

## Junior Counselor Registration Form

### Personal Information

Legal Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_

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

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_

### Medical Information

Medical Insurance Co. & Policy Number: \_\_\_\_\_

Dental Insurance Co. & Policy Number: \_\_\_\_\_

Applicant has or is subject to: Asthma, Diabetes, Fainting, Heart Trouble, Convulsions, Sleep Walking, etc. (If yes, please circle and explain) \_\_\_\_\_

Allergies: \_\_\_\_\_

Describe any conditions requiring medications (such as activity induced asthma requiring an inhaler):

List any medical restrictions of physical activities: \_\_\_\_\_

Medications (including vitamins or supplements) currently taking and dosages: \_\_\_\_\_

### Food- Please Circle What Applies

Please list only true allergens. A member of leadership will reach out to go over listed allergies and how best to accommodate them. A will fee will be added to provide special food. An alternative will be provided, but adherence is the responsibility of the attendee.

Allergies-    Gluten            Dairy            Vegetarian    Other: \_\_\_\_\_

**\*\*Please read and sign below\*\***

In case of an emergency, this will authorize the Homeschool Outdoor School staff to act in their best judgement to seek medical attention through appropriate means, including ambulance transport and emergency room treatment (including but not limited to, injections, anesthesia, or surgery) as deemed necessary by attending health care personnel (i.e. EMT, First Responder and/or Physician). I accept responsibility for expenses incurred for such treatments.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship: \_\_\_\_\_

Education, Training, Experience

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

If a student, school attending: \_\_\_\_\_

Education and/or Special Training: \_\_\_\_\_

Languages Spoken (other than English): \_\_\_\_\_

Special Skills, interests and/or hobbies: \_\_\_\_\_

Have you had CPR Training? (when) \_\_\_\_\_ Have you had First Aid Training? (when) \_\_\_\_\_

Background in this and Other Youth Programs

Have you been a camp counselor before? YES NO If yes, where, and how long?  
\_\_\_\_\_

Experience in other youth programs: \_\_\_\_\_

Memberships in other organizations: \_\_\_\_\_

References

\*\* At least one should be your pastor or minister, etc. not family members or relatives. PLEASE INCLUDE COMPLETE AND UP TO DATE INFORMATION \*\*

1. Pastor: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
3. Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
4. Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please note: A criminal record will not necessarily disqualify an applicant but will be considered as it relates to the specifics of the position. A conviction includes a plea of no contest, plea of guilty, or any court determination of guilt.**

Have you ever been convicted of a crime involving offenses against children? NO YES  
Have you ever been convicted of a crime involving physical harm to another person? NO YES  
Have you ever been convicted of a crime involving a firearm? NO YES

Within the past 10 years, have you been convicted of a crime involving theft or dishonesty?      NO      YES

Within the past 10 years, have you been convicted of a crime involving the possession of and/or use of controlled substances?      NO      YES

If you said "yes" to any of the questions above, please explain

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Homeschool Outdoor School Information

Why are you interested in an Homeschool Outdoor School Counselor or Teacher position?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

My fun camp counselor name will be \_\_\_\_\_ (subject to approval)

**Please read the following before signing:**

- I am aware of and accept the basic philosophy and objectives of the Homeschool Outdoor School.
- I have read and agree to the Homeschool Outdoor School Adult Volunteer Counselor Expectations.
- I understand that the information I have provided may be verified by contacting people or organizations identified in this application.
- I affirm that the information given in this application is true. If appointed as a volunteer, I agree to fulfill the volunteer responsibilities to the best of my ability.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Oregon Driver's License Number: \_\_\_\_\_

*Please print this form, fill it out, scan and email or mail it to us, Darren, or Brenda Nettrouer. If you have further questions about volunteering, please email and we will contact you by email or phone if you wish.*

204 SW Daniels Street, McMinnville, OR 97128      [dbnett10@gmail.com](mailto:dbnett10@gmail.com)      503-472-8352

**\*\*\*\*\*For Office Use Only\*\*\*\*\***

Date Received: \_\_\_\_\_ Application Reviewed By: \_\_\_\_\_

Approved: \_\_\_\_\_ Payment Received: \_\_\_\_\_

Status of References: \_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

## Junior Counselor Expectations and Responsibilities

We strive to provide quality leadership for youth participating in this program. The opportunity to work with youth is a privileged position of trust that should be held only by those who are willing to demonstrate behaviors that fulfill this trust. The following behavior expectations are provided for volunteers working in the Homeschool Outdoor School. **Please read and initial next to each one.**

\_\_\_\_\_ We expect that you will **help or be in charge of a cabin** of 5-10 children of your same gender. Your overnight accommodation will be with children in a room or cabin. *Please choose one of the following options. We will do our best but cannot guarantee requests will be met.*

\_\_\_\_\_ I would like to be assigned to the same cabin as my same gendered child(ren)

Name(s): \_\_\_\_\_

\_\_\_\_\_ I would like to be assigned to a different cabin without my child(ren)

\_\_\_\_\_ During the day, we expect each adult to **chaperone or teach/ lead** groups of children to keep them safe and in an attitude of learning. (Learning and recreation groups will be co-ed). *Please choose one of the following options.*

\_\_\_\_\_ I would like to chaperone a teaching group that includes my child(ren)

Name(s): \_\_\_\_\_

\_\_\_\_\_ I would like to teach the subject of \_\_\_\_\_

\_\_\_\_\_ I would like to lead \_\_\_\_\_ recreational activity.

\_\_\_\_\_ I have my own equipment \_\_\_\_\_ I will need equipment to lead the activity

\_\_\_\_\_ We hold a Young Earth, 7 Literal Day Creation Model and all science subjects should be taught in this context. A few resources of information that we endorse to carry an orthodox biblical view of creation are [www.answersingenesis.org](http://www.answersingenesis.org) , [www.icr.org](http://www.icr.org) , and [www.creation.com](http://www.creation.com)

\_\_\_\_\_ Treat others in a courteous, respectful manner demonstrating behaviors appropriate to a positive role model for youth

\_\_\_\_\_ Abide by policies and guidelines of Homeschool Outdoor School

\_\_\_\_\_ Obey all laws locally, state, and national, including those related to use of illegal substances, or use of firearms. Do **NOT** bring firearms to Homeschool Outdoor School

\_\_\_\_\_ Recognize that verbal, sexual, or physical abuse and/or neglect of youth is unacceptable either within or outside the Homeschool Outdoor School program. Report all instances of suspected abuse to leadership.

\_\_\_\_\_ Treat animals humanely and leave them in their natural habitat.

\_\_\_\_\_ Operate vehicles, and other equipment in a safe and responsible manner, only with a valid operator's license and the legally required insurance coverage.

\_\_\_\_\_ Do not consume alcohol, or use tobacco, marijuana, or vaping equipment, or any illegal substances at Homeschool Outdoor School; nor allow Homeschool Outdoor School youth campers under your supervision to do the same. (Please report to leadership if a camper is in possession of any of these substances)

## Junior Counselor Code of Conduct

We strive to provide quality leadership for youth participating in this program. The opportunity to work with youth is a privileged position of trust that should be held only by those who are willing to demonstrate behaviors that fulfill this trust. The following behavior expectations are provided for volunteers working in the Homeschool Outdoor School. During Homeschool Outdoor School you will be away from your family. You will be living and studying in a different home- the Homeschool Outdoor School site. In order for everyone to live in harmony and learn, we have written this code of conduct. We strive to provide a respectful and cooperative learning environment for everyone attending. It is important to have a safe and enjoyable week at camp! **Please read and initial next to each one.**

### All Counselors

\_\_\_\_\_ Ensure safety of the campers at all times. Always know where your campers are. Enforce the buddy rule. NEVER be alone with just one camper.

\_\_\_\_\_ Chaperones must shepherd all campers to and from activities. Maintain order during class. If a camper must leave during an activity, make sure they have a buddy and keep them accountable.

\_\_\_\_\_ Be on the lookout for public displays of affection or signs that two people are becoming interested in each other. Stop any conversations concerning boy/girl relationships or other sexually related topics

\_\_\_\_\_ Respect individual convictions and encourage kids to do the same. Stop any conversations about questionable movies or other media that might offend the convictions of others. This includes no pranking.

\_\_\_\_\_ There must be at least one counselor at each table for mealtimes. Don't congregate. Observe how the campers eat and encourage them to eat balanced meals.

\_\_\_\_\_ Strategically situate yourself in classes and activities so there are counselors throughout the room. Encourage campers to pay attention and be respectful.

\_\_\_\_\_ Encourage selflessness. Make this week fun for your campers. Don't be a grumpy counselor.

\_\_\_\_\_ Attend all classes and activities on time and fully prepared with all of your campers in your care.

\_\_\_\_\_ You are here to be a counselor in training, not a camper. We still want you to have fun but you won't get to do all of the activities that the campers do.

\_\_\_\_\_ Contact a staff member immediately if someone is sick, hurt, or upset.

\_\_\_\_\_ Never leave campers unattended.

### Cabin Counselors

\_\_\_\_\_ Help (don't do it for them) your campers earn the clean cabin award.

\_\_\_\_\_ Guide campers in choosing and performing a skit for campfire at least once in the week.

\_\_\_\_\_ Deliver your campers on time and prepared to classes and activities, including appropriately dressed for the activities.

\_\_\_\_\_ Enforce lights out and quiet times. Afternoon quiet times are to be quiet and inside cabins.

\_\_\_\_\_ Whether or not you sit as a cabin, you are primarily responsible for the behavior of your cabin campers.