Volunteer Application and Voluntary Disclosure Statement

Thanks for your interest in Volunteering at Bethany Birches Camp (BBC). BBC is dependent on volunteers to help camp happen! We also take our work with children very seriously and aim to keep them safe while at camp. We are sorry this form may be overwhelming. It is part of a requirement to meet best practices for working with children. Please fill out the following information and return the form to the camp office via mail, fax (802-672-5222) or email (camp@bethanybirches.org)



General Contact Info:

Name	Birth Date			
Last	First	MI	D/M/YR	
Home Address	Street			
	Street	City	State	Zip
SS #		Other names by	which known (e.g. ma	niden name)
Home Phone		Business phone	(if applicable)	
Cell phone (optional) _		_Email (optional)	
Address		City		
	Street Address	City	Sta	te Zip
Camp Program Shepherd	(Music, counse	dential and licenseling, crafts, recre	eation, etc))
Please list dates a	available			
(visit <u>www.bethanybir</u>	ches.org/summ	er-camps-dates/	#Launch for list of pro	ogram dates):
References: Please persons by phone or ema Name			nem with a reference for	nce below: We may contact thes m ime
Phone Nun	nber and Email		Phone	Number and Email
Relation	ship to You		Rela	ationship to You

More About You:

On a separate sheet of paper answer these questions briefly:

- 1. Why do you want to volunteer at Bethany Birches Camp?
- 2. Please describe any other previous/relevant volunteer roles you've held.
- 3. Our mission is to help youth develop their relationship with God. Do you feel you will be able to help with this mission while you are here?

שווע	vers License #	State	Expir	ation Date	
1.	Previous residence(s) for	last 5 years (include college	e and home re	esidences):	
City		Sta	ate	Years_	
City		Sta	ate	Years	
City		Sta	ate	Years	
City		Sta	ate	YearsYears	
City		Sta	ate	Years	
2.		ted or charged with a crime prosequi, deferred adjudicat		_	have been Yes 1
3.	Have you ever been conv with them? Yes	ricted of any crime relating is No	n any manne	r to children and	or your condu
If ye	es, please explain (Use a sep	arate sheet if necessary)			
If ye	 Indecent assault and least and least assault and least assault assault assault and least assault assault and least assault and least assault and least assault and least assault assault and least assault assault assault and least assault assault and least assault assa	d under sixteen with intent to icking of narcotics or other of the above crimes	rteen ed person obtained the	age of fourteen	No
5.	Have you ever been adjudabuse of children?	dged liable for civil penalties	s or damages	involving sexua Yes No	
If ye	es please explain: (Use a sep	earate sheet if necessary.)			

Voluntary Disclosure Statement, page 2, Revised 06/05/16

7.	Hav	re your parental rights ever been terminated for reasons involving sexual or physical abuse of			
		dren? Yes No			
If ye	es plea	se explain: (Use a separate sheet if necessary.)			
I un	derstar	nd that:			
a.	Bethany Birches Camp may deny employment or volunteer opportunities to any person who answers any of questions numbered 2-6 above in the affirmative.				
b.	The information provided on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers.				
c.	The	camp may terminate employment or volunteer service of any person:			
	1.	Found to have a history of complaints of abuse of a minor and/or			
	2.	Found to have resigned, been terminated or been asked to resign from a position, whether paid or unpaid, due to complaint(s) of sexual abuse of a minor.			
	3.	Have falsified or omitted information in this disclosure statement.			
4.	This	s disclosure statement must be updated yearly.			
Sign	ature_	Date			