



ALTA MONS VOLUNTEER APPLICATION

Application Directions: Please fill out all sections completely, accurately, and legibly.

General Information:

Name: _____ Date of Birth: ___/___/___

Age: ___ Cell Phone or best number to call you on: _____ - _____ - _____

T-Shirt Size (circle one): S M L XL 2XL 3XL

E-mail Address: _____

Mailing Address: _____ City: _____ State: ___ Zip: _____

Position Applying for (circle one): Camp Nurse Camp Chaplain General Volunteer

Week you're interested in volunteering (circle one): June 23-28 June 30 – July 5 July 7-12 July 14-19

Camp Interests & Activities:

Please circle your answer for the following questions.

Do you play a musical instrument? **YES NO** If yes, which one? _____

Are you comfortable singing, speaking, or performing in front of others? **YES NO WILLING**

Do you have any experience with challenge courses **YES NO** If yes, please elaborate: _____

By signing this form, I attest that all information I have provided on this application is truthful. I also consent to a drug test and background check if I am offered a position at Alta Mons. If accepted, I agree to personally and immediately notify Meredith Simmons (540-268-2409) if personal circumstances affect my availability for summer camp.

Signature: _____ Date: ___/___/___