

MOORECROFT CAMP VOLUNTEER APPLICATION FORM

NAME: _____

ADDRESS _____

Postal Code _____

TEL: Day _____

Night _____

Fax: _____

Email address: _____

Birthday _____

Home Church: _____

Emergency Contact: _____

Please check the area(s) within Moorecroft to which you would like to be assigned.

- | | | | | |
|---|---------------------------------------|---|---|---|
| <input type="checkbox"/> Office | <input type="checkbox"/> Kitchen | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Committees | <input type="checkbox"/> Board of Directors |
| <input type="checkbox"/> Publicity | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Outdoor Maint. | <input type="checkbox"/> Church Liaison | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Games (summer) | <input type="checkbox"/> Cabin Leader | <input type="checkbox"/> Summer Volunteer | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

When are you available for volunteer service?

Days: _____

Times: _____

Flexible: _____

Do you hold a valid driver's license? _____

Class? _____

Note class other than 5 _____

Skills which you possess that would benefit your volunteer service with Moorecroft:

- | | | | | |
|------------------------------------|-----------------------------------|------------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> carpentry | <input type="checkbox"/> computer | <input type="checkbox"/> painting | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> plumbing | <input type="checkbox"/> cooking | <input type="checkbox"/> gardening | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> electric | <input type="checkbox"/> sewing | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

Experience, Training and Interests:

I have received a copy of the responsibilities of a Moorecroft Volunteer and agree to perform my services according to these guidelines. I also am willing to have a Criminal Record Check done if required for my volunteer service.

Date: _____

Applicant's Signature: _____

Return to Moorecroft Camp at 1563 Stewart Road, Nanoose Bay, BC, V9P 9E7 or Fax: 250-468-1867

Physical and Mental Health:

Please note any health problems or restrictions that may influence your volunteer service:

References 3 required: *Include names, phone number and/or mailing address. Also Email address and fax number if applicable. At least one reference should be from a former/current employer, volunteer position or minister.*

1

2

3

Youth and Young Adult, please give contact information for a parent/guardian.

OFFICE USE ONLY

Dates of contacts/interviews/revisions to this information:

Interview Offered	Yes	No	Date	
References				
Requested	Date			
Received	Date			
Position Offered	Yes	No	Date	
