Adult Volunteer Staff Application
2010 Olympic Lutherhaven Youth Bible Camp

*Name: _____ _____ _____
Last First Middle

*Birthdate: _____ *Sex: Male ☐ Female ☐

*Driver's Lic. Number/State: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone/Cell Phone: _____

E-mail address (if it is okay to contact you via e-mail):

_____

Church, if applicable:

_____

This year we are offering one week of camp, July 31 - August 5, for kids completing grades 3 - 8.

I would be interested in helping with:
☐ Registration
☐ Crafts
☐ Night time patrolling/security
☐ Camp Mom/Dad
☐ Worship
☐ Bible study
☐ Waterfront Monitor/Lifeguard
☐ Kitchen support
☐ Nurse/EMT
☐ Other—What other talents do you want to share with us? _____

I am able to volunteer:
☐ Full time, day and night (Camp fees are waived only for children of these volunteers)
☐ Part time; please indicate below: (Camper fees for part-time volunteers will be negotiated depending on volunteer's commitment level)

_____

Send completed application to:
Mandy Harter
858 C NW Winton Lane
Poulsbo, WA 98370

Note: *This item required for Washington State Patrol Background Check. We require this of all volunteers and staff 16 years old and older for the safety of our children.

Revised: 11/19/2009