



Personal Details

Surname..... First names.....
Date of Birth..... Male/Female (delete as appropriate)
Home address.....
.....Postcode.....

Home Telephone..... E-mail.....
Mobile Number:..... (booking confirmation and further details will be sent to this address)

Which Camp
(please tick) **Junior Camp** 4th-11th August **Inter Camp** 28th July – 4th August **Senior Camp** 21st – 28th July

Special needs (please include any physical disability or health condition which may prevent you from undertaking certain types of activities. Continue on reverse if necessary)

- Diet (e.g. Vegetarian, allergies).....
- Allergies (e.g. medicines, materials)
- Medical, including any medication.....
- Educational/emotional.....

Doctor's Name and Address.....
Doctor's Telephone..... NHS Number (if known).....

Emergency Contact Details

Name..... Relationship to volunteer.....
Contact number DURING camp: Home..... Mobile.....
(IF THIS INFORMATION CHANGES BEFORE CAMP, PLEASE TELL THE CAMP MANAGER WHEN YOU ARRIVE AT CAMP)

Area you wish to be of service: (please tick all you would be willing to do)

- | | | |
|---|---|--|
| Tent-Leader <input type="checkbox"/> | Minibus Driver <input type="checkbox"/> | PA/Audio/Visual <input type="checkbox"/> |
| Games/Activities <input type="checkbox"/> | Transport Manager <input type="checkbox"/> | |
| Kitchen staff <input type="checkbox"/> | Music/Worship Team <input type="checkbox"/> | |
| First-Aid <input type="checkbox"/> | Crèche <input type="checkbox"/> | |
| Site services <input type="checkbox"/> | Video/Photography <input type="checkbox"/> | |
| Book/Tuck shop <input type="checkbox"/> | Other/Don't mind <input type="checkbox"/> | |

Do you have any qualifications that might be useful at camp? (e.g. current first aid qualification, life-saving, food hygiene, minibus driver, musician, singer)
.....

WE MUST HAVE a Criminal Records Bureau (CRB) certificate covering working with children and vulnerable adults.

Do you have an SHBC or other organisation's CRB (within last 3 years)? YES (please send copy with this form) NO

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor?
Yes (please provide brief details on next sheet) No

Church Contact (we may contact this person for a reference)

Church usually attended..... Youth/Church leader.....
Leader Telephone..... Leader Signature.....
Leader E-mail.....

References

Please provide the name, address and telephone number of two personal referees (who should NOT be related to you); one of which should be a contact from the Church you are attending):

1)..... 2).....
.....
.....

Have you ever been involved in children's or youth work before? Yes (please give details) No
 Have you been involved at SHBC before? Yes (please give details) No
 Will you be bringing your own accommodation to camp? Yes No
 If 'yes' please indicate if you are willing for this to be used during other weeks. Yes No
 Will you be bringing anyone with you to camp who is not applying to be a worker? Yes No
 If 'yes' please provide details at the bottom of this page, including ages, relationship, special medical or dietary needs)

Declaration & signature

The information on this form is correct to the best of my knowledge. I authorise any referees or church representatives listed on this form to provide any information they may have regarding my character and fitness for camp work.
 Should I be accepted to volunteer at SHBC this year, I agree to work under the discipline of, and in the first instance refer any problems to, the Camp Manager. (SHBC Trustees are available for further reference should any problem not be resolved).
 I agree to refrain from any unscriptural conduct whilst serving at camp.
 I understand that the information on this form is confidential, and in most circumstances, will only be seen by the Camp Management Team and the SHBC Trustees.
 If required, I agree that emergency medical treatment may be given as appropriate.

Signature..... **Date**.....

Permission to use photographs

South Hants Bible Camps and Hampshire Christian Trust (site owner), both registered charities, would like to use photographs of camp for publicity.
 I give permission for photographs of me/my child named on this form (delete as appropriate) to be used for the following publicity purposes, and I understand that no names or addresses will be attributed to any photograph and that no photographs or identifying information will be transferred to any 3rd party without my express permission.
 Printed publicity yes / no Video or DVD yes / no Website yes / no
www.southhantsbiblecamps.org

Signed **Date**.....

Should you wish to discontinue this permission at any time please email via the camp website and the SHBC secretary will contact you to arrange this. All publicity remains © SHBC.

Completed form should be sent to:

JUNIOR: Mrs C Webb, 113 Chalvington Road, Chandler's Ford, SO
INTER: Mrs C Watt, 17 Malcolm Close, Chandlers Ford, Hants. SO53 5BL
SENIOR: Miss Ceri Webb, 62 Greenway Road, Rumney, Cardiff, CF3 3AY

There is no compulsory fee for volunteers attending SHBC, however, to prevent camper costs increasing to pay for volunteers, there will be an opportunity for you to make a contribution during your week at camp, which your Camp Managers will discuss with all volunteers.

How did you hear about SHBC? Been before Recommendation Advert Website

Additional Details (if applicable)