

Volunteer Application for Willingdon Kids Daycamp 2025

Please fill out the following form and return it to the Family Info Desk or Church Office.

Questions? E-Mail DaycampVolunteer@willingdon.org

Mandatory daycamp training will be on Saturday June 28 from 10am-3pm

Please check off which week(s	s) you would like to serve: /	Do you have a friend request? (First and last name required)		
Elementary Daycamp (9am-3	pm)			
☐ Week 1 (July 7-11) ☐ W ☐ Week 3 (July 21-25) ☐ W	` ' '	Friend requests are not guaranteed. We will try our best to place you in the same large group as at least one (1) of your friends. Unless requested otherwise, we typically split up family members due to SafePlace policies.		
Preschool Daycamp (9am-12	pm)			
Preschool volunteers must s	speak to Yvelyn (<u>ytang@wi</u>	illingdon.org) before applying		
☐ Week 1 (July 7-11) ☐ We	ek 2 (July 14-18)			
PERSONAL INFORMATION				
Legal Name: First:	Middle:	Last:		
Preferred Name:	Birthday (DD/MM/YYYY):			
Email:	Street Address:			
City:	Postal Code: _			
Phone Number: (H)		(C)		
What is your T-shirt size? \square S	☐ M ☐ L ☐ XL Are you f	irst aid certified? Yes No Level:		
Are you interested in helping wit	th Imagine (children with spec	cial needs)? \square Yes \square No \square Possibly, if needed		
Do you speak any languages oth	er than English?			
Have you volunteered at Willing	don daycamps before? \square Yes	S □ No If yes, what year(s)?		
Please fill out this section only i Minors must also have a photo	•	as of July 1, 2025). completed by a parent/guardian.		
Grade: Age: (Volun	teers must be in grade 8 or o	lder) Health Card Number:		
Do you regularly attend a Christi	ian youth group? ☐ Yes ☐ I	No At which church?		
Name(s) of Parent(s)/guardian(s):			
Parent's contact: Phone:		Email:		
Secondary Emergency Contact: I	Name:	Phone:		
Relationship to volunteer:				
		\square Yes \square No (if no, please explain)		
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SPIRITUAL HISTORY Do you regularly attend Willingdon Church? Yes No If yes, for how long have you attended? Have you become a member of Willingdon Church by confession of faith or baptism? \square Yes \square No Do you regularly attend (3 or more times a month) weekend church services (at any church)? \square Yes \square No Have you accepted Christ as your Saviour? ☐ Yes ☐ No When did you do this? Have you been baptized? ☐ Yes ☐ No When and where? _____ In a brief paragraph, please outline your spiritual journey: how you came to know Christ as your Saviour and what you are currently doing to grow in your relationship with Him. If you attend a church other than Willingdon, which church do you attend? Name of Church: _____ Length of attendance: _____ If you do not regularly attend Willingdon Church, please provide the name and contact information of a ministry leader at your current church who knows you personally. We will contact this individual as part of your screening, and this must be someone different from your other two references. Name of Ministry Leader ______ Email _____ Email _____ Ministry Leader's Position ______ Length of Relationship _____ **MINISTRY QUESTIONAIRE** What strengths or giftings do you have that are applicable to serving at daycamps/with children? What areas of concern do you have in working with children? (If any)

CONFIDENTIAL INFORMATION					
sk the following questions as part of our and shared only on a need-to-know basis.	application (Police ma	n process. ay access t	dren, youth, and vulnerable adults, we believe All information will be kept confidential by cho his information, under warrant, if requested.) Ivement in ministry. Thank you for your under	urch leade Answerin	ership,
Are there any circumstances involving your festyle or background that would call into uestion your ability to work with children? (Ex. se of illegal substances, pornography, sexual nmorality, etc.)	□ Yes	□No	8. Have you ever been the subject of a civil lawsuit involving sexual harassment or other immoral behaviour or conduct involving children, youth, or vulnerable adults?	☐ Yes	□No
. Have you ever been accused of npropriety/mistreatment of children? . Have you ever been convicted for the use or	□ Yes	□ No	9. Have you ever been the subject of any disciplinary action, transfer, or dismissal, or been named as a defendant in a civil or criminal lawsuit as a result of an accident or mishap involving	□ Yes	□N
ale of illegal drugs? Have you ever been through treatment for cohol or substance abuse?	□ Yes	□No	children or youth? 10. Have you ever been subject to expulsion, reprimand, or other discipline by a church denomination or other religious organization?	☐ Yes	□N
Have you ever been convicted of a criminal ffense? (Excluding minor traffic violations) Have you ever been arrested or convicted for	□ Yes	□No	11. Have you ever been the subject of any disciplinary action (including discharge) or investigation by a church, religious or other	□ Yes	□No
ny abuse related crimes? Have you ever been investigated by the Child Velfare Agency for suspected child abuse? If yes, ou will be asked to sign a consent form for a Child Velfare Check.	□ Yes	□ No	organization, or by an employer? 12. Do you have any health conditions or concerns of which we should be aware? (Ex. medical, psychiatric, severe allergies)	☐ Yes	□ N
If you answered yes to any of the above	question	s, please e	explain.		

Willingdon does require persons aged 16 and up to complete a criminal record check. If you are currently 15, but will be turning 16 on or before August 1, 2025, please let us know.

Parents/Guardians are required to give full criminal record disclosure (Ex. all convictions, cautions, final warnings, crimes, etc.) for individuals under the age of 16.

REFERENCES

List two <u>adults</u> (age 19+), <u>excluding relatives</u>, who have known you for <u>at least one year</u>. References must be able to communicate in English and have either a Canadian phone number or access to email to complete your reference. We are unable to make international reference calls.

Personal Reference		
Someone who knows you well and ideally	has seen you interact with cl	hildren. (Ex. employer, teacher, co-worker, friend
Name of Reference	Email	
Phone Number	Nature of Relationship	Length of Relationship
Church Reference Someone who knows you in the church (d walk with Christ. (Ex. pastor, ministry lead	_	n), and can speak to your spiritual maturity and or, Christian friend)
Name of Reference	Email	
Phone Number	Nature of Relationship	Length of Relationship
Name of a Willingdon Church leader w	ho knows you personally:	
DECLARATION		
I attest that, to the best of my knowledge, all	the information provided in this	application is true and correct.
	tain and verify any information f	this Ministry Personnel Application Form and to from them (and any other persons that the Church ant to my application.
	nurch or for the volunteer position	l later determines, in its discretion, at any time that I on for which I am applying, the church may terminate otice.
I will, at all times, cooperate fully with the star youth in the program, and will keep all confide		t of my duties and in the safety of all children and my role as a volunteer confidential.
	understand that if I do not wish	eering, and that these may be used in Willingdon for audio, video, or photography of myself to be taker
ignature		Date
arent/Guardian Signature (if applicant is ur		 Date

By signing this form, the parent/guardian attests that they are not aware of any criminal record against their child.

Information received in your volunteer application is confidential and is being gathered for the purposes of considering your application for volunteer ministry with Willingdon Church and for determining what, if any, church ministries you may be suited for in future.