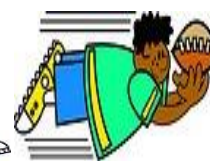




VOLUNTEER APPLICATION FORM



CORPUS CHRISTI LONGHORNS SUMMER CAMP



Contact Information

| | |
|--------------------|--|
| Name | |
| Street Address | |
| City , Postal code | |
| Home Phone | |
| Work Phone | |
| E-Mail Address | |

Availability

During which sessions are you available for volunteer assignments?

- Multi-sport camp
July 8 to July 12
- Multi-sport camp
July 15 to July 19

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer or sports experience.

| |
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| |
|--|

Person to Notify in Case of Emergency

| | |
|-------------------|--|
| Name | |
| Street Address | |
| City, Postal code | |
| Home Phone | |
| Work Phone | |
| E-Mail Address | |

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

| | |
|----------------|--|
| Name (printed) | |
| Signature | |
| Date | |

WAIVER / INFORMED CONSENT

I, the undersigned, understand that Corpus Christi Catholic Secondary School , Corpus Christi Longhorn camp staff/volunteers, and the Halton Catholic District School Board does not assume or accept responsibility for any expenses resulting from loss(personal injury, lost or stolen property, property damage, other expenses) or injuries sustained while engaged in any activity whatsoever whether on or off school premises. I also authorize my child's attendance at the Corpus Christi sport camp and certify that he/she is able to participate in the program activities. I declare having read and understood the above WAIVER/INFORMED CONSENT AGREEMENT in its entirety and hereby consent to participate acknowledging all the foregoing. If I am registering a minor, I certify that I am the parent/guardian for that minor, and agree to the above on their behalf, and I grant permission for use of any photos of my child to appear in future camp brochures or other advertising

Parent/Guardian Signature_____ Date_____

Our Policy

Thank you for completing this application form and for your interest in volunteering with us. All successful applicants will be contacted by June 19, 2019.

