



Burn Camp

# Oklahoma Firefighter's Burn Camp #10, 2008

## Counselor/Volunteer - Application Form

Dates; Wednesday, August 13<sup>th</sup> through Sunday, August 17<sup>th</sup> (yes, that's 5 days!)  
This years Theme: Hang 10 (get it, celebrating 10 years of Burn Camp, Hang 10). Think surfing.

Please COMPLETE ALL SECTIONS and BOTH SIDES of this form if you are interested in serving as a counselor or volunteer at Burn Camp. When registering at camp you will be expected to fill out a risk and liability release form. If you can not agree to sign this form we ask that you do not volunteer for Burn Camp. We will also be completing background checks.

This year we will be going to a 2 camper to 1 counselor ratio as much as possible. There will still be some campers who will be 1:1. Please keep this in mind when volunteering for camp as a counselor.

PLEASE PRINT CLEARLY AND LEGIBLY

Last name: \_\_\_\_\_ First name: \_\_\_\_\_ M.I. \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Male ( ) Female ( )

E-mail: \_\_\_\_\_ Web site: \_\_\_\_\_

Home phone: ( ) \_\_\_\_\_ Cellular: ( ) \_\_\_\_\_

Current Occupation: \_\_\_\_\_

Emergency Contact : \_\_\_\_\_ Phone #: \_\_\_\_\_

Applicants Adult T-shirt size: ( ) S ( ) M ( ) L ( ) XL ( ) XXL ( ) XXXL

Please return this form by mail by June 1<sup>st</sup>, 2008 to Volunteer/Counselor Chairman: Jennifer Knowlton: 8702 N. 140th E. Ct. Owasso, OK 74055. For questions please contact Jenn at: (918) 698-8812 or [1husker-wildcat@cox.net](mailto:1husker-wildcat@cox.net). Applications post marked after June 1, 2008 will not be accepted, so please get your application in on time.

For questions about the Burn Camp children/campers or parents of children/campers contact:  
Scotty Stokes, Burn Camp Director, Home (918) 371-6351, Cell: (918) 857-6351,  
also Tulsa Fire Station #30 (B platoon). Web Site: [www.tfdclowns.com](http://www.tfdclowns.com)

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( PLEASE TURN OVER AND FILL OUT THE BACK PAGE )

Please indicate below the volunteer staff position you are interested in:

( ) Counselor: I will be assigned a camper for the entire 5 days of camp and will be responsible for his/her behavior and well being.

If known, list camper(s) you would like to be with: \_\_\_\_\_  
*Please remember that camper's have first choice with whom they are paired. Counselor requests for campers will be honored as much as reasonably possible. Ultimately, the e-board will make the final decision regarding camper/counselor pairings, keeping the campers best interest in mind.*

( ) Volunteer

( ) Nurse: I am a nurse and want to be assigned to the nurses station.

( ) Clown: I am with \_\_\_\_\_ clown organization.

( ) Fisherman: I will only be volunteering for fishing day, Saturday 16<sup>th</sup>.

I will be available the entire 5 days of camp ( ). Volunteers and counselors who will be available the entire weekend will be given first priority. If you would like to volunteer, but cannot commit to all five days, please contact Jenn Knowlton.

Do you need wheelchair access? ( ) Please list any health problems or limitations for your participation at camp so we can help make this the best experience for you.

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By reading and signing below, you agree to the following:

- I understand that Burn Camp is a smoke free camp. Smoking is only allowed in the parking lot outside the Dry Gulch U.S.A. park entrance. All rubbish must be disposed of properly.
- I understand that Burn Camp is a drug free and alcohol free camp at all times.
- I will seek assistance and support from other camp staff if at any time I am not able to be with my assigned camper or at my assigned activity.
- I will notify the program director if I observe any action which may affect the safety and well-being of any individual; especially a camper.
- I will be suitably and modestly clothed, prepared, and equipped for all activities and will assist my assigned camper to prepare for each scheduled activity to insure their full participation.
- I will respect the use of the program's supplies and facility and will treat the environment with great care.
- I will commit to being 100% focused on the Camper's physical, social, and emotional well-being.
- I will commit to allowing myself and the differently-able around me to experience the joys of camp fully, so that I may leave knowing that my contribution made a positive difference in the lives of others.
- I will agree to leave the camp program and facility immediately if requested to do so by the camp director for dishonoring the intent and spirit of Burn Camp.
- I understand that if I am asked to leave Burn Camp for any reason that I may not be invited to participate in Burn Camp in the future.

PLEASE SIGN: \_\_\_\_\_

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

*This form must be signed and dated to participate with Burn Camp*

*Thank you very much for your interest in Burn Camp 2008!*

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