

For Office Use Only	
<input type="checkbox"/>	Received
<input type="checkbox"/>	Interviewed
<input type="checkbox"/>	Contacted
<input type="checkbox"/>	Fingerprinted
<b>Issued 2018</b>	
<input type="checkbox"/>	Training #1
<input type="checkbox"/>	Training #2
<input type="checkbox"/>	Training #3
<input type="checkbox"/>	Training #4



# Royal Family KIDS® Camp

Sponsored by New Life Church Powell  
 185 S Tower Blvd Powell, WY 82435 307-754-0424

July 2-6, 1018

## RETURNING COUNSELOR/STAFF APPLICATION

**Instructions:** *Please Print.* Only fill out the necessary items that have changed or have not previously been recorded from your original application. We do read and evaluate your responses.

\_\_\_\_\_  
 Date Drivers License # Social Security #

\_\_\_\_\_  
 Last Name First Name Sex Birthdate

\_\_\_\_\_  
 Street Age Marital Status

\_\_\_\_\_  
 City State Zip

\_\_\_\_\_  
 Occupation Number of years

(\_\_\_\_\_) \_\_\_\_\_  
 Home Phone Bus. Phone

\_\_\_\_\_  
 Emergency Contact Phone

\_\_\_\_\_  
 Email Address

T-shirt Size:  Adult Small  Adult Medium  Adult Large  Adult X-Large  Adult XX-Large  
 Have you received certification in the following?  CPR  First Aid  Life Guard  Nurse  EMT

*Have you worked with or associated with abused, neglected or abandoned children this past year?*  
 No  Yes. In what way: \_\_\_\_\_

*Please describe why you wish to return as a counselor for abused kid?*  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## MEDICAL HISTORY

Have you had any medical problems?  NO  Yes, please describe:

---

Do you take any medications?  NO  Yes, please list medicine and any side effects:

---

Have you had any serious injuries or illness since last camp?  NO  Yes, please list:

---

## PERSONAL GROWTH (please use the back if needed)

If you were abused, neglected or abandoned as a child, how did that affect you at camp?

---

---

Please describe your spiritual growth since you have been a Royal Family KIDS Camp counselor:

---

---

How has Royal Family KIDS Camp made an impact on your life?

---

---

From your experience, what would you suggest to a new counselor coming for the first time?

---

---

Can you name a staff or counselor that was a great help to you? And in what way?

---

---

How has your family responded to you being involved with Royal Family?

---

---

What current ministries or activities are you involved with at your church?

---

---

What new strengths and weaknesses have you discovered since working with abused kids?

Strengths

Weaknesses

1. \_\_\_\_\_ 1. \_\_\_\_\_

2. \_\_\_\_\_ 2. \_\_\_\_\_

This year I would prefer my campers to be:  6-7 Years Old  8-9 Years Old  10-11 Years Old

## SUGGESTIONS FOR IMPROVEMENT

List any suggestions you feel would make the camping experience for the kids, counselors & staff even better!

---

---

---

---

---

---

---

---

---

---

## CRIMINAL BACKGROUND

If your records have been expunged pursuant to applicable law, you are not required to answer yes to the following questions. If you are unsure whether to answer yes, we strongly suggest that you answer yes and fully disclose all incidents to avoid any future risk of embarrassment upon disclosure.

1. Have you ever been **convicted** of or **pleaded guilty** to any crimes (including crimes of record which have been expunged and pleas of 'no contest'), including municipal, state and federal?  
 Yes  No
2. Have you ever been **placed on probation**, received a **Suspended Execution, Suspended Sentence or Suspended Imposition of Sentence** for any offense involving a minor child (a child under 18), or been **placed on ANY local, state, or federal sexual registry**?  
 Yes  No
3. Have you ever been **sued in a civil court** of law where the allegations in the suit involved **illegal, inappropriate, or sexual conduct** or contact with a minor child?  
 Yes  No
4. Have you ever been subject to any **court order** involving any **sexual, physical or verbal abuse** including but not limited to any domestic violence or civil harassment injunction or protective order?  
 Yes  No
5. Have you ever **resigned, been terminated or been asked to resign** from a position, whether paid or as a volunteer, due to a **complaint(s) of sexual, physical or verbal abuse of minors**?  
 Yes  No

## REPRESENTATIONS AND RELEASE

I understand that RFK maintains strict policies against any form of child abuse, and that violation of these policies may be cause for dismissal. Child abuse is punishable by law, and **RFK is bound by law to report allegations of abuse or any inappropriate sexual contact to the proper authorities**. ALL reporting is kept confidential, by law. **All volunteers must commit** to immediately report any behavior that seems suspicious, questionable, abusive or inappropriate between: child-to-child, staff-to-child, and staff-to-staff.

If YOU are struggling with a **sexual attraction to children**, please **opt out of service in RFK** or any other child-serving organization, and seek help. One option is: "Hope for the Heart" at (800) 488-HOPE (4673) or [www.hopefortheheart.org](http://www.hopefortheheart.org).

I understand that I will be required to submit to a background check as a condition of acceptance as a volunteer, and that unsatisfactory results, refusal to cooperate, or any attempt to affect the results of these background checks will result in me being removed as a volunteer or volunteer applicant.

I hereby certify that all of the information provided by me in this Application (or in any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in these documents may (or will) be cause for the denial of acceptance as a volunteer, or immediate removal as a volunteer, regardless of the timing or circumstances of discovery.

In consideration of the receipt and evaluation of this Application by the sponsoring Church or RFK Camp Leadership, I hereby authorize you to contact any references, churches, youth groups, schools attended, former and present employers, charities, courts, and any other person, agency, or organization that may have information about me, and for them to provide to you such information (including opinions) that they may have regarding my character and fitness for working with children; I hereby release any such references, churches, youth groups, schools attended, former and present employers, charities, courts, and any other person, agency or organization who may have provided information about me, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization. I also agree to hold RFK, the sponsoring church and RFK Camp Leadership harmless from any damages created by my unwarranted attempt to collect damages for providing information described above. I waive any right that I may have to inspect any information provided about me or by any person or organization identified by me in the Application process.

I understand that submission of an application **does not guarantee** me acceptance as a volunteer. I further understand that should the RFK Leadership extend an offer to me as a volunteer, it is for **no specific duration** and may be **revoked by either the sponsoring church, the RFK Camp Leadership, or me at any time, with or without cause**.

I understand that none of the documents, policies, procedures, actions, statements of RFK, the sponsoring church, the RFK Leadership or their representatives and agents used during the volunteer application process is deemed a contract, real or implied. If accepted as a volunteer, **I agree** to conform to the **rules, regulations, policies, and procedures** of RFK while serving as a volunteer, and understand that such compliance is a condition of remaining a volunteer.

I have carefully read the above Application and this Acknowledgement and Release, and know and understand its contents; I also know the above is a legally binding agreement. I sign this Application and Release of my own free will.

By signing my name, I hereby signify the above information is true and correct to the best of my knowledge.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date