



## Parent Volunteer Application Form

### Personal Information

Name: \_\_\_\_\_ Present Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Dates Preferred : \_\_\_\_\_

Permanent Address: \_\_\_\_\_ City \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

S.I.N. \_\_\_\_\_ Medicare #: \_\_\_\_\_ Expires: \_\_\_\_\_

Sex:  M  F Status:  Single  Married  Other \_\_\_\_\_ Citizenship \_\_\_\_\_

Age: \_\_\_\_\_ Birth date (Year/Month/Day): \_\_\_\_\_

Notify in case of Emergency: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Prov: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

### Church Information

Home Church: \_\_\_\_\_ Member  Yes  No

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Church Attendance:  Regularly  Occasionally  Seldom

Pastor: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Youth Pastor/Leader: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Briefly describe any areas of service that you are or have been involved in at your church.

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## Camp Experience

1. Briefly describe your experience as a camper or staff member in camping (indicate camp and date attended).

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2. Describe any leadership training you have received.

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## Purpose

Briefly describe your reason for applying to Green Hill Lake Camp for this summer.

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## Activity Skills

On the following list put a “1” before those activities you feel qualified to teach, and a “2” before those you can assist in teaching. Please **Circle** those activities you are most interested in. Add any other skills you could contribute to a camp setting.

### SPORTS/OUTDOOR ACTIVITIES

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Archery             | <input type="checkbox"/> Softball/Baseball     | <input type="checkbox"/> Aerobics        |
| <input type="checkbox"/> Bicycle Touring     | <input type="checkbox"/> Outdoor Cooking       | <input type="checkbox"/> Mountain Biking |
| <input type="checkbox"/> Soccer              | <input type="checkbox"/> Ropes/Obstacle Course | <input type="checkbox"/> Volleyball      |
| <input type="checkbox"/> Wilderness Survival | <input type="checkbox"/> Hiking/Orienteering   | <input type="checkbox"/> Group Games     |
| <input type="checkbox"/> Nature Studies      | <input type="checkbox"/> Rock/Wall Climbing    |  |
| <input type="checkbox"/> Skateboarding       | <input type="checkbox"/> Basketball            |  |

### WATER GAMES

- |                                      |   |                                       |
|--------------------------------------|---|---------------------------------------|
| <input type="checkbox"/> Sailing     | <input type="checkbox"/> Fishing        | <input type="checkbox"/> Kayaking     |
| <input type="checkbox"/> Swimming    | <input type="checkbox"/> Canoeing       | <input type="checkbox"/> Water Games  |
| <input type="checkbox"/> Windsurfing | <input type="checkbox"/> Lifeguard Duty | <input type="checkbox"/> Other: _____ |

**ARTS & CRAFTS**

\_\_\_ Nature Crafts

\_\_\_ Leather Craft

\_\_\_ Painting

\_\_\_ Tie-Dyeing

\_\_\_ Rocket Building

\_\_\_ Other: \_\_\_\_\_

\_\_\_ Carving

\_\_\_ Creative Crafts

**DRAMA, MUSIC AND TEACHING**

\_\_\_ Bible Studies

\_\_\_ Piano Instruction

\_\_\_ Guitar Instruction

\_\_\_ DVBS

\_\_\_ Skits

\_\_\_ Drums

\_\_\_ Piano/Keyboards

\_\_\_ Electric Guitar

\_\_\_ Storytelling

\_\_\_ Drama

\_\_\_ Singing

\_\_\_ Song leading

\_\_\_ Acoustic Guitar

\_\_\_ Video Production

\_\_\_ Other: \_\_\_\_\_

**BUSKING & CLOWNING**

\_\_\_ Balloon Animals

\_\_\_ Illusions

\_\_\_ Juggling

\_\_\_ Other: \_\_\_\_\_

Please describe your experience in the areas marked "1". Indicate any appropriate certificates, licenses, awards, qualifications, etc. Use additional paper if necessary.

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**Time of Service**

Check the week(s) you are available for:

July 4-9

August 1-6

July 11-16

August 8-13

July 18-23

August 15-20

July 25-30

August 22-27

## Type of Service

Refer to the list below and determine those positions you would like to apply for and feel qualified to serve. Indicate your first, second, third, and even fourth choices (NOTE: This does not refer to “Activity Skills”)

1. \_\_\_\_\_ 3. \_\_\_\_\_

2. \_\_\_\_\_ 4. \_\_\_\_\_

### SUPPORT STAFF POSITIONS:

#### Babysitters:

GHLC requires a number of babysitters to help with the toddlers and children of staff.

**Dining Hall Coordinators:** This person oversees the dining halls and dishwashing area, is responsible to supervise the work of the dishwashing staff, help serve at meal times, and keep the dining halls clean.

**Food Services:** The kitchen is run by a head cook, and assistant cook, with three assistants and one to two food service workers. Work involves food preparation, serving meals, and washing dishes. The kitchen staff works long hard hours to prepare our food.

**Housekeeping:** We require a team of hard workers each week for a variety of housekeeping duties, primarily keeping our washrooms and public/meeting areas clean and tidy.

**Maintenance / Construction:** GHLC needs volunteers to work on our maintenance team each summer to assist in any number of projects. Although no experience is required, it is helpful if you have some woodworking, electrical, mechanical or plumbing skills.

**Medical Staff:** Green Hill Lake Camp requires qualified medical staff for each weekly camp session: nurse, doctor, paramedic, etc. Responsibilities include caring for campers and staff as well as keeping a log of accidents and treatments.

**Office Staff:** We require one office assistant during each week. The office responsibilities include: administrating opening and closing days, assisting with the Tuck Shop, maintaining staff and camper accounts, as well as assisting in various administrative tasks.

Are you willing to attend a Staff Orientation session on June 26?  Yes  No

## Getting to know you

Describe your strengths. \_\_\_\_\_

\_\_\_\_\_

Describe your weaknesses. \_\_\_\_\_

\_\_\_\_\_

Do you know what your spiritual gift(s) are  Yes  No If yes, please list: \_\_\_\_\_

\_\_\_\_\_

What other talents and abilities has God given you? \_\_\_\_\_

\_\_\_\_\_

## Christian Experience

Briefly describe when and how you came to faith in Christ. \_\_\_\_\_

\_\_\_\_\_

Who is Jesus Christ to you? Describe your relationship to Him as it stands today. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe your commitment to the Church and to fellowship with other believers. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How have you been growing in your faith and relationship with Christ and with others? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How has your Christian faith affected your lifestyle at school, home, work, etc? \_\_\_\_\_

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Briefly comment on the following personal values:

Alcohol, tobacco, and drug use: \_\_\_\_\_

Tobacco      Frequency of use: Never Monthly Weekly Daily      Date Last used: \_\_\_\_\_

Illegal Drugs      Frequency of use: Never Monthly Weekly Daily      Date Last used: \_\_\_\_\_

Alcohol      Frequency of use: Never Monthly Weekly Daily      Date Last used: \_\_\_\_\_

## Employment Record

List your most recent employment first. Include Camp staff positions.

Employer/Company	Address/City	Phone	Dates	Position

Have you ever been convicted of a criminal offense for which you have never been pardoned?

Yes No

## References

Please provide the name of three people that know you well and have agreed to act as your references. One reference should be a Christian worker (Pastor, Youth Pastor, Sunday School Teacher, Christian group leader, etc.); one should be a person outside your church life (employer, teacher, coach, etc.); and one other person. Please do not use relatives.

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

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