## Volunteer Application



Contact Information		
Name		
Street Address		
City ST ZIP Code		
Home Phone		
Cell Phone		
E-Mail Address		
Availability		
During G.R.O.W. After School Care, which days are you available for volunteer assignments? We need Mondays, Wednesdays, and Fridays 2:30PM-4:30PM.		
Monday	Friday	
Wednesday	Other (please explain)	
Interests		
Knowing this is a volunteer roll that will serve children grades 1-8, in addition to your great attitude and willingness to work with children, tell us why you would be a good fit?		
Special Skills or Qualifica	ations	
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.		

Previous Volunteer I	xperience		
Summarize your previous volunteer experience.			
Person to Notify in C	ase of Emergency		
Name	200 of Emergency		
Street Address			
City ST ZIP Code			
Home Phone			
Work Phone			
E-Mail Address			

## **Agreement and Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. You also affirm you are physically fit to perform duties such as hiking, gym games, and can lift 25lbs.

Name (printed)	
Signature	
Date	
If under 18 Guardian Name (printed)	
Signature	
Date	

## **Our Policy**

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. If you are 18 & over you will have to complete a background check. An email will be sent with a link to fill out.

## **Allergies & Medications**

Please use the space provided to list any food or medical allergies and any medications we need to be aware of while you serve at Fair Haven Camps.

Thank you for completing this application form and for your interest in volunteering with us. Please scan and email this application to <a href="mailto:Register@fairhavencamps.org">Register@fairhavencamps.org</a>. If you have any questions please call 207-722-3456.

Thank You.

Tristan Starbird
Executive Director

Fair Haven Camps