *Please note, indicating your availability for a session does not guarantee a spot for that session.* Once the application and interview process are complete, you will receive confirmation from the Volunteer Coordinator with your scheduled session(s).

**Summer Dates:**

I'm Available to Volunteer	Rank (1-11)	Session Dates	Theme of the Camp Session	Total Days (Hours Earned)
<input type="checkbox"/> Session 1		June 1-6	Servin' Up Summer (Kids Camp)	6 Days (48 Hours)
<input type="checkbox"/> Session 2		June 6-13	CiviPalooza- Summer Music Fest	8 Days (64 Hours)
<input type="checkbox"/> Session 3		June 13-20	Rodeo Round Up!	8 Days (64 Hours)
<input type="checkbox"/> Session 4		June 20-27	Boys Only Boot Camp	8 Days (64 Hours)
<input type="checkbox"/> Session 5		June 27-July 5	Here's to the Red, White, & Blue!	9 Days (72 Hours)
<input type="checkbox"/> Session 6		July 8-11	Holiday Havoc! (Kids Camp)	4 Days (32 Hours)
<input type="checkbox"/> Session 7		July 11-18	Camp Camelot	8 Days (64 Hours)
<input type="checkbox"/> Session 8		July 18-25	Who Runs the World? Girls.	8 Days (64 Hours)
<input type="checkbox"/> Session 9		July 25-August 1	It's Show Time!	8 Days (64 Hours)
<input type="checkbox"/> Session 10		August 1-8	Out of this World	8 Days (64 Hours)
<input type="checkbox"/> Session 11		August 8-15	Crikey, It's Animal Week!	8 Days (64 Hours)

**Will you be riding the bus to and from Camp?**

- Yes.
- No, I will be dropped off and picked up from Camp.

**Application Completion:**

Please ensure that all parts of the application have been completed and are submitted at once. Only completed applications will be processed. A completed application includes the following:

Application

Photo

2 Reference Forms

Copy of Current Insurance Card (if applicable)

**Upon completion of this application an interview will be scheduled. If you are selected to volunteer, you will be required to obtain your Food Handlers Card and attend an Orientation prior to Camp.**

**If you have any questions please do not hesitate to reach out to Rachael Walborn, Volunteer Coordinator, [rwalborn@campcivitan.org](mailto:rwalborn@campcivitan.org) or (602) 953-2944 Ext. 110.**