



January 3, 2012

Dear Volunteer,

Welcome to the Rehoboth Camp Ministry Volunteer Application process. As a first time Volunteer attending the Camp Program, you will need to produce a printed copy of this Volunteer Application form, fill it out and mail it to Rehoboth, c/o Linda Rosendal, Executive Assistant.

We look forward to volunteering with you this summer and would like to inform you of some of the things you may have questions about.

Rehoboth has been hosting Camps for persons with disabilities since July 1976 with one week of camp. We now host four weeks of camp during the month of July and work with 200 volunteers like you.

It is the goal of Rehoboth Camp Ministry to offer our Campers a quality week of vacation. You may ask, 'How will I know what to do?'

At the beginning of your camp week, we provide a day (Saturday) of training and encouragement. This 'Team Building Day' has become an important and vital part of our Camp's success. Along with the training you receive, you will spend time getting to know the rest of the Volunteers you will be working with. The Campers will arrive the following afternoon (Sunday). Attending the Team Building Day will equip you to make the camp experience as enjoyable for yourself as it is for your camper.

You will be matched up one-to-one with a Camper by experienced Directors who will guide you and your Camper through the activities scheduled for the week. Some of the activities you and your camper can participate in are: swimming, bowling, horse back riding, sports, games, crafts and Talent Night.

As a first time Camp Volunteer, you are required to download, print, review and sign the Volunteer Application Form, and Volunteer Participation Agreement. You will also need to get a "Criminal Record Check" which can be completed by taking the attached letter to your local Police detachment. The cost of obtaining a Criminal Record Check will be covered by Rehoboth (submit your receipt along with your Volunteer Application form, etc.). If you live in Calgary or Edmonton will need to contact Linda to get further information since the Police Departments in these cities deal with Agencies rather than "individuals". Call Linda at the office 780-968-8483 for more information. **Your application will not be considered complete unless you have completed and sent in all three documents.**

The time you spend this summer with a disabled person will not be forgotten. You are a memory maker in the life of this individual. You can make a huge difference by showing each camper the amazing love of Christ, by sharing a week of your summer volunteering at camp.

We look forward to seeing you.

Sincerely,

A handwritten signature in cursive script that reads "Linda Rosendal".

For the Camp Committee
Linda Rosendal, Executive Assistant
linda.rosendal@rehoboth.ab.ca
(780) 968-8483

Rehoboth Christian Ministries - 3920 - 49 Avenue, Stony Plain, Alberta T7Z 2J7
Phone: 780-963-4044 - Fax: 780-963-3075

www.rehoboth.ab.ca



January 2, 2012

Dear Local Police,

The bearer of this letter is applying to be a Volunteer at our camp this coming summer serving individuals with developmental disabilities. We require this applicant to have a "Police Check" encompassing the vulnerable sector before we can accept him/her as a Volunteer. Trusting this letter is sufficient for the acquisition of this report.

Your cooperation is greatly appreciated concerning this matter. If you have any questions or concerns regarding this or other matters pertaining to our Camp Ministry, you can reach me by calling (780) 968-8483 or e-mail me at: linda.rosendal@rehoboth.ab.ca

Sincerely,

Linda Rosendal

Linda Rosendal
Executive Assistant

Note to Volunteer: Take this letter, along with two pieces of Identification (Driver's Licence, Birth Certificate, Alberta Health Care, Passport or other), when you go to request your "Criminal Record Check".

PS: Calgary & Edmonton residents: please contact Rehoboth before you get your "Police Check".

Rehoboth Christian Ministries - 3920 - 49 Avenue, Stony Plain, Alberta T7Z 2J7
Phone: 780-963-4044 - Fax: 780-963-3075

2012 Volunteer Application Form



Rehoboth
Camp Ministry



“THE GOAL OF CAMP IS TO PROMOTE A WEEK OF GROWTH, SHARING AND CHRISTIAN FELLOWSHIP FOR CAMPERS AND VOLUNTEERS”

Are you willing to work for this goal? _____

SECTION A

(Note: D.O.B. required for one to one match-ups)

Name: _____ D.O.B. _____ Gender: M F
MM/DD/YYYY
 Address: _____ Phone: _____
 City: _____ Province: _____ Postal Code: _____
 Email address: _____ Cell: _____

PLEASE SPECIFY THE CAMP YOU WOULD LIKE TO ATTEND

- ___ **R & R – July 2 - 6** (Age of Camper: 40 +)
- ___ **Adult 1 – July 7 - 13** (Age of Camper: 20 +)
- ___ **Adult 2 – July 14 - 20** (Age of Camper: 20 +)
- ___ **Independent Adult – July 21 - 27** (Age of Camper: 20 – 45)
- ___ **Youth – July 28 – August 3** (Age of Camper: 8 – 20)

of volunteer

Years at camp _____ (including this year)

Position you would like to volunteer for:

SELECT ONE OF THE FOLLOWING:

- Counsellor
- Counsellor in Training
- Other _____

SECTION B – Police Check

*** REHOBOTH CHRISTIAN MINISTRIES REQUESTS A POLICE CHECK ON ALL NEW VOLUNTEERS***

Do you have a criminal conviction that has not been pardoned? Are you currently charged with a criminal offence of any kind? If yes to either question, please state all details including date, nature and exact description of the offence and the outcome.

T-Shirt Size: S M L XL XXL

SECTION C - This information is important.

EMERGENCY INFORMATION – Whom do we notify in case you are involved in an Emergency?

Name: _____ Relationship: _____

Phone Numbers: Home _____ Work _____ Cell _____

Name of Doctor: _____ Phone: _____

Health Care Insurance Number: _____

SECTION D – Physical Care Needs

Dietary Needs: _____

Are You on Medication? Yes _____ No _____ If yes, please list what medication you are on: _____

Allergies: _____

Other medical information we should know: _____

SECTION E - GENERAL INFORMATION

How did you find out about Camp Rehoboth? _____

Have you had any experience with persons who have a disability? _____

What are your expectations for this week, if any? _____

Do you play an instrument? Yes ___ No ___ If “yes” which one(s)? _____

Are you willing to share your musical talents at Camp? Yes ___ No _____

SECTION F - REFERENCES

(new volunteers please fill in the entire form)

Please list **three** references: one being a family member, the other two should know you for at least three years.

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

VOLUNTEER APPLICATION, VOLUNTEER PARTICIPATION AGREEMENT AND POLICE CHECK SHOULD BE IN AS SOON AS POSSIBLE. YOU WILL BE NOTIFIED WHEN YOUR APPLICATION IS APPROVED.

Send to: **REHOBOTH, 3920 – 49 Avenue, Stony Plain, Alberta, T7Z 2J7**

If you have any questions or concerns please feel free to call Linda Rosendal, Executive Assistant, Rehoboth Christian Ministries (780) 968-8483 – linda.rosendal@rehoboth.ab.ca

Signature of Applicant

Date

Signature of Parent/Guardian if Applicant is a Minor

Date