

## Special Friends Camp Volunteering

### Job Responsibilities

#### Volunteer Counselor (ages 15 and up)



Counselor/Buddies assist an individual special needs camper, or work together with one or two other counselors with a small group of campers.

In your role as a “Buddy”, you will:

- Keep campers safe

- Escort campers through activities (including pool time, so bring your swimsuit!)

- Communicate with camper(s) and help them to feel comfortable at camp

- Assist campers as needed in the restroom (only volunteers age 18 or older will be asked to help in this way if needed, and only with a camper of the same gender. Training will be provided prior to camper’s arrival).

- Communicate with parents when they pick their camper up each day

- Attend staff meetings and training sessions

- Participate in fellowship activities with other staff members in the evenings (for those staying overnight)

#### Support Staff (ages 14 and up)

This is a job for people who are not interested or old enough to be a counselor, but still want to be a part of the program. Support staff provide a vital function, serving in the following ways:

- Clean cabins

- Set up and clean up before and after meals

- Help with supplies and other needs at mini golf & other activities

- Go for walks with campers in small groups

- Assist leadership

- Help with worship time

- Participate or help with skits for worship time

- General grounds clean up

- Run craft and activity stations which can include but are not limited to:

  - Crafts

  - Story time

  - Face painting

  - Music

  - Other assorted game or activities

## Housing

Staff members and volunteers who need housing will be housed in cabins at Chinook Village, or in other staff houses on the camp grounds. All housing assignments will be made by the Special Friends Camp Director and will be based on the needs of the camp program.

Some of the facilities are very rustic, and all will require you to bring your own bedding or sleeping bag, pillow, towels, and other toiletry items.

If coming as a group, please understand that you are likely to have other staff and volunteers in your cabin who are not with your group. Everyone is part of the same team, and there is a lot of opportunity for fellowship together.

Housing assignments will mostly be made by gender, so families coming together will not be able to be housed all together, but will be divided up with males in the “Boys Cabins” and females in the “Girls Cabins”.

## Volunteer Groups

We love to have groups volunteer together for Special Friends Camp! This is an incredible missions opportunity, and a great time for your group members to have a unique bonding experience working together in this environment.

If you have some specific goals or ideas of things you want your group members to experience or to be involved in after the campers go home for the day, please let us know. Laurie Fertello, our Special Friends Camp Director, will be happy to talk with you about opportunities and meeting your group’s specific needs.

Group members are welcome to participate in any and all fellowship activities for Special Friends staff and volunteers during the week, including Special Friends Overnight Camp activities. This can be a fun fellowship and bonding time for the whole group.



## Special Friends Volunteer Application and Screening Process

Come develop your leadership potential while serving with other volunteers and staff. This volunteer opportunity is for ages 15 and up.

### 2017 Dates

These dates include the training days at the beginning of the week

Day Camp #1	June 25 - 30
Day Camp #2	July 2 - 7
Day Camp #3	July 9 - 14
Day Camp #4	July 16 - 21
Day Camp #5	July 23 - 28
Day Camp #6	August 6 - 11

A completed application for all Special Friends Program volunteers is a requirement of Warm Beach Camp.

Screening is mandatory. A criminal history background check through the Washington State Patrol or a national vendor, which includes a sex offender registry, will be conducted for all volunteers. The screening process is conducted through the Warm Beach Camp Volunteer Department. Once clearance is approved, it is valid only for a one-year period of time.

All volunteers must complete the Volunteer Application Form, which includes:

1. Volunteer Data: contact information, and other pertinent information
2. References: choose four references, two that we may contact and two that are willing/able to fill out the reference forms provided – give these forms to appropriate individuals (ADULT references: personal reference and school/church/employer reference) requesting they complete and return the forms directly to Warm Beach Camp prior to volunteering.

Upon arrival of your application, you will be contacted and given further information.

**If you would like more information or have any questions regarding the process, please contact the Volunteer Department at 360-312-3417 or email at [jwilson@warmbeach.com](mailto:jwilson@warmbeach.com).**

### Age Requirements

- Youth age 14 are eligible to volunteer for certain positions if accompanied by parent/adult chaperone
- Youth age 15 and up are eligible to volunteer as counselors and other specified positions
- Youth groups need to provide a minimum of one adult chaperone for every 10 youth
- Adults are defined as 18 years of age or older



Volunteer Application Form

Thank you for your interest in volunteering at Warm Beach Camp (WBC). Please print legibly and complete this application and Background Investigation Form, and return to Warm Beach Camp, Volunteer Department. The two references forms included will also need to be completed and returned to Warm Beach Camp, Volunteer Department as noted below.

Volunteer Data

Name (last, first, middle): \_\_\_\_\_

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

Birthdate (month/day/year): \_\_\_\_\_ Age: \_\_\_\_\_ Male: \_\_\_ Female: \_\_\_

Associated with a group? Y/N: \_\_\_ Group Name: \_\_\_\_\_

In Case of Emergency, notify: Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

What week(s) would you like to volunteer? \_\_\_\_\_

References

Give the two included reference forms to the appropriate individuals and ask them to complete and send them to Warm Beach Camp. Also, list below two ADDITIONAL adult references that we may contact.

1.) Requested to complete a reference from: \_\_\_\_\_

Name

Phone #

2.) Requested to complete a reference from: \_\_\_\_\_

Name

Phone #

3.) Additional reference: \_\_\_\_\_

Name

Phone #

4.) Additional reference: \_\_\_\_\_

Name

Phone #

I hereby authorize Warm Beach Christian Camps and Conference Center to contact any references listed herein to verify all information provided, and to obtain any and all information related to my character and past work performance. I further hereby release all references from any liability for information provided in good faith.

I give my permission to use my likeness, name, voice, or words in either television, radio, film, newspaper, magazines or other media, or in any form for the purpose of advertising or communicating the purposes and activities of Warm Beach Camp.

Signature of Applicant

Date

more on back



Applicant Disclosure and Release of Liability

I understand that, as a Volunteer for Warm Beach Christian Camps and Conference Center (Warm Beach Camp), I will be required to abide by all the same company policies, standards, and regulations, as declared from time to time, as is a paid employee.

I understand that this is an application for Volunteer Status, and that no contract or remuneration is implied or sought.

Pursuant to RCW 9A.73.085, I certify under penalty of perjury under the laws of the State of Washington that I have never been convicted of any crimes against persons as defined in Section 1 of Chapter 486, laws of 1987, and listed as follows:

Aggravated murder, first or second degree murder, first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree rape; first, second, or third degree statutory rape; first or second degree robbery; first degree arson; first degree burglary; first, second, or third degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple assault; sexual exploitation of minors; first or second degree criminal mistreatment.

**Release/Participation:** I am the participant or the parent/guardian of the participant. I agree or give permission for my child to participate in Warm Beach Camp activities including transportation in the role of volunteer staff. These may include field games, swimming, BB guns, archery, canoeing, climbing tower, high ropes course, and horseback riding. While Warm Beach Camp will provide for adequate and reasonable staff training and participant safety, I understand that accidents can sometimes happen. I am not relying upon Warm Beach Camp to list all possible risks. Therefore, in exchange for Warm Beach Camp allowing me or my child to volunteer, I understand and expressly acknowledge that I release Warm Beach Camp, its employees, board of directors, volunteers, or guests from all liability for any injury, loss or damage connected in any way whatsoever to participation in Warm Beach Camp activities whether on or off Warm Beach Camp’s premises and including transportation. I understand that this release includes any claims based on negligence, action or inaction of Warm Beach Camp, its employees, board of directors, volunteers, or guests.

**Medical Treatment:** In the event of an emergency, I give permission for the Warm Beach Camp staff or camp nurse to follow the physician’s standing orders for care and treatment of me or my child. I give permission to the physician selected by Warm Beach Camp to provide emergency medical treatment for me or my child and to transport them to an emergency center for treatment. I understand that this emergency care may require the physician to hospitalize, secure proper treatment for, and to order injections, anesthesia, or surgery for the participant named on this form. I understand that every effort will be made to notify the parent or guardian of the participant when medical attention is required at a hospital or clinic.

**Self-Medication:** I request that the person named below be permitted to carry medication on his/her person and/or keep them securely stored as I consider him/her responsible. He/she has been instructed in and understands the purpose and appropriate method and frequency of use. I understand, that in making this request, the Warm Beach Camp nurse will not be administering this medication to me or my child and is not responsible for loss, theft or misuse of the above named medication.

**Insurance:** I understand that Warm Beach Camp only provides Washington State Labor and Industries Worker’s Compensation Insurance for claims that occurred as a direct result of a volunteer’s service. Claims resulting from personal illness and/or personal injuries occurring during off hours would be the responsibility of private personal insurance not Warm Beach Camp.

I hereby affirm and acknowledge, by signing immediately below, that all of the information provided and all of my answers to the foregoing questions are true and complete, and that any misrepresentation or omission may be grounds for rejection or dismissal of said Volunteer status.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent/Guardian if under 18 years old (required)

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**Warm Beach Camp and Conference Center**  
**Volunteer Department**  
20800 Marine Drive, Stanwood, WA 98292  
Phone or Fax 360-312-3417

**BACKGROUND INVESTIGATION CONSENT**

I, \_\_\_\_\_ (applicant complete name), hereby authorize **Warm Beach Christian Camps and Conference Center** and/or its agents to make an independent investigation of my background, references, character, past employment, education, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information, which may be material to my qualifications as a volunteer or for employment now, and if applicable, during the tenure of my volunteering or employment with the camp.

I release the camp and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims, or lawsuits in regards to the information obtained from any and all of the above referenced sources used.

This authorization shall continue to be effective until revoked by me. A photocopy or facsimile copy of this consent shall be as effective as the original. The following is my true and complete legal name, and all information provided is true and correct to the best of my knowledge.

\_\_\_\_\_  Male  Female  
Full Legal Name (printed)

\_\_\_\_\_  
Other Names Used Maiden name, alias, legal name change, etc

\_\_\_\_\_  
Present street address: How long?

\_\_\_\_\_  
City/State Zip

\_\_\_\_\_  
Former street addresses in past 7 years How long?

\_\_\_\_\_  
City/State Zip

\_\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Signature Date



# Special Friends

## Recommendations for Volunteer Staff

**Return To:**

Warm Beach Camp, Volunteer Dept.  
20800 Marine Drive  
Stanwood, WA 98292  
360-312-3417 (fax)

To be completed by a recent employer, teacher, or mentor  
(adult, non-family member)

**This section to be completed by volunteer applicant:**

Applicant's Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-Mail \_\_\_\_\_

The above named person is applying to volunteer at Warm Beach Camp. The personal information requested below will supplement that provided by personal interview. It is of great importance to us to obtain objective and valid statements from persons who have some personal knowledge of the applicant's ability and characteristics.

The early return of this form will be appreciated as it will expedite the processing of this candidate's application. Any information which you may give us will be regarded as strictly confidential. Please send this form directly to Warm Beach Camp.

- How long have you known the applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_
- What strengths does the applicant have that would be of benefit to this position? \_\_\_\_\_  
\_\_\_\_\_
- What things might be difficult or challenging to the applicant? \_\_\_\_\_  
\_\_\_\_\_
- What are the biggest things you think the applicant may take away from the experience of being a Special Friends Camp Counselor? \_\_\_\_\_  
\_\_\_\_\_
- Please indicate which statement best describes the applicant in relation to each characteristic listed below.

	Most of the Time	Some of the Time	Not Often	Hardly Ever
Able to follow instructions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoing and friendly.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined in personal habits.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well organized.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotionally stable.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to adjust to different situations.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easily offended.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclined to criticize others.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moody.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work without close supervision.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work in a team situation.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average, "3" if average, and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

- |                         |                             |                                    |
|-------------------------|-----------------------------|------------------------------------|
| ___ Positive role model | ___ Sense of humor          | ___ Willingness                    |
| ___ Tact                | ___ Initiative              | ___ Attitude toward authority      |
| ___ Dependability       | ___ Courtesy                | ___ Attitude toward hard work      |
| ___ Judgment            | ___ Initial impression      | ___ Honesty and personal integrity |
| ___ Punctuality         | ___ Ability to make friends |                                    |

7. Can you think of any experience the applicant has that would be of benefit to them as a Special Friends Camp Counselor?

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8. Please check your choice of recommendation:

- |   |  |
|---|--|
| <input type="checkbox"/> I strongly recommend | <input type="checkbox"/> I recommend with some reservation |
| <input type="checkbox"/> I recommend          | <input type="checkbox"/> I do not recommend                |

9. Please give your opinion on this applicant's over all suitability to volunteer in a ministry setting such as Warm Beach Camp.

Your Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Position/Organization \_\_\_\_\_ Phone \_\_\_\_\_

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

Signature \_\_\_\_\_

Thank you for your assistance!

**Return completed form to:**

Warm Beach Camp, Volunteer Department  
20800 Marine Drive  
Stanwood, WA 98292

OR FAX: 360-652-8210





# Special Friends

## Recommendations for Volunteer Staff

**Return To:**

Warm Beach Camp, Volunteer Dept.  
20800 Marine Drive  
Stanwood, WA 98292  
360-312-3417 (fax)

To be completed by an **adult non-family member**

**This section to be completed by volunteer applicant:**

Applicant's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

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

E-Mail \_\_\_\_\_

The above named person is applying to volunteer at Warm Beach Camp. The personal information requested below will supplement that provided by personal interview. It is of great importance to us to obtain objective and valid statements from persons who have some personal knowledge of the applicant's ability and characteristics.

The early return of this form will be appreciated as it will expedite the processing of this candidate's application. Any information which you may give us will be regarded as strictly confidential. Please send this form directly to Warm Beach Camp.

1. How long have you known the applicant ? \_\_\_\_\_ In what capacity? \_\_\_\_\_
2. What was the nature of work/classroom assignments done by the applicant? \_\_\_\_\_  
\_\_\_\_\_
3. What was the attitude of the applicant towards his/her work or class assignments? \_\_\_\_\_  
\_\_\_\_\_
4. Was there willingness to learn? \_\_\_\_\_  
\_\_\_\_\_
5. Please indicate which statement best describes the applicant in relation to each characteristic listed below.

	Most of the Time	Some of the Time	Not Often	Hardly Ever
Able to follow instructions .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoing and friendly .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined in personal habits .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well organized .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotionally stable .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to adjust to different situations.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easily offended .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclined to criticize others.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Moody .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work without close supervision .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Able to work in a team situation .....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Please grade the applicant on the following characteristics and traits. Use "1" to indicate superior, "2" for above average, "3" if average, and "4" if weak in that area. Please evaluate the applicant in relationship to his/her own age group.

- |                             |                                    |                               |
|-----------------------------|------------------------------------|-------------------------------|
| ___ Positive role model     | ___ Sense of humor                 | ___ Willingness               |
| ___ Tact                    | ___ Initiative                     | ___ Attitude toward authority |
| ___ Dependability           | ___ Courtesy                       | ___ Attitude toward hard work |
| ___ Judgment                | ___ Initial impression             | ___ Punctuality               |
| ___ Ability to make friends | ___ Honesty and personal integrity |                               |

7. Please check your choice of recommendation:

- |   |  |
|---|--|
| <input type="checkbox"/> I strongly recommend | <input type="checkbox"/> I recommend with some reservation |
| <input type="checkbox"/> I recommend          | <input type="checkbox"/> I do not recommend                |

8. Please give your opinion on this applicant's over all suitability to volunteer in a ministry setting such as Warm Beach Camp.

Your Name (please print) \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Position/Organization \_\_\_\_\_ Phone \_\_\_\_\_

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

Signature \_\_\_\_\_

Thank you for your assistance!

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