



KIDS' CAMP STAFF 2024

(NOTE: We are looking for Christian, church-attending volunteers.)

3 part application:

- Application
 Pastor's Recommendation
 Vulnerable Sector Check (18+)

A Vulnerable Sector Check (within the last 12 months) must be submitted for volunteers 18 and older. You will need to take a letter to your Police Station to request a check be done or do it online. It is usually free for volunteers.

Please advise that you need a letter, thank you.

Name: _____ Age: _____ []M []F

Address: _____

City: _____ Postal Code: _____

Phone # (s) _____

Email: _____

Food allergies/restrictions ___ Yes ___ No

Explain _____

Position Applying for: **Rank 1st, 2nd, 3rd choices**

___ Coach (counselor)

___ Jr. Coach (15-16yrs)

___ Crafts/Survival

___ Sports/Large Group

___ Mystery Activity

___ Theme night

___ Cook

___ Missions / Special

___ Kitchen help

___ Tuck

___ Canoeing

___ Archery

___ Cleaner

___ Night watch

___ Talent Show/Cabin

clean up

___ other _____

Nurse: RN ___ RNA ___

Cert. #: _____

Insurance: Yes ___ No ___

1. I am presently involved in ministry to children/youth as follows:

2. Previous Camp Experience:

3. I want to be a volunteer at Silver Birches Kids' Camp because

- 4. Name of church I regularly attend _____
- 5. I have been a Christian for _____ years.
- 6. I live a lifestyle that is an appropriate model for children
 Almost Always Half and half Rarely

7. I am aware of and I will attend the **staff orientation meeting at 10:00 am on Monday, July 3.**

Yes No (Explain) _____

If arriving on Sunday night, Anya must be advised ahead, and please pay \$15/head for anyone coming Sunday or staying Friday. # of adults _____, # of campers _____

8. I have physical limitations Yes. No
 (Explain) _____

9. I have my First Aid and/or CPR: Yes. No.

Please provide 2 references not related to you, and not your pastor.

a) Name _____
 Phone #: _____
 Email: _____

b) Name _____
 Phone #: _____
 Email: _____

Release of Information and Declaration of Intent

I hereby give Silver Birches Camp staff permission to contact my references. I understand that SBKC is responsible for the welfare of persons in my care and will prepare myself accordingly. I will co-operate with the planned program, as laid out. It is my whole-hearted desire to serve the children of the camp to the best of my ability. I will provide a Vulnerable Sector Check (18+).

Applicant's signature _____

Date: _____

Now, give the 3 pages of the application to your pastor with *a cup of coffee*.

NOTE: Volunteers can register **their own camp-aged children** at \$50/child off the regular rate.

PASTOR'S RECOMMENDATION

Applicant's Name: _____

Dear Pastor,

The applicant has applied to volunteer at Silver Birches Kids' Camp. Please complete this page (3) and mail or scan all three (3) pages to: silverbircheskidscamp@gmail.com

Living Faith Assembly
PO Box 194 Chaput Hughes
Ontario P0K 1A0

1. How long have you known the applicant? _____
2. How long has the applicant attended the church? _____
3. To my knowledge, he/she is born again? Yes _____ No _____
4. To my knowledge, he/she is filled with the Spirit? Yes _____ No _____
(If no, is the applicant seeking? _____)
5. He/she is presently involved in ministry to the children in the following ways:

6. Can you verify the information written on pages 1-2? _____ Yes _____ No

7. *The applicant submits to authority*

_____ Readily _____ Usually _____ Reluctantly _____ With difficulty _____ Not Sure

8. *The applicant works with supervision*

_____ Readily _____ Usually _____ Reluctantly _____ With difficulty _____ Not Sure

9. *The applicant is ready to counsel and pray with others*

_____ Readily _____ Usually _____ Reluctantly _____ With difficulty _____ Not Sure

10. a) Is there any reason why this applicant might not be able to minister effectively as a Kids' Camp Volunteer?

b) Would you want this person to be your child's coach?

Pastor's Name: _____ Church: _____

Signature: _____ Date: _____

Email: _____

Thank you for taking the time to complete and send this form.