



VOLUNTEER (Light Keeper) APPLICATION

Thank you for your interest in **Camp Lighthouse** and becoming a **Light Keeper**!

Dear Prospective Light Keeper: Thank you in advance for opening your arms and your heart to share the message of hope with those of all abilities and their families. With some training materials and guidance from our team you will be prepared to be the **hands and feet of Jesus** for this 4-day week plus an evening of training the Friday before camp begins. This weekend will provide you with lasting memories and relationships as you provide companionship and friendship to individuals with disabilities and their families, allowing them and their loved ones to *experience unlimited opportunities*.

As a Light Keeper, there will be minimum cost to you - \$20 per day in attendance —however, we are asking you to contribute to HARBOR Unlimited in any amount at your discretion.

To comply with the law, everyone is required to complete the application process each year. If you have volunteered with us in the past, please provide us with one (1) reference. If you are new to volunteering with HARBOR Unlimited, please provide us with two (2) references. In addition, we will conduct a criminal background check in accordance with current standards concerning volunteers. We appreciate your time and compliance as we are committed to providing the best care possible to every CAMP LIGHTHOUSE participant, including you. Once your completed packet has been received, including all references and background check, you will be notified of approval or decline.

All application pages must be completed, with applicant's signature and returned to info@harborunlimited.com or PO Box 209 Jonesburg, MO 63351.

Important Information

Camp Dates: May 25-28, 2024

Camp Location: May 25-27 Strong Tower Ranch 600 Sunshine Lane, Wright City MO 63390

May 28: Adapted Water Skiing, Tubing, Boat Rides, Lake St. Louis- Jefferson Pavilion

Camp Hours: May 25, 26 – 1pm to 7pm (snacks and dinner provided)

May 27 – 9am to 3pm (snacks and lunch provided)

May 28 – 8:30am to 3pm (snacks and lunch provided)

Application Due: May 1, 2024

Send application: info@harborunlimited.com or PO Box 209 Jonesburg, MO 63351

Payment Methods: minimum of \$20/day with application

Send check payable to HARBOR Unlimited or go to www.harborunlimited.com/donate

What do I bring? Approximately 3 weeks before camp, we will be sending you a schedule, meal plan, and list of items to bring each day.

Questions: Delaine Young, Director, 314-956-2665 or dyoung@harborunlimited.com



VOLUNTEER (Light Keeper) INFORMATION

GENERAL INFORMATION

Legal Name (Last, First, Middle):		Preferred Name:	
Street Address:		City, State & Zip:	
Primary Phone:	Cell Phone:	Shirt Size:	
Email Address:			
Date of Birth:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Married: <input type="checkbox"/> Yes <input type="checkbox"/> No	
In case of emergency please contact: (first and last name)		Relationship:	
Address:	City, State & Zip:	Primary Phone:	Cell Phone:
Will any other family member be attending with you? Please give age, birthday, gender, and any other information needed for a safe week.			
Please list previous volunteer/relevant work experience: What type of volunteering, with whom and responsibilities			
Would you like your contact information shared with other attendees by appearing on a mailing list? <input type="checkbox"/> Yes <input type="checkbox"/> No			

MEDICAL HISTORY

Volunteer Name	
Doctor's Name and Phone	
Diagnosed Food Allergy	
Allergies to medications	
Diagnosed Disability	
Seizures	
Heat stresses	
Diabetes	
Asthma	
Chronic illness	
Paralysis	
Heart issues	
Service Animal	
Adapted equipment use	
Challenging behavior	
Specific accommodations	
How can we help you enjoy your camp experience?	

PLEASE IDENTIFY ANY ROLE(S) YOU WILL BE INTERESTED IN EXPERIENCING WHILE AT CAMP LIGHTHOUSE.

No experience necessary. Camp Lighthouse will train/educate you on responsibilities. *Check all that apply to you.*

- Registration** – checking people in when arriving each day; greeting participants with a warm welcome.
- Set-up/Take down** – May 24 5:30-8:30pm; May 25 8am-12pm; May 28 2pm-4pm
- Programming activities** – Setting up activities, running activities, helping transition from one event to another.
- Worship** – Provide music/song during worship time. It runs approximately 20 minutes.
- Enrichment** – Assist or run enrichment time. It runs approximately 20 minutes.
- Logistics** – Set up activities that require equipment; making sure all equipment is where it needs to be at the right time.
- Food** – Preparing and serving food, snacks, and drinks throughout the day.
- Lifeguard** – I am certified as a lifeguard and will be present for all daily lake time activities.
- Family support** – Assist families with their needs and activities for the week.
- Independent Participant support** – Assist individual with their needs and activities for the week.
- Floater** – Do what is needed whenever needed. This means you could possibly do all that you have checked above at any given time.
- Social Media** – Each day making posts with highlights and pictures during camp.

Getting more involved with HARBOR Unlimited:

- Board of Directors** – Possibly interested in becoming a board member in the near future.
- Volunteer** – Assisting with 1 event/month for 3-4 hours (Launch Events) in any of the roles marked above.
- Behind the scenes all year** – Would like to help behind the scenes with Launch Events.
- Behind the scenes all year** – Would like to help behind the scenes with Camp Lighthouse.
- Behind the scenes all year** – Would like to help behind the scenes on social media.
- Behind the scenes all year** – Would like to help and communicate with volunteers.
- Behind the scenes all year** – Would like to help and communicate with participants/families.

PLEASE READ CAREFULLY, INITIAL BEFORE EACH ITEM AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

Covenant:

I will be present at Light Keeper Orientation the day before CAMP LIGHTHOUSE and will notify HARBOR Unlimited as soon as possible in the event I am not able to attend the week I have applied for.

I will show respect for all staff members and families, and I understand that CAMP LIGHTHOUSE Director has the right to dismiss any Light Keeper in the best interest of CAMP LIGHTHOUSE.

- If this is your first time applying, I have given my Social Security number for the release of my criminal records to determine acceptance and have signed the attached Background Authorization Form.
- Permission is given only to HARBOR Unlimited to use photographs (individual or group) and/or multi-media images and recordings in the best interest of HARBOR Unlimited. I understand that photographs/video/images I take at any CAMP LIGHTHOUSE/HARBOR Unlimited function are for my personal use only. Personal internet use of any video/media should be approached with caution with regard to misrepresentation.
- I give my consent that information on this page may be communicated to CAMP LIGHTHOUSE staff only for the purpose of being equipped to provide the best care and assistance possible to everyone at CAMP LIGHTHOUSE.
- I am responsible for my own actions during the designated time period of CAMP LIGHTHOUSE, and that my legal protection under the Volunteer Protection Act covers my actions only when I am following the written policies and procedures of HARBOR Unlimited.
- I will be a constructive member of the Staff, being a Christ-like example in all my actions, contributing in every way to the unity and purpose of the CAMP LIGHTHOUSE.
- I will always have another adult present when I am with CAMP LIGHTHOUSE participant(s) and will never be alone with a participant.
- I realize that tobacco, alcohol, and illegal drugs are NOT ALLOWED.
- I understand that all staff, including myself and all participants, have limited insurance coverage against injury or illness only. Therefore, if my misconduct results in a lawsuit, I understand I will represent myself. I shall indemnify HARBOR Unlimited and its staff and hold them harmless from and against liability or responsibility.
- I release HARBOR Unlimited, its staff, and Light Keeper, and the CAMP LIGHTHOUSE facility from all actions, damages, or personal injuries which may occur to me. I understand in the event of a minor injury I may receive first aid treatment. In the event of an emergency, injury, or illness, emergency medical services and I will decide the best course of action.
- No one will be denied attendance to a Camp Lighthouse because of religion, creed, national origin, sex, age, or disability.
- I authorize HARBOR Unlimited to contact any reference(s) to verify all information provided and to obtain any and all information related to my character and past work performance. I release all references and prior employers from any liability for information provided in good faith.
- The information contained in this application is correct, to the best of my knowledge. I have read the above statements and agree to cooperate with HARBOR Unlimited and the CAMP LIGHTHOUSE Staff.

_____ Date: _____
Applicant Signature

_____ Date: _____
Signature of Parent or Guardian (if under 18)

DISCLOSURE AND AUTHORIZATION FORM TO OBTAIN BACKGROUND REPORTS FOR VOLUNTEER PURPOSES

Please Read Carefully Before Signing the Authorization

DISCLOSURE

This needs to be filled out the first time you volunteer with HARBOR Unlimited.

In considering you as a volunteer, **HARBOR Unlimited** will order a background report about you that we obtain from a consumer reporting agency, Protect My Ministry, Inc.

The background report may contain information concerning your character, general reputation, personal characteristics, and mode of living. The types of information that may be ordered include but are not limited to: Social Security number verification; criminal, public, educational and as appropriate, driving records checks; verification of prior employment; reference, licensing and certification checks; and drug testing results. The information may be obtained from private and public record sources, including personal interviews with your associates, friends, and neighbors. (An "investigative consumer report" is a background report that includes information from such personal interviews, except in California where that term means any background report.)

Under the FCRA, before the Company can obtain a background report about you for employment or volunteer purposes, we must have your written authorization. Before we take adverse action on the basis, in whole or in part, of information in that report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

AUTHORIZATION

I have read and understand the foregoing Disclosure and authorize **HARBOR UNLIMITED** to obtain and rely upon background reports in considering me as a volunteer. By my signature below, I authorize HARBOR Unlimited to obtain any such reports and to share the information received with any person involved in the volunteer decision about me.

I also agree that this Disclosure and Authorization in original, faxed, photocopied, or electronic (including electronically signed) form will be valid for any consumer reports that may be requested about me by or on behalf of HARBOR Unlimited.

Printed Name

Social Security Number

Applicant Signature

Date

Parent or Legal Guardian Signature
(for searches conducted on minors under
the age of 18)

Date

For your security, please use the following link to upload this form to our secure portal.

<https://dtdinsurance.sharefile.com/r-rc8cdeceff03a43be998ed3f2ad8a8639>

REFERENCE (please copy if needed)

Two (2) required for new volunteer. One (1) required for returning volunteer. Regular volunteer, no reference required.

Volunteer:

Light Keeper Name:	Address:	City, State & Zip:
Telephone:	Applying for: CAMP LIGHTHOUSE May 24-May 28	

Referral: The above name desires to serve in a volunteer position at CAMP LIGHTHOUSE. We appreciate your opinion in order to utilize them in the proper capacity. He/she will be working in direct contact with people who have intellectual and/or physical disabilities. It is important that we select individuals whose physical and emotional health will not be at risk during their service. We will be conducting a criminal background check in accordance with current standards concerning volunteers.

Please rate the applicant on each attribute listed below and note any other relative comments.

	Poor	Fair	Average	Good	Excellent	Comments
PHYSICAL CONDITION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
EMOTIONAL STABILITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
DEPENDABILITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
WILLINGNESS TO SERVE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
INTERPERSONAL SKILLS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
SPIRITUAL MATURITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
FLEXIBILITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
CHRISTIAN LIFESTYLE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
GIFTS/TALENTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

How long have you known the applicant? _____ Are you related to this applicant? _____

Please describe your relationship with the applicant: _____

I WOULD WOULD NOT recommend him/her for this ministry opportunity.

Additional comments I have about this individual: _____

Printed Name of Reference

Signature

Telephone

Date

**Please mail this form to: HARBOR Unlimited | PO Box 209 | Jonesburg, MO 63351
or email to info@harborunlimited.com**