



Special Camps for Special Kids Camp John Marc Returning Volunteer Application

MANAGEMENT OFFICE

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Dallas, TX 75204

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(Weekend)

Instructions: Please save this document to your desktop and then type your answers directly on your computer screen for your convenience, but all signatures must be hand-signed. Then you may fax, mail, or scan and e-mail the completed application. Please answer all questions, clearly indicating not applicable in response to questions where that response is appropriate.

Date of Application _____

Social Security # _____

Name _____
First Middle Last

Driver's License # _____

Date of Birth _____

Current Address _____

Email Address _____

Alt Email Address _____

Phone # (____) _____

Emergency Contact (Name, Phone Number,
Relationship to you) _____

Alt Phone # (____) _____

All Addresses in the past year: _____

Your Physical Conditions: Hay Fever Eczema Asthma Allergies Diabetes
Heart Disease/Defect Other _____

Medications _____

Other Restrictions/Limitations _____

Doctor's Name: _____ Phone # _____

Do you feel you can safely lift 50 pounds? _____

Do you currently use an illegal drug? _____

ACTIVITY AREAS

Weird Science Challenge Course* Fishing Swimming* Archery*

Nature Discovery Sports & Games Cooking Other _____

* - these areas require certification

Current Certifications in any of these areas? _____

List the activity area(s) where you would like to volunteer:

1) _____ 2) _____ 3) _____

Except as noted below, all information in my previous application is correct and current as of the date of this application. This includes any information related to being fired or terminated for cause from any job; suspended or required to withdraw from school; charged with any felony offense, regardless of type; accused of, charged with, or convicted for any crime, including child molestation, any crime endangering a child, involving the use of weapons, violence, arson, or public indecency; charged with a DUI, DWI, or other motor vehicle offense; possession of any controlled substance within the last five years, or for other than a first offense; residing on the same premises as a Registered Sex Offender. If anything changes prior to Camp, I will notify the Executive Director. _____

Release

I understand that the information on this application is submitted for the use and benefit of both Camp John Marc and the user group sponsoring any specific camp session. I consent to either or both Camp John Marc or the user group reviewing this information, checking my references (listed or unlisted), and/or conducting a criminal and other background check. I understand that if my application is not accepted, I may not be given a reason for that decision and that if selected, my position will be unpaid and "at will," and can be terminated at any time by Camp John Marc or the user group.

If my application is accepted, I grant Camp John Marc and the user group permission to use, without compensation, my likeness or my voice in television, film, video, film, print or other media used to promote or publicize Camp John Marc, the user group, or the camp session I attend; provided these materials are distributed without a specific charge to the recipient except for the cost of procuring any mass media materials in which they are incorporated.

I acknowledge that during the camp program(s) that I have applied to attend that certain risks and dangers exist. These include, but are not limited to the hazards of boating, swimming, horseback riding, riflery, archery, sports, ropes or challenge course exercises, climbing structures, wilderness hiking and camping, the presence of wildlife, depending on other people, accident or illness, the forces of nature, extreme temperature, inclement weather, and travel by air, train, boat, automobile, or other conveyance. I also recognize that these risks may also include loss or damage to personal property, physical or psychological damage and/or injury, not excluding fatality due to accidents which may occur, including accidents resulting from vigorous outdoor activities. I further understand that emergency medical treatment may be several hours away in the event of a medical emergency due to the remote location of the facility.

I am not under, and will not be under the influence of any chemical substance (except prescription medicine), including alcohol, while at camp or traveling to or from camp. I understand that my participating in this program is entirely voluntary and that I can elect to participate, decline to participate, or limit or discontinue participating at any time. I have applied for this program and take full responsibility for my decision to participate or not to participate and agree to follow all safety instructions, and I understand Camp John Marc's and its user groups' decisions to allow me to participate as based on information I have given in my health statement.

In consideration of the right to participate in a camp program and the services and food arranged for me by Camp John Marc, the user group sponsoring the camp session I attend, and their respective shareholders, members, directors, officers, employees, agents, volunteers, and/or associates, I have and do hereby assume all the above and similar risks whether or not specifically foreseeable, and will hold all of them harmless from any and all liability, actions, causes of action, debts, claims and demands of every kind and nature whatsoever, whether for bodily injury, property damage or loss or otherwise, which I now have or which may arise from or in connection with participation in any activities arranged for me by Camp John Marc, the user group sponsoring the camp session I attend, and their respective shareholders, members, directors, officers, employees, agents, volunteers, and/or associates, and their heirs, executors and administrators, successors and assigns and for all members of my family, including any minor children of mine accompanying me. I acknowledge and agree that I will not sue Camp John Marc or its user groups or such other related parties, and that if I do, I cannot collect any money for any injury to person or property. To the extent that this agreement may ever be construed so as not to effect a full release or to be otherwise less than fully enforceable, it shall be construed as a full release of Camp John Marc, its user groups and such other related persons from any liability for gross negligence, negligence, or strict or absolute liability. I agree to be liable for attorney and court fees associated with any unsuccessful litigation brought by me against Camp John Marc or such other related parties.

Date

Applicant Signature

Camp John Marc Camp Staff and Volunteer Code of Ethics

1. Staff/volunteers understand and embrace the mission of the Camp and of Camp John Marc and willingly and knowingly accept the concept that the focus and goals of the Camp are directed to the campers.
2. Staff/volunteers will never leave a camper unsupervised.
3. Staff/volunteer will never be alone with campers or a camper, except when assisting with personal hygiene or toileting which is permitted by specific individual Camp policies or in an emergency.
4. Staff/volunteers will not abuse campers including:
 - Physical Abuse strike, spank, shake, slap
 - Verbal Abuse humiliate, degrade, threaten
 - Sexual Abuse including inappropriate touching
 - Mental Abuse hazing, negative manipulation
5. Staff/volunteers will use positive guidance techniques including redirection, anticipation of and elimination of potential problems, positive reinforcement, support and encouragement rather than competition, comparison, criticism, or humiliating discipline techniques.
6. Staff/volunteers must treat with confidence and respect personal information they learned from campers, subject to the policies on reporting abuse and neglect, as referenced elsewhere in this Manual.
7. Staff/volunteers will treat with the utmost respect and confidentiality all patient/camper information that is received during pre-camp or camp briefing sessions. This information is protected health information (PHI) under the Health Insurance Portability and Accountability Act (HIPAA). [PHI definition: Information that is oral or recorded in any form or medium that relates to the past, present or future physical condition of an individual.]
8. Staff/volunteers will treat campers of all ethnic, religious and cultural backgrounds with respect and consideration.
9. Staff/volunteers will portray a positive role model for campers, including but not limited to, maintaining an attitude of respect, loyalty, patience, honesty, courtesy, tact and maturity.
10. Staff/volunteers will not use profanity or discuss adult subject matter in the presence of campers.

11. Staff/volunteers will adhere to the dress code for Camp. T-Shirts with advertisements for beer, alcohol, and tobacco products should not be worn. Likewise, clothing with degrading or offensive language should not be worn. Closed toe shoes must be worn at all times. Clothing should be modest.
12. Staff/volunteers will not use, possess or be under the influence of alcohol or illegal drugs during Camp or while on Camp property.
13. Staff/volunteers are prohibited from having firearms or other weapons while at Camp.
14. Staff/volunteers must be free of health or psychological conditions that might affect the campers' health or camp experience or the volunteer/staff person's own health.
15. Staff/volunteers will comply with the outlined activities and expectations of their defined roles at Camp and all required activities prior to Camp which support their roles.
16. Staff/volunteers are prepared and willing to assist and support campers to meet personal daily needs.
17. Staff/volunteers will accommodate and be sensitive to the developmental differences and abilities of individual campers.
18. Staff/volunteers that do not have a pre-existing relationship with a camper will not fraternize with campers (babysitting, phone calls, private lessons, contact through the Internet, etc.) outside of Camp supervised activities or the Camp setting. Any exception to this policy requires written approval in advance from the sponsoring organization's Camp Volunteer coordinator or Camp Director. Additionally, the sponsoring organization's Camp Volunteer coordinator or Camp Director must be made aware of any pre-existing relationships. Contact with campers outside of the camp setting includes face to face contact as well as correspondence through phone calls, letter, emails, or virtual social networking sites. Any contact with former campers who are 17 years or younger must likewise be approved by the sponsoring organization's Camp Volunteer coordinator or Camp Director. For those campers who turn 18 within 12 months of the date camp took place, contact must also be approved by the sponsoring organization's Camp Volunteer Coordinator or Camp Director. This contact is discouraged, regardless of the camper's age, based on the counselor/camper relationship.

19. If requested by the Camp Director or Volunteer Coordinator, volunteers/staff will provide that person with access to any websites maintained or controlled by the volunteer/staff person, including any personal websites, blogs, and social networking sites.
20. Staff/volunteers will not accept substantial gifts of significant monetary value or money from campers or their families.
21. Staff/volunteers are required by Texas State laws to report any suspected abuse or neglect of a child to the Camp Director so that it may be reported to the authorities (Texas Department of Protective and Regulatory Services and local enforcement agency).
22. Staff/volunteers will not make personal disclosures to campers with an attempt to influence individual beliefs, values, or lifestyles.
23. Staff/volunteers will adhere to the outlined policies, procedures and standards of Camp John Marc.
24. Staff/volunteers must agree to provide all criminal and other background check information requested of them and must meet qualification standards established by the Camp.
25. All employees are encouraged to report on any activity that the employee reasonably believes to constitute fraudulent activity or is in violation of any governmental regulation to the appropriate level of management. All employees have the assurance that these reports will be considered completely confidential and the identity of the reporting employee will not be disclosed under any circumstances. Camp John Marc will not tolerate any retaliation in any form, including harassment or discrimination, against any employee who has raised concerns about possible fraudulent activity. Any reports of retaliation will be thoroughly investigated and any offending employees will be dealt with accordingly.

Staff/volunteers must comply with this Code of Ethics throughout placement with the Camp and affiliation with the sponsoring organization. Compliance with the Code of Ethics is a condition of continued involvement with the Camp. I understand that violation of the following standards will be regarded as engaging in unethical behavior that is grounds for immediate termination of roles and responsibilities.

Signature _____ Date _____

Printed Name _____



Background Verification Release Form

AGENCY INFORMATION

Date	Agency Name
Contact Name	
Agency's Main Phone Number	Agency's Fax Number

APPLICANT INFORMATION:

Applicant Full Name (Last, First, MI)		Maiden or Other Name(s) Used	
Current Address	City	State	Zip Code
If Different, Address Prior 5 Years-City, State			
Social Security Number	Date of Birth	Driver's License Number	State Issued
Position Applied For			
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Race <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		

I hereby authorize VERIFIYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFIYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VeriFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

Applicant's Signature

Date

Applicant's Printed Name

Parent/Guardian's Signature
(if under 18 years of age)