

Cooperstown Bible Camp Volunteer Form				
Frist Name:	Middle Initial:	Last Name:	Email Address:	Birth Date: / /
Home Address:				Phone Number: () -
Home Church:	Reason for wanting to volunteer:			
Agreement Criteria:			Dates of Volunteer work:	
				INITIALS
Volunteer agrees to dress in a manner that is appropriate and aligns with the staffs dress code. (Anything that you are questioning please ask any of the full-time staff or any summer staff employees)				
I have read and agree with the EFCA Statement of Faith. If not, please explain on a separate piece of paper. (Found in Appendix 1, please read)				
Volunteer openly submits to a mandatory background check. (please make sure email is legible) (this is to ensure the safety of ALL CBC campers)				
In the event of volunteering, I agree to abide by all present and subsequently issued rules and policies of Cooperstown Bible Camp.				
I release them and their organization from any liability whatsoever.				
I understand and agree that if allowed, I will live in a close Christian community with other staff members. I understand that this may require giving up personal privileges, rights and privacy which may be considered common place in the everyday world. I agree, while volunteering, to forfeit my personal privileges and agenda. I understand that I will not be asked to forfeit any legal or constitutional rights.				
I hereby authorize Cooperstown Bible Camp to obtain information pertaining to any charges and/or convictions I may have had for federal and state criminal law violations, by name and/or fingerprinting. This information will include but not be limited to allegations and convictions or crimes committed upon minors and will be gathered from any law enforcement agency of this state or any state or federal government, to the extent permitted by state and federal law.				
In the event of volunteering, I authorize Cooperstown Bible Camp to use any photos, video or sound recordings taken of me during the summer in future camp promotional material.				
I understand that CBC reserves the right to dismiss a volunteer member whose action, behavior, or attitude, in their judgment, is contrary to the best interests of the camp.				
Agrees and fills out all the medical information below. (Appendix 2)				

Volunteer: Once filled out please send to rcollins@cbcnd.com

I hereby agree to all the terms and conditions that are stated in this Volunteer Agreement form.

NAME: _____ **DATE:** _____

Social Security Number _____

Parents: (only applicable if under the age of 18)

I hereby agree and have read all the terms and conditions that are stated in this Volunteer Agreement form. Also, allowing my child to be transported by staff members if the event arises in an off-campus activity.

NAME: _____ **DATE:** _____

FULL TIME STAFF ONLY:

DATE: _____

APPROVAL: _____ **SIGNATURE:** _____ **POSITION:** _____

What do with your form:

Electronically fill out and email the copy to:

Rcollins@cbcnd.com

or

Print off, fill out, and mail in to:

Cooperstown Bible Camp

ATTN: Program Director

11776 3rd St. SE

Cooperstown, ND 58425

APPENDIX 1:

EVANGELICAL FREE CHURCH OF AMERICA STATEMENT OF FAITH

- 1. God:** We believe in one God, Creator of all things, holy, infinitely perfect, and eternally existing in a loving unity of three equally divine Persons: the Father, the Son and the Holy Spirit. Having limitless knowledge and sovereign power, God has graciously purposed from eternity to redeem a people for Himself and to make all things new for His own glory.
- 2. The Bible:** We believe that God has spoken in the Scriptures, both Old and New Testaments, through the words of human authors. As the verbally inspired Word of God, the Bible is without error in the original writings, the complete revelation of His will for salvation, and the ultimate authority by which every realm of human knowledge and endeavor should be judged. Therefore, it is to be believed in all that it teaches, obeyed in all that it requires, and trusted in all that it promises.
- 3. The Human Condition:** We believe that God created Adam and Eve in His image, but they sinned when tempted by Satan. In union with Adam, human beings are sinners by nature and by choice, alienated from God, and under His wrath. Only through God's saving work in Jesus Christ can we be rescued, reconciled and renewed.
- 4. Jesus Christ:** We believe that Jesus Christ is God incarnate, fully God and fully man, one Person in two natures. Jesus-Israel's promised Messiah-was conceived through the Holy Spirit and born of the virgin Mary. He lived a sinless life, was crucified under Pontius Pilate, arose bodily from the dead, ascended into heaven and sits at the right hand of God the Father as our High Priest and Advocate.
- 5. The Work of Christ:** We believe that Jesus Christ, as our representative and substitute, shed His blood on the cross as the perfect, all-sufficient sacrifice for our sins. His atoning death and victorious resurrection constitute the only ground for salvation.
- 6. The Holy Spirit:** We believe that the Holy Spirit, in all that He does, glorifies the Lord Jesus Christ. He convicts the world of its guilt. He regenerates sinners, and in Him they are baptized into union with Christ and adopted as heirs in the family of God. He also indwells, illuminates, guides, equips, and empowers believers for Christ-like living and service.
- 7. The Church:** We believe that the true church comprises all who have been justified by God's grace through faith alone in Christ alone. They are united by the Holy Spirit in the body of Christ, of which He is the Head. The true church is manifest in local churches, whose membership should be composed only of believers. The Lord Jesus mandated two ordinances, baptism, and the Lord's Supper, which visibly and tangibly express the gospel. Though they are not the means of salvation, when celebrated by the church in genuine faith, these ordinances confirm and nourish the believer.
- 8. Christian Living:** We believe that God's justifying grace must not be separated from His sanctifying power and purpose. God commands us to love Him supremely, and others sacrificially, and to live out our faith with care for one another, compassion toward the poor and justice for the oppressed. With God's Word, the Spirit's power, and fervent prayer in Christ's name, we are to combat the spiritual forces of evil. In obedience to Christ's commission, we are to make disciples among all people, always bearing witness to the gospel in word and deed.
- 9. Christ's Return:** We believe in the personal, bodily, and premillennial return of our Lord Jesus Christ. The coming of Christ, at a time known only to God, demands.

constant expectancy and, as our blessed hope, motivates the believer to godly living, sacrificial service and energetic mission.

10. Response and Eternal Destiny: We believe that God commands everyone everywhere to believe the gospel by turning to Him in repentance and receiving the Lord Jesus Christ. We believe that God will raise the dead bodily and judge the world, assigning the unbeliever to condemnation and eternal conscious punishment and the believer to eternal blessedness and joy with the Lord in the new heaven and the new earth, to the praise of His glorious grace. Amen.

APPENDIX 2:

ALLERGIES

1. Do you have any **food allergies**? Circle: Yes/No. Explain: _____
2. Are you **allergic to any medications**? Circle: Yes/No. Explain: _____
3. Do you have any **other allergies**? _____
4. Do you have any allergies that require the **use of an Epi-pen**? _____

DIET

1. Are you on a regular diet? Circle: Yes/No.
 2. Are you on a regular vegetarian diet? Circle: Yes/No
 3. Do you have any **special food needs**? Circle: Yes/No. _____
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MEDICATIONS

- I do not take any daily meds.
- I take the following medications (includes time/dose): _____
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HEALTH

1. Do you have any physical health conditions that we should be aware of (including both past and present concerns)?

2. Do you have any mental/emotional health concerns that we should be aware of?

3. Are all immunizations current? Yes/No. Last tetanus Shot: Date _____
4. Have you had a flu shot? Yes/No. Date: _____
5. Any additional information you would like us to know?

Family Physician: _____ Phone: _____

Insurance Carrier: _____ Policy # _____

****Please attach a photocopy of the insurance card.***

PERMISSION & RELEASE OF LIABILITY

I HEREBY AUTHORIZE ANY MEDICAL TREATMENT NECESSARY FOR, _____.

I hereby completely assume the risk of all injuries to myself (minor: my child)

I hereby completely assume the risk of all injuries and release and discharge Cooperstown Bible Camp (CBC), its agents and employees from all liability, which may result in injury.

I hereby authorize CBC medical staff to dispense over-the-counter medications as need arises and prescription medications based on instructions provided.

I hereby give permission to the medical personnel selected by CBC to order x-rays, routine tests, treatment to release any records necessary for insurance purposes, and to provide or arrange necessary medical transportation.

I hereby give permission to the physician selected by CBC to secure and administer treatment, including hospitalization.

I give permission for myself (minor: my child) listed above to participate in all camp activities which may include, but not limited to the following: high and low ropes adventure course, zip-line, paintball, climbing wall, horsemanship and riding, canoeing, riflery, archery, human foosball, off campus hikes, field trips, and swimming unless written instructions hospitalization.

I agree that any photographs or videos of myself (minor: my child) taken at camp or written comments made by above mentioned person may be used by CBC for art, advertising, or promotion. All rights to inspect or approve the finished product or copy are waived.

MEDICAL COVERAGE: I understand, in the event of an accident requiring medical attention and/or a trip to the emergency room, that my personal health insurance shall have primary responsibility for coverage and that Cooperstown Bible Camp shall be considered only as secondary medical insurance. Should the summer staff employee not have personal medical insurance, any injury while being employed by Cooperstown Bible Camp will be covered under our worker's compensation program.

Signature of Employee

Date

Signature of Parent or Guardian (if under 18)

Date

