



# Junior Counselor & Day Camp Volunteer Form

## Camp Fun & Faith 2018

Dear Junior Counselors and Volunteers,

It's time to start thinking about how you will spend your summer, and we would love to have you be part of Camp Fun & Faith's team. We are now accepting volunteers for Day Camp and junior counselors for Overnight Camp to assist the full-time camp counselors this summer. Check your calendar and sign up soon; volunteer positions are limited! **Volunteer applications are due May 1, 2018. We cannot guarantee a T-shirt if applications are submitted after the deadline.**

Thank you and God bless!

Margaret and Monica, Camp Directors

Questions? Email [camp@prosancity.org](mailto:camp@prosancity.org) or call 402-289-1938

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### Day Camp

June 11-15 *A.M.* and/or *P.M.* session (campers are 3 1/2 - 10 years)

### Overnight Camp

June 18-22 Jr. High Week (6<sup>th</sup> grade graduate to 8<sup>th</sup> grade graduate campers)

June 25-29 Grade School Week (2<sup>nd</sup> grade graduate to 7<sup>th</sup> grade graduate campers)

July 9-13 Grade School Week (2<sup>nd</sup> grade graduate to 7<sup>th</sup> grade graduate campers)

July 16-20 Grade School Week (2<sup>nd</sup> grade graduate to 7<sup>th</sup> grade graduate campers)

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### Important Camp Dates – Mark your calendar!

Saturday, April 28, 2018: Camp Fundraiser Dinner

Friday, June 8, 1pm-4pm: **Day Camp Volunteer Training (Mandatory for *first-time* Day Camp Volunteers)**

### Junior Counselor Overnight Volunteer - Camp Fun & Faith 2018

**Must be 16 years old & 10<sup>th</sup> grade graduate**

Junior Counselors arrive at Camp Monday morning at 9:30 a.m. and are done on Friday afternoon by 3:00 p.m. after clean-up. They work with the full-time counselors, leading a small group of 10-12 girls and participating in all camp activities. Their witness of joy, faith, goodness, and modesty help give camp its wonderful spirit! This is a great volunteer opportunity; sign up soon because spaces are limited!

### Day Camp Volunteers

**Must be at least 11 years old & 5<sup>th</sup> grade graduate**

**AM DAY CAMP – 8:30 a.m. to 12:30 p.m. • PM DAY CAMP – 12:30 p.m. to 4:30 p.m.**

(If you have both campers and volunteers coming for the same session, please follow the *camper* drop-off/pick-up times for both campers and volunteers.)

Day Camp volunteers are invited to a sleepover at Camp on Thursday night of Day Camp; the evening includes talent show, leadership building, and lots of fun!

**Day Camp is a great first-time leadership opportunity working with children!**

Friday, June 8: **Day Camp Volunteer Training, 1pm-4pm (Mandatory for *first-time* Day Camp Volunteers)**

**Application 2018 CAMP FUN & FAITH  
Junior Counselors & Day Camp Volunteers**

Please **CLEARLY** print or type the entire application: Send the complete application to:  
Camp Fun & Faith, 11002 N. 204th St. Elkhorn, NE 68022

Please answer **ALL** questions - even if you have served as a camp volunteer in the past.

Name: \_\_\_\_\_ Age at application: \_\_\_\_\_ DOB: \_\_\_\_\_

Date of application: \_\_\_\_\_ Interested in working more than one week? Yes No

Desired Camp Week: 1st Choice \_\_\_\_\_ 2nd Choice \_\_\_\_\_

If Day Camp, please circle if you want: AM PM BOTH

E-Mail for confirmation to be sent \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Name of Parish/Church \_\_\_\_\_

Name of School \_\_\_\_\_ City \_\_\_\_\_ Grade completed (May 2018): \_\_\_\_\_

Name of College/University \_\_\_\_\_ City \_\_\_\_\_ Level completed (May 2018): \_\_\_\_\_

**Optional credentials or certificates:** *Please include photo copy, list date received, and date expires*

First Aid/CPR \_\_\_\_\_ Water Safety Instructor \_\_\_\_\_ Other \_\_\_\_\_

**T-Shirt Size (adult) S M L XL**

**Character and Abilities**

What excites you most about being at a Catholic girls' camp? \_\_\_\_\_

Describe any previous camp experience or experience working with children. \_\_\_\_\_

Describe one way your faith has made an impact in your life recently. \_\_\_\_\_

What special skills, talents, knowledge, or faith experiences can you offer to share with the girls at camp? \_\_\_\_\_

List 3 strengths you bring to camp and three weaknesses you can ask Jesus to overcome. \_\_\_\_\_

**For those NEW to Camp Fun & Faith**

**REFERENCES:** Two letters of reference are required if you are at least 16 years old and have never attended Camp Fun & Faith as a volunteer. *One must be "professional" (e.g. a teacher, coach, employer, etc.) and one can be personal. Have the two references send the letters to*

**camp@prosantity.org or Camp Fun & Faith 11002 N. 204th St. Elkhorn, NE 68022.**

***Applications are not complete without references.***

Your signature \_\_\_\_\_ Date \_\_\_\_\_

If you are under 19:

Parent signature \_\_\_\_\_ Date \_\_\_\_\_

# Camp Fun & Faith 2018 Health Form

For office use:  
 Form reviewed  
Initials \_\_\_\_\_

**Circle Session!**

Day Camp: June 11-15 ♦ Morning Session 9am-12pm ♦ Afternoon Session 1-4pm

Overnight Camp: ♦ June 18-22 (Jr. High) ♦ June 25-29 ♦ July 9-13 ♦ July 16-20

## Junior Counselor/Volunteer Information:

FIRST NAME \_\_\_\_\_ LAST \_\_\_\_\_

Birth Date: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Parent or Guardian Name(s): \_\_\_\_\_

Home Address:  (Please check this box if you have moved within the past year)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_ Emergency \_\_\_\_\_ E-MAIL \_\_\_\_\_

Doctor's Name and Phone: \_\_\_\_\_ / \_\_\_\_\_

Accidental/Medical Insurance Information: Insurer's Name \_\_\_\_\_

Policy # \_\_\_\_\_ Dates of Coverage \_\_\_\_\_

List allergies to foods, drugs, outdoors, etc. \_\_\_\_\_

List any diagnoses, medical history, or problems that might prevent full participation in camp activities or would be helpful for the Camp directors to know (e.g. Asthma, sleepwalking, anxiety, panic attacks, etc.)

Please list all child's medicines including their dosage and directions for administration.

Anything else we should know? \_\_\_\_\_

I authorize Camp Fun & Faith to give my child age-appropriate doses of the following, if needed:  
(cross out any you do not authorize)

Tylenol/acetaminophen      Advil/ibuprofen      Calamine lotion      Benadryl      Tums      Aloe Vera

- Photographs of your child may be taken during camp and used in Camp Fun & Faith and Pro Sanctity publications, if you have any questions or concerns regarding this, contact camp directors at [camp@prosantcity.org](mailto:camp@prosantcity.org) or 402-289-1938.
- **PLEASE notify us if your child is exposed to any communicable disease during the three weeks prior to camp attendance!**
- **FIELD TRIPS:** Each Friday of all camp weeks, we visit Elkhorn Manor. During the weeks of overnight camp we go on additional field trips. These trips usually are to Fremont Splash Station, but this location sometimes changes due to weather or other unforeseen circumstances. High school week includes multiple field trips which differ from those of the other camp weeks. Your child will be transported either on the bus driven by a certified driver or in a vehicle driven by an Apostolic Oblate or by an adult designated by the Apostolic Oblates.

**Parent's authorization for children under 19 years of age:** In placing my daughter in your care, I agree to all terms, regulations and activities of Camp Fun & Faith Overnight or Day Camp. I agree to bear the burden of any expense arising from accident or illness, which is not cared for by the camp insurance policy, while my daughter is under the authorities of the camp. I agree to hold harmless Camp Fun & Faith and the Apostolic Oblates for any accidental injury that may happen to my daughter while at Camp Fun & Faith. This health history is correct to the best of my knowledge and the person described herein has permission to engage in all prescribed camp activities as noted by me. In the event that I cannot be reached in emergency, I hereby give permission to the physician selected by the Camp Director to hospitalize, secure proper treatment and to order injection, anesthesia or surgery for my child as named above. We agree to be responsible for all bills over and above those costs covered by camp insurance. I authorize the nurse/director/counselor/or designated person at Camp Fun & Faith to administer my daughter's medications listed above.

We know of and agree that our child may take the field trips listed above and give permission for them to be transported to and from said field trips.

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please print name: \_\_\_\_\_

Send the completed application to: Camp Fun & Faith, 11002 N. 204th St. Elkhorn, NE 68022

**PLEASE NOTE: Application is not processed until complete.** A complete application includes:

- Signed Application
- Signed Health Form