



# VOLUNTEER APPLICATION FORM

Date \_\_\_\_\_

## Personal Information

Full Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Camp Name \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Address \_\_\_\_\_ City \_\_\_\_\_ Postal \_\_\_\_\_

Email address \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

Phone Number (H) \_\_\_\_\_ Cell \_\_\_\_\_

Person to be notified in emergency \_\_\_\_\_ Phone \_\_\_\_\_

Care Card Number \_\_\_\_\_

How did you hear about Kawkawa Camp? \_\_\_\_\_

## Areas of Interest (number in order of preference)

\_\_\_\_ Building Projects    \_\_\_\_ Weekend Hosting    \_\_\_\_ Kitchen    \_\_\_\_ Maintenance  
\_\_\_\_ Plumbing/Electrical    \_\_\_\_ Administration    \_\_\_\_ Boat Driver    \_\_\_\_ Nurse/First Aid  
\_\_\_\_ Garden/Landscape    \_\_\_\_ Speaker    Other \_\_\_\_\_

Dates available: starting from \_\_\_\_\_ available until \_\_\_\_\_

## 1. How do you hope to contribute to camp life?

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**Personal References**

Please include the names and phone numbers of 3 references that can be contacted:

	Teacher/Employer/Pastoral	Adult Friend	Other
Name	_____	_____	_____
Phone	_____	_____	_____
Email	_____	_____	_____

Are there circumstances or traits in your lifestyle or background that would call into question your ability to work with children or youth? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been arrested or convicted for the use or sale of drugs? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been hospitalized or treated for alcohol or substance abuse? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a criminal offense? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any pending criminal charges or convictions? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been accused, arrested/convicted for any abuse-related crimes? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been the subject of any disciplinary action (including discharge) or investigation by a church, religious or other organization, or by an employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any physical condition which would limit your capacity for the job(s) applied for or health concerns of which we should be aware? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any type of special diet? Yes \_\_\_\_\_ No \_\_\_\_\_

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

**Personal Consent**

I agree to my picture being used by Kawkawa Camp & Retreat for program, promotional & publicity purposes. Please Initial: \_\_\_\_\_ Agree \_\_\_\_\_ Disagree \_\_\_\_\_

I agree to consent to a Police Criminal Record Check and will have this delivered to the camp prior to my arrival on the camp property.

Please initial: Agree \_\_\_\_\_ Disagree \_\_\_\_\_

To the best of my knowledge, all information, which has been given in this form or during any interview, is accurate and complete. I understand that in the event of my application being accepted by Kawkawa, I shall be subject to dismissal if any of the information I have given is false or if I failed to give any material information herein requested.

Please initial: Agree \_\_\_\_\_ Disagree \_\_\_\_\_ Signature \_\_\_\_\_