



Teaching from Psalm 139,
we will help kids discover that they've been created
wonderfully and for a purpose!

March Break Camp 2010 Volunteer Form

Mar. 15th-19th 9:00 – 3:30 at Pauline Johnson High School

Staff will be required to be at camp by 8:30 for devotions and stay till 4
for each day's debrief.

Name: _____

Address: _____

City: _____ Postal Code: _____

Phone #: _____ Email: _____

Church you represent: _____

Age Category as of March 2010 (please check one): under 18 ; over 18

Staff under 18 will be required to have parental consent section signed.

Police checks will be required for staff over 18 (new within 1 year)

Here's where I want to help:

- | | | |
|---|---|--|
| <input type="checkbox"/> Counsellors (all day; we need 1 adult and 1 youth per group) | <input type="checkbox"/> Security | <input type="checkbox"/> Decorating & setup |
| <input type="checkbox"/> Games & activities | <input type="checkbox"/> Food team | <input type="checkbox"/> Daily Bus monitor |
| <input type="checkbox"/> Workshop leader/assistant | <input type="checkbox"/> Tie-Dye & t-shirts | <input type="checkbox"/> Clean up crew – <i>all volunteers will be a part of cleanup on Friday</i> |
| | <input type="checkbox"/> Drama/puppet team | |
| | <input type="checkbox"/> Music | |
| | <input type="checkbox"/> Fundraising | |

Days available (please check): Mon Tuesday Wednesday Thursday Friday

Notable Notes:

1. During camp, personal use of cell phones will be unacceptable, unless there is an emergency. Please ensure that cell phones are turned off.
2. For the safety and security of all campers and staff, there will be *no videotaping or photo taking allowed while campers are present*. Only those approved by camp leadership will be taking video and pictures.
3. **Police checks will be required for all staff over the age of 18.** Please ask Linda for the necessary letter and forms you'll need to make the request at the applicable police station.
4. There will be a mandatory pre-camp meeting for all staff. *You will need to be there!* Location TBA.

Please sign to acknowledge that you have read and understood the above notes.

Signed: _____ Dated: _____

Please complete reverse side



Staff, less than 18 years of age:

Name of Parents: _____ Ph. # _____

Are your parents supportive of your program involvement? Yes No

If no, please explain:

Signature of Parent/Guardian _____ Date _____

Printed Name of Parent/Guardian _____

If this is your first year working in our camp:

Please provide the names of two individuals, excluding relatives, who could provide a reference for you.

1. Name of reference _____ Contact Ph.# _____

Nature of relationship _____ How long have you known each other _____

2. Name of reference _____ Contact Ph.# _____

Nature of relationship _____ How long have you known each other _____

I hereby give March Break Camp/Jacob's Well Ministries Inc. permission to contact persons named as references to confirm my suitability for working with children and youth.

Signed: _____ Dated: _____

Contact for more info, or return completed form to Linda Ellis (519-442-0655; dlsellis@yahoo.ca)
or to Grand Valley Christian Centre, 379 Golf Road, Brantford, ON.