

# CAMP PENIEL

## 2012 VOLUNTEER APPLICATION

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
*Last First Middle*

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail \_\_\_\_\_

Age \_\_\_\_\_ Birthdate \_\_\_\_\_ Gender \_\_\_\_\_ Single \_\_\_\_\_ Married \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Children who will not be campers but will be coming with you:

Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_

Church attending \_\_\_\_\_ City or location \_\_\_\_\_

### **PRACTICAL EXPERIENCE:**

In Camping: (previous experience, position (s)) \_\_\_\_\_

Other: (Sunday School, clubs, etc.) \_\_\_\_\_

Briefly share how you accepted Christ: \_\_\_\_\_

### **QUALIFICATIONS/CERTIFICATIONS**

Health Care \_\_\_\_\_ Exp. Date \_\_\_\_\_ CPR \_\_\_\_\_ Exp. Date \_\_\_\_\_

Waterfront \_\_\_\_\_ Exp. Date \_\_\_\_\_ Other \_\_\_\_\_ Exp. Date \_\_\_\_\_

Have you ever been convicted of anything other than a minor traffic violation? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Have you committed or ever been accused of any act of child abuse or criminal sexual conduct? **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

**Camp Peniel**  
**Gen. 32:30**

**HEALTH HISTORY RECORD**

Medication needed or used, (including psychiatric)

Kind \_\_\_\_\_ Frequency \_\_\_\_\_ Dosage \_\_\_\_\_ Currently taking Yes \_\_\_ No \_\_\_

Kind \_\_\_\_\_ Frequency \_\_\_\_\_ Dosage \_\_\_\_\_ Currently taking Yes \_\_\_ No \_\_\_

To the best of your knowledge, do you have any type of infectious disease? Yes No

If yes, please explain \_\_\_\_\_

Do you have any physical limitations? Yes No If yes, please explain \_\_\_\_\_

Do you have any special conditions to be watched for? (allergies, diabetes, epilepsy, heart trouble, etc.)

Yes No If yes, please explain \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_ Phone \_\_\_\_\_

*By signing this application I agree that the above information is true, knowing that any false information given may result in consequences including, but not limited to, termination of service.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

**REFERENCES**

**Having personal knowledge of the character, integrity and ability of the above-identified individual, I endorse the said person as a qualified applicant for performing tasks associated with the camp operation.**

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

*Signature Position Phone Date*

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

*Signature Position Phone Date*

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

*Signature Position Phone Date*