

A MINISTRY OF AMERICAN BAPTIST CHURCHES OF NEW JERSEY
79 Blossom Hill Rd, Lebanon, NJ 08833
Phone: (908) 236-2638
www.camplebanon.com hgierman@camplebanon.com



Camp Lebanon (Baptist Camp and Conference Center) is committed to providing a safe environment where everyone can experience the transforming power of God's love and find support through healthy relationships and activities in a beautiful outdoor setting. We are a ministry of the American Baptist Churches of New Jersey and seek to offer camping programs that provide opportunities for persons to become aware of God's love as revealed in Jesus Christ and to respond to Jesus in faith and love through personal commitment and growth. We invite all campers and volunteers to come and enjoy a summer in the beautiful outdoors with our leaders, staff, and campers.

#### Step #1

If you are interested in serving as a Summer 2022 Volunteer, please fill out and return the **completed application no later than March 30, 2022 to:** 

Baptist Camp and Conference Center 79 Blossom Hill Road, Lebanon, NJ 08833 or to <a href="mailto:hgierman@camplebanon.com">hgierman@camplebanon.com</a>

#### Step #2

#### Review Application - Check References - Complete Background Check

If you are selected for a volunteer position, we will set up a time for a virtual, phone or in-person interview. If we have an overabundance of volunteers, your name will be put on a waiting list. We will notify you.

#### Step #3

If you are invited to serve in a role during our Summer 2022, you will be required to attend the training/orientation/gathering opportunities offered (Dates to be discussed at interview). We hope you come to camp rested, healthy and in a good space to serve and show love to our amazing campers, volunteers, and staff.

ABCNJ is an equal opportunity employer and practices non-discrimination.



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### **Summer 2022 Volunteer Application**

### Week(s) applying for:

- o Family Camp June 30-July 5
- o Sailing Camp (Grades 6-10) July 10-July 16
- o Youth Camp (Grades 6-10) July 10-July 16
- o Latino Camp July 17-July 23
- o Mini Camp (Grades 1 & 2) July 24 July 27
- o Junior Camp (Grades 2-6) July 24-July 30

### Position applying for (indicate order of preference)

- o Arts and Crafts
- o Kitchen
- o Waterfront
- o Maintenance
- o Counselor
- o Nurse/EMT

\*Volunteers (except Counselors) must report Sunday by 11am. \*Counselors must report the Saturday before their week training will begin at 1pm-more information to follow.

#### **Personal Information**

Name:	
Date of Birth	
Address:	
Phone number: (Home)(Cell)	
Email:	
What is the best way to contact you?	
What church are you affiliated with?	



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Church address:			
What is your highest level of education?_			
If you are a college student, what is your	major?	<u> </u>	
If you are a college graduate, what degree	e do yo	u hold	?
Do you hold any of the following certif	ication	ns?	
	YES	NO	Expiration Date
Cardiopulmonary Resuscitation (CPR)			
First Aid			
Automatic External Defibrillator (AED)			
Lifeguard			
How did you hear about the Volunteer op  Have you ever volunteered at Camp Leba:			
If yes, when and in what capacity?			
Have you ever been convicted of a misder If yes, please explain and restorative proc	neanor	or a f	_
Have there been any allegations of misconduthis includes charges of sexual misconduabuse of power, etc). If yes, please explanance in which they were resolved. Yes	uct, chi lain the	ild abı e natu	use, financial impropriety, are of the allegations and the



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#### **Other Information**

Smoking cigarettes, vaping, and use of alcohol and non-prescription drugs is prohibited while at Camp Lebanon. Will you abide by this regulation?
Yes No
Camp Lebanon's mission statement is to "make available opportunities for participants to live in a natural outdoor setting and in relationship with others in Christian community." Are you willing to contribute to that goal by upholding a high standard of work ethic and attitude as a volunteer? <b>Yes No</b>
For the safety of yourself and others, do you agree to follow written and spoken
instructions given by Camp Lebanon Staff and leadership while participating in our programs? <b>Yes No</b>



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REFERENCES (Do not list relatives. References need to have known you for at least six months):

Pastor or Church Leader:	
Name:	
Title/Role in applicant's life:	
Address:	
Phone #	Email
Personal Reference	
Name:	
Title/Role in applicant's life:	
Address:	
Phone #	Email
Personal Reference	
Name:	
Title/Role in applicant's life:	
Address:	
Phone #	Email
use and give upon request, references aspects of my person as it pertain Conference Center.	st Camp and Conference Center to request, receive, ences as to character, ability, reliability, and other ns to my association with the Baptist Camp and
I release all persons serving as rethat if my behavior and work eth	e information I've supplied here is true and accurate eferences from any liability. I understand and agree nic does not reflect a true ability to serve alongside ise compromise the mission of the program, I may be
Applicant signature:	Date:



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### **BACKGROUND INVESTIGATION CONSENT**

· · · · · · · · · · · · · · · · · · ·	nt complete name), hereby authorize <b>Baptist Camp and</b>
	e an independent investigation of my background,
	ation, criminal or police records, including those
· · · · · ·	zations and all public records for the purpose of
-	application and/or obtaining other information, which
2 2 1	unteer or for employment now, and if applicable, during
the tenure of my volunteering or employment	t with Baptist Camp and Conference Center.
	nter and/or its agents and any person or entity, which zation, from any and all liabilities, claims, or lawsuits in and all of the above referenced sources used.
The following is my true and complete legal my knowledge.	name, and all information is true and correct to the best of
Print full name:	
Maiden name or other names used:	
How long have you lived at your current add	ress?
Previous address:	
How long did you live at that address?	
Date of birth:	Social security #:
Driver's license #:	State of license:
Signature:	
Date:	
FOR OFFICE USE ONLY NSOPW Checked: Date: Resu	lt: Checked by:



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# ALL APPLICANTS UNDER THE AGE OF 18 COMPLETE THE FOLLOWING:

(All statements become part of any future employee personnel files.)

Name:	Phone:	
Father's Name:	Phone	
Parents' Address:		
request, re	on is given for the Baptist Camp and Conference Center to ceive, use and give upon request, references as to character	
• ,	iability, and other aspects of my person as it pertains to my iation with the Baptist Camp and Conference Center.    ture:	