

#### Kitsap Forest Adventure Camp play \* explore \* create

## 2023 Volunteer Staff Application

Name	Birth Date	Age _	🗖 M	I 🗖 F
Street				
Phone (cell)	Alternate Phone			
Email				
Current school/major (if college)				
Grade/year entering in fall (circle): High School: FR	SO JR SR College: FR SO JR SR	Other:		
CPR Certified: 🗖 yes 🗖 no date of certification	۱			
Emergency Contact	Cell Phone			
Previous camp experience either as a camper or sta				
Other experience relating to children:				
Specialty Skills: 🗖 Arts & Crafts 🗇 Drama 🗇 Mus		e/Wildlife	Storyte	lling
State why you believe you would be an asset to can	np. Elaborate on your special t	alents, inte	rests, etc?	
Please list your experience with the Kitsap Forest T	heater and the Mountaineers I	Players:		
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#### References

Please list 3 references with phone & email (former employer, babysitting family, school personnel, etc.)

1.	Name		_ Relationship		
	Phone:	Email:			
	Notes:				
2.	Name		_ Relationship		
	Phone:	Email:			
	Notes:				
3.	Name		_ Relationship		
	Phone:	Email:			
	Notes:				
	Authorization for Treatment if Under 18				
	Medical Insurance Co		_ ID#	Group	

I hereby give permission to the First Aid or medical personnel selected by the camp director to provide treatment according to their assessment of my child's needs. In the event that I cannot be reached in an emergency, I hereby give permission for my child, as named above, to be transported by ambulance or aid car to an emergency center for treatment. I further consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary or advisable by a physician to safeguard my child's health. I agree that I will be responsible for any and all charges incurred in obtaining prompt medical attention.

Parent/Guardian Signature:		_ Date:
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Available: 🗖 Week 1 (July 10 <sup>th</sup> - 14 <sup>th</sup> ) 📑 Week 2 (July 17 <sup>th</sup> - 21 <sup>st</sup> )	*Both Weeks			
*preference given to volunteers who are available for both weeks.				
T-SHIRT SIZE: Mens style: S S M D L D XL Ladies style:	: 🗆 S 🗖 M 🗖 L 🗖 XL			
Please sign that all of the above is truthful and that I am willing to commit my time/energy to camp				
Name:	_ Date:			

Parent/Guardian signature if under 18: \_\_\_\_

Please return application to adventure@ForestTheater.com ASAP