



275 Carefree Lane
Stokesdale, N.C. 27357
336-427-0966
www.campcarefree.org

Volunteer STAFF Application

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WELCOME!

Thank you for your interest in volunteering at Camp Carefree. Camp Carefree was founded in 1986. Since that time, we have provided a free one -week summer camp experience to children who otherwise may not be able to attend camp due to chronic conditions, illnesses or disabilities. We also extend our services to siblings of these kids, as well as kids whose parents suffer from chronic diseases and disabilities. Each week is geared to same or similar conditions allowing the children some independence while still caring for their medical needs. Our main goal is to provide our campers with a traditional summer camp experience without the stigma of being a “sick” or “special needs” child.

Each summer, we accept many volunteers who share their time and experience with our campers and in return, find themselves leaving with a life experience they will never forget. Please read over the staff expectations and give it due consideration. We take our rules very seriously and we ask that you abide by these so that we can provide a safe and fun experience for each of our campers and staff members.

We receive a large number of applications each year , so please get your application in as soon as possible to be considered as a volunteer. You must return your reference sheets and completed medical application with your application. As soon as your application has been processed, we will promptly notify you so you can make your summer plans. If you commit to being a volunteer, it is important that you let us know immediately if, for any reason, you will not be able to attend. Please note that Spina Bifida and Epilepsy weeks tend to be large groups and require one-on-one counselor participation. We would greatly appreciate your participation in these specific weeks.

Camp Carefree can only be possible with the help of volunteers like you. We look forward to another successful year, and we hope that you will choose to become a part of our Camp Carefree Family.

CONTACT INFORMATION:

Camp Carefree Office Phone:		(336) 427-0966
Executive Director:	Lynn Tuttle	(336) 548-2162
Program Directors:	Tony McCallum	(336) 549-8704
	JeNai Davis	(336) 383-8241
Email:		directors@campcarefree.org

RETURN APPLICATIONS - by mail: Camp Carefree
275 Carefree Lane
Stokesdale, NC 27357

or e-mail PDF to
directors@campcarefree.org



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APPLICATION

Certifications:

Certified Lifeguard:	_____ NO _____ YES	If yes, date of issue: _____
First Aid Certification:	_____ NO _____ YES	If yes, date of issue: _____
Water Safety Instructor:	_____ NO _____ YES	If yes, date of issue: _____
ACA Campcraft Course:	_____ NO _____ YES	If yes, date of issue: _____
Registered Nurse:	_____ NO _____ YES	If yes, date of issue: _____
Licensed Practical Nurse:	_____ NO _____ YES	If yes, date of issue: _____

The previous pages are for your information and records. This page (**see front and back**) must be returned to Camp, completed in full, including three references and the medical form.

You pledge:

I have completed this application truthfully to the best of my knowledge and ability. I have read the list of staff expectations and by my signature, I agree to abide by camp policies during the time I am at Camp Carefree. I give permission to Camp Carefree to provide medical care, and to transport me to the nearest medical facility in case of an emergency.

APPLICANT NAME: _____

SIGNATURE: _____

DATE: _____

If you are under 18, a parent or guardian must sign: *This child has permission to leave camp premises with an adult if needed.*

NAME: _____

RELATION TO APPLICANT: _____

SIGNATURE: _____

DATE: _____



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NAME: _____

AGE: _____ BIRTH DATE: _____ GENDER: ___F___M

HIGH SCHOOL NAME: _____

HOME ADDRESS: _____

City: _____ State: _____ Zip: _____

PHONE: _____ Home _____ Cell _____

EMAIL: _____

Tee Shirt Size (Circle ONE): Small Medium Large

Have you worked at Camp Carefree?

_____ YES _____ NO

If so, what years and weeks?

Have you ever been a Camper at
Camp Carefree?

_____ YES _____ NO

If so, what years and weeks?

2019 WEEKS YOU ARE AVAILABLE TO WORK (please rank 1-6 in order of preference):

- _____ Session One: June 16 - 22: SIBLINGS - well children with a chronically ill sibling
_____ Session Two: June 23 - June 29: NEURO* - epilepsy & neurological disorders
_____ Session Three: June 30 - July 6: CANCER - leukemia & other cancers, JRA
_____ Session Four: July 7 - 13: SPINA BIFIDA* - spinal cord disorders & injuries
_____ Session Five: July 14 - 20: KIDS - well children with a chronically ill parent
_____ Session Six: July 21 - July 27: HEMOPHILIA - blood disorders, von Willbrand's & Turner's

**Please note: These weeks involve helping with campers' personal hygiene, meals, mobility, etc.*

Have you ever been accused of improper sexual conduct, child abuse, drug or alcohol abuse, a felony, or any other crime? _____ No _____ Yes (If yes, explain on a separate page)

Will you be bringing a car to camp? _____ No _____ Yes

NOTE: CITs (under 18) may NOT bring cars to camp. Make arrangements to leave by NOON on Saturday.

Staff children attending with you?

If yes, please list names and ages: _____

NOTE: Staff children must abide by the same rules as all other participants of their age group.



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CAMP CAREFREE STAFF EXPECTATIONS

STAFF TIMING: Please arrive at 12:30pm on Sunday. Camp ends at 11 am on Saturday (or whenever the campers are gone and work is completed!)

1. Have fun, but remember that our priority will always be the campers, their safety and happiness.
2. Staff members are expected to stay on camp grounds and always be available when needed.
3. Staff members must be at their assigned area; this includes duty, cabins and activity areas.
4. It is required that staff attend all meals and evening activities on time and through completion. Exceptions are allowed, but only with a Camp Director's permission.
5. **USE OR POSSESSION OF ALCOHOL OR ILLEGAL DRUGS ON CAMP PREMISES, OR BEING UNDER THE INFLUENCE OF ALCOHOL OR DRUGS WHILE ON CAMP PREMISES IS ABSOLUTELY PROHIBITED!!**
Anyone unable to abide by this will be IMMEDIATELY sent home. NO EXCEPTIONS!!
6. **SMOKING IS NOT PERMITTED ANYWHERE ON THE GROUNDS.** This includes e-cigarettes, vapes, e-pens and Juul's.
7. It is advisable that no single counselor and camper ever be out of sight and sound of others. If it is necessary to talk one on one, do so at a reasonable distance so that no misunderstanding can occur.
8. No corporal punishment, or other inappropriate touching of campers is allowed. Should a discipline problem arise, discuss it with a Camp Director.
9. No camper or group of campers should EVER be left alone without supervision.
10. If you are under 18, you are considered a CIT. CIT curfew (inside your cabin) is 11:00 pm.
11. Taking care of camp facilities and equipment is the responsibility of all staff and campers. Staff is expected to set a good example in taking care of camp, including reducing and recycling trash.
12. **IF YOU ARE ACCEPTED AS A VOLUNTEER, YOU MUST ATTEND ORIENTATION June 14-15, 12 noon - 11 am.**
13. Staff children must abide by the same rules as all other participants of their age group.



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RECOMMENDED PACK LIST & DIRECTIONS

CLOTHING:

- 1-2 pair long pants
- 5-6 t-shirts and shorts
- 8-9 pair underwear and socks
- 2 pair tennis or lace-up shoes (NO FLIP-FLOPS, OR SANDALS WITHOUT BACK STRAP)
- 1-2 swimsuits
- 1-2 pajamas
- jacket or sweatshirt
- raincoat or poncho with hood
- Hat or visor

NOTE: Due to the excessive number of unclaimed items at the end of each session and summer, clothing and other personal items **MUST** be labeled with your name in permanent marker.

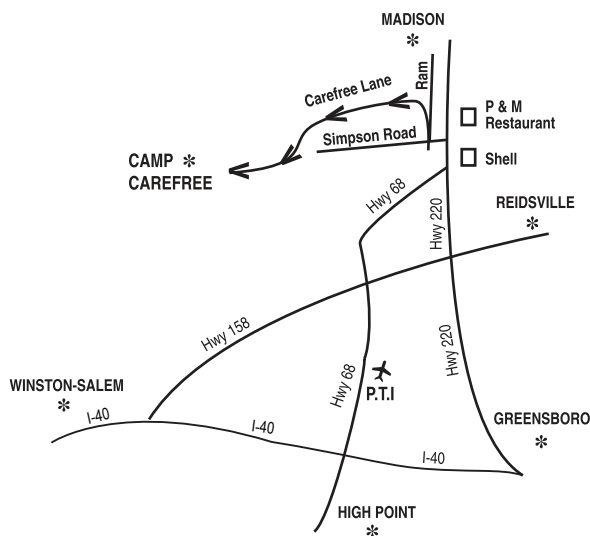
EQUIPMENT:

- set of single sheets or a sleeping bag + pillow
- towel and washcloth
- large towel for pool
- toilet articles in marked plastic bag (including a cup)
- marked bag for dirty laundry
- water bottle
- sunscreen
- insect repellent

OPTIONAL:

- camera
- musical instrument
- playing cards, games, books, etc.
- paper, envelopes, stamps, postcards, pen

HOW TO GET TO CAMP CAREFREE: We are located just off Highway 220 North. The turnoff from 220N is 12.5 miles north of Walmart in Greensboro, and about 1 mile north of the junction of highways 68 and 220. Turn onto Simpson Road (look for signs!), then right on Ram Loop, then left on Carefree Lane. NOTE: the most direct route from I-40 is Highway 68N (not 22 which winds through Greensboro).





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RETURN THIS PAGE TO APPLICANT OR CAMP

PERSONAL REFERENCE (1 of 2)

Applicant Name: _____ How long have you known the applicant? _____

Reference (Your) Name: _____

In what context have you known the applicant? _____

On a scale from 1 to 5, (with five being the best) please rate the applicant based upon your experiences:

- ____ Interactions and relationships with adults
- ____ Interactions and relationships with children
- ____ Handles stress
- ____ Dependability
- ____ Spontaneity and ability to change to fit a situation
- ____ Dedication to the job at hand
- ____ Energy level
- ____ Overall opinion of applicant

Please share with us why you think this applicant will or will not play a positive role at Camp Carefree.

Your Contact Info: ADDRESS: _____ City: _____ State: _____ Zip: _____

PHONE: _____ Home _____ Cell EMAIL: _____

Please return this document to the applicant, or email/mail to Camp Carefree: directors@campcarefree.org



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PERSONAL REFERENCE (2 of 2)

Applicant Name: _____ How long have you known the applicant? _____

Reference (Your) Name: _____

In what context have you known the applicant? _____

On a scale from 1 to 5, (with five being the best) please rate the applicant based upon your experiences:

- ____ Interactions and relationships with adults
- ____ Interactions and relationships with children
- ____ Handles stress
- ____ Dependability
- ____ Spontaneity and ability to change to fit a situation
- ____ Dedication to the job at hand
- ____ Energy level
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BACKGROUND CHECK INFO

For the safety of our campers, as well as our staff, we will be conducting background checks on all applicants who will be 18 at the time of their volunteer position at Camp. Please know that we take your privacy and the importance of the information you are providing us very seriously. This sheet will be kept in a secure location separate from your application, and will be seen only by the Directors. We will strictly adhere to the Privacy Act and not disclose this or any other personal information to any third parties. Please fill out the information completely and correctly so we can process your application as quickly as possible. Upon the return of your background check we will contact you about your acceptance. Feel free to contact us with any questions or concerns.

Thank you, 2019 Camp Program Directors,
Tony McCallum and JeNai Davis

NAME: _____

BIRTH DATE: _____

GENDER: ___F___M

SOCIAL SECURITY NUMBER: _____

HOME ADDRESS: _____

City: _____ State: _____ Zip: _____

PHONE: _____ Home _____ Cell _____

EMAIL: _____



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RETURN THIS PAGE **STAFF MEDICAL FORM**

1. NAME: _____ AGE: _____ BIRTH DATE: _____ GENDER: ____F ____M

2. IN CASE OF EMERGENCY, CAMP SHOULD CONTACT:

NAME: _____ PHONE: _____ Home _____ Cell _____

3. Primary Physician: _____ PHONE: _____

4. Insurance company: _____ Policy number: _____

5. Camp Duty (ie. counselor, nurse, etc.): _____

If RN, nursing license number: # _____ (required by State Board)

6. Camp week(s) attending (circle): 1 2 3 4 5 6

7. Children coming with you & ages (separate forms needed for each): _____

8. For your safety at camp, list any chronic illnesses or conditions: _____

_____ (continue on separate page if needed)

9. List any medications or treatments taken regularly: _____

_____ (continue on separate page if needed)

10. Describe any significant injuries/surgeries in the past two years: _____

_____ (continue on separate page if needed)

11. ALLERGIES: _____

12. Date of last immunizations (MM/YY): Tetanus _____ TB skin test _____ Measles _____ Tdap _____

****NOTE**** If you are exposed to any communicable diseases, particularly chicken pox or measles (which are especially dangerous to children on chemotherapy) during the **month** prior to camp, you **MUST** inform the camp directors before you arrive.