



VOLUNTEER APPLICATION

.....
Date: _____

Name: _____ Birthdate: _____

Address: _____ Social Security #: _____
Phone: (H) _____
(W) _____

Email: _____
.....

EDUCATION:

High School: _____
Name of High School *Year Completed*

College: _____
Name of College *Year Completed*

.....
RELEVANT TRAINING/WORKSHOPS:

HOW DID YOU FIND OUT ABOUT CAMP? _____

Please Mail Application to:
Camp Conquer
417 Oak Bend, Suite 170
Lewisville, TX 75067
Or fax 972-459-9911

EMPLOYMENT:

1. _____
2. _____
3. _____

.....
VOLUNTEER EXPERIENCE:

.....
REFERENCES: Name, address & phone number of 3 persons who know you:

1. _____
2. _____
3. _____

.....
VOLUNTEERS WILL RECEIVE A FREE T-SHIRT

T-Shirt Size: SM ____ MED ____ LG ____ XL ____ XXL ____ Other ____

.....
YOUR AREAS OF INTEREST OR EXPERTISE:

| | | | |
|-------------|-------|------------------|-------|
| Sports | _____ | Memorial Service | _____ |
| Arts/Crafts | _____ | Team Leader | _____ |
| Relays | _____ | Other: | _____ |
| Clean-up | _____ | | _____ |

DAYS YOU ARE AVAILABLE:

All Weekend ____ Saturday Only ____

SIGNATURE: _____

DATE: _____

Criminal Background History Check

By signing below, you are giving Camp Conquer Foundation permission to conduct a State of Texas Criminal History Check to determine if you have a criminal conviction or have committed certain conduct that would bar you from volunteering for Camp Conquer.

Signature of Volunteer