

# Application for Kids Camp Staff

This application form must be completed fully by all applications for any position involving the supervision, custody or non-parental participation in any camp activities involving a child or children. It is being used to help the Oregon Pacific District's Kids Camp provide a safe and secure environment for the children who participate in our camp program.

Check all the positions you wish to apply for: (If more than one, number by choice)

Counselor \_\_\_\_\_ Music\* \_\_\_\_\_ Nurse \_\_\_\_\_ Archery \_\_\_\_\_ Drama\* \_\_\_\_\_ Crafts \_\_\_\_\_  
Recreation \_\_\_\_\_ Bible Study \* \_\_\_\_\_ Activity Assistant\* \_\_\_\_\_ Photographer\* \_\_\_\_\_  
Wherever needed \_\_\_\_\_

*Please note: \*These positions will require additional duties and assignments.*

*Every attempt will be made to place you in your first choice.*

*However, the keyword at camp is flexibility.*

Camp(s) that you are available to work (Circle one or more)

Primary Camp: 1 2 Jr. Camp: A B C

Nazarene Church you are representing: \_\_\_\_\_

Your local church contact person: \_\_\_\_\_ Their Phone# \_\_\_\_\_

Circle T-shirt size (All Camp Staff receive one free T-shirt): Small Med. Large XL XXL  
34/36 38/40 42/44 46-48 50-52

## Personal Information

Name \_\_\_\_\_ Other names ever used: \_\_\_\_\_

Check approx. age: \_\_\_\_\_ 17-18 \_\_\_\_\_ 19-20 \_\_\_\_\_ 20-21 \_\_\_\_\_ over 21 \_\_\_\_\_ Female \_\_\_\_\_ Male

St. Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ How long at this address? \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work : (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Social Security # \_\_\_\_\_

E-mail address \_\_\_\_\_

Driver's License # \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Have you ever been charged with or convicted of any misdemeanor (except minor traffic or parking violations)?

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please explain and include dates, jurisdictions, and final adjudication.

Have you ever been charged with or convicted of any felony in any state or Jurisdiction?

\_\_\_\_\_ Yes \_\_\_\_\_ No If Yes, please explain and include dates, jurisdictions and final adjudication.

Have you ever been charged with or convicted of a crime against a person and/or child?

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please explain and include dates, jurisdictions and final adjudication.

Have you ever been terminated from or asked to leave any position (salaried or volunteer) involving working with, or supervision of, Children? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please explain and include sufficient detail that we can, with your permission, contact individuals who may have knowledge of circumstances:

My past experiences working with children in any capacity include the following: \_\_\_\_\_

Personal or character references (please list at least 3):

| Name     | Address | Phone# |
|----------|---------|--------|
| 1. _____ | _____   | _____  |
| 2. _____ | _____   | _____  |
| 3. _____ | _____   | _____  |

By signing this application I give the Oregon Pacific District Kids Camp, through its agents, permission to contact any and all persons including any public or private social agency, employees and any participants in children or youth activities from my past associations in order to verify or clarify my statements. My signature further constitutes my permission for the Oregon Pacific District Kids Camp's agents to read, photocopy or retain any police records, public or private social service agency records, or past school or employment records.

I release the Oregon Pacific District Kids Camp from any and all liability in claims which may be made due to actions taken because of inquiries made and decisions rendered as my suitability for a position in any child or youth activity. Oregon Pacific District Kids Camp has the absolute and final right to make this decision.



In the event that I am selected to be a staff member and I am unable to fulfill this commitment I will contact the Director of the Camp that I am scheduled to work. I will do this as soon as possible to allow adequate time to find a replacement. I also understand that I must attend a camp staff meeting AT CAMP KELLOGG the night before the camp begins.

Please initial  
← here  
that you have  
read this  
paragraph

**Failure to attend may result in not being a part of Kids Camp 2006**

I also give The Oregon Pacific District permission to do a Police Department Background Check on me if they so choose.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

***Pastor's Recommendation***

I have read the this person's application to be a counselor/staff person at one of the Oregon Pacific Districts Kids Camps. I recommend this person for the job(s) for which they are applying. This person will pose no problems for the camp and/or staff. I know this applicant and feel they have an up-to-date relationship with the Lord. They also have a love to see children brought to the Lord.

\_\_\_\_\_  
Signature of Pastor

SEND THIS FORM WITH THE CAMP REGISTRATIONS or mail to address below. The Camp Director of the Kids Camp for which you applied will contact you no later than 3 weeks before camp.

**Glen Gertson                      PO Box 456                      Florence, OR. 97439**

***There is no guarantee of placement in any of the positions available.  
The keyword at Kids Camp is flexibility.***