



# Kansas Jaycees' Cerebral Palsy Ranch Volunteer Application

send to: Kansas Jaycees' Cerebral Palsy Ranch, P.O. Box 267, Augusta, KS 67010

Name \_\_\_\_\_ E-mail \_\_\_\_\_

Present Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State Zip

Parent's Names \_\_\_\_\_  
(if 18 or under)

Parent's Address \_\_\_\_\_ Phone \_\_\_\_\_  
City State Zip

*The information on this line is not required to be completed.* Birth date \_\_\_\_\_ Age \_\_\_\_\_  
Sex \_\_\_\_\_

EMERGENCY CONTACTS	
Preferred Contact Order	
1. Contact _____	Phone _____
2. Contact _____	Phone _____
3. Contact _____	Phone _____

## EDUCATION

### High School

1. \_\_\_\_\_ Fresh. Soph. Jr. Sr.

2. \_\_\_\_\_ Fresh. Soph. Jr. Sr.

College: \_\_\_\_\_ Major \_\_\_\_\_ Graduation \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

Are you certified in: CPR-yes \_\_\_ no \_\_\_ First Aid-yes \_\_\_ no \_\_\_ Lifeguarding-yes \_\_\_ no \_\_\_ WSI-yes \_\_\_ no \_\_\_  
Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_

Have you volunteered at the Ranch before? \_\_\_\_\_ If so, when? \_\_\_\_\_

Why do you want to volunteer at the Ranch?

List special skills, classes, training, or activities you have done that will help you be a better volunteer.

List interests, hobbies, and activities that you enjoy.

List any volunteer experience you have had in the past.

### 2009 CAMPING PROGRAM

Please mark the sessions in which you would like to volunteer in order of preference. **Put a 1 by your first choice; a 2 next to your second; and so on.** Please indicate if you are interested in more than one session.

Choice	Week	Date	Age	Theme	Choice	Week	Date	Age	Theme
	1	May 31- June 3	21 & Up	New Years Camp Celebration		5	June 14 - 17	5 -20	Wild Adventures
	2	June 3 - 6	21 & Up	Exploring Nature		6	June 17 - 20	25 & Up	Games, Games & More
	3	June 7 - 10	25 & Up	Port of Call		7	June 21 - 24	21 & Up	Discover Kansas
	4	June 10 - 13	21 & Up	Night Owls		8	June 24 - 27	21 & Up	Celebrate America

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for volunteering as may be necessary in arriving at an acceptance decision. In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

I hereby understand and acknowledge that any relationship with this organization is of an "at will" nature, which means that the Volunteer may resign at any time and the Volunteer Employer may discharge Volunteer at any time with or without cause. It is further understood that this "at will" relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## **Summer Staff Volunteer Process (keep this page for your records)**

### **This packet includes:**

- Application Form
- Information about volunteer requirements, directions to complete application process, and information about our camp

### **You need to:**

- Fill out application, noting at the bottom of page one which week you would like to volunteer where it says VOLUNTEER WEEK(S). (see page two for date choices)
- Copy certificates (CPR, First Aid, etc.), and mail them to the camp office

### **The Camp will:**

- Contact you for a phone or in person interview if you are a first time volunteer
- Inform you on availability of volunteer positions during the time selected
- Send you a confirmation of your date selection and list of suggested items to bring

### **Volunteer – Description and Requirements:**

- This camp is very active and your participation will be necessary. All volunteers will gain hands on experience with the campers. Volunteers perform a variety of tasks that include but are not limited to dressing, lifting, supervising, cleaning and full participation in all activities.
- Minimum age for all volunteers is 16. Those under 18 are limited in the type of volunteer positions available.
- The Kansas Jaycees' Cerebral Palsy Ranch is a specially designed summer camp for children, teens, and adults with physical and/or mental disabilities, including cerebral palsy, spina bifida and mental retardation. We want to invite you to take part in our program by serving as a volunteer.
- The Ranch offers one of the best overall experiences in working with individuals with physical and/or mental disabilities. Counselor staff members serve as primary caregivers for campers. Volunteers assist the campers to participate in the activities and will be provided with the necessary training. Volunteers are also welcome to attend the pre-camp training to receive more in-depth training.
- All of the Ranch's facilities are designed to be accessible to physically disabled campers. Buildings are centrally air-conditioned. Facilities include dorms, recreation room, kitchen, dining hall, lodge, covered solar-heated pool, severe weather shelter, 28-acre lake, and boating and fishing dock. We also have horses, pony, and a miniature golf course, to name a few of the activities available.

The ranch is a great experience in addition to all the fun that is shared by campers, staff, and volunteers. Ranch staff members work hard during a rewarding week of working with campers, and form memories special enough to last a lifetime! We hope you will be a part of the Ranch this summer. If you have any questions, call, write, or e-mail:

**Cheryl Schmeidler, Executive Director, (316) 775-2421**  
**Ks. Jaycees' Cerebral Palsy Ranch, P.O. Box 267, Augusta, KS 67010**  
Email: [execdirector@cpranch.org](mailto:execdirector@cpranch.org) Website: [www.cpranch.org](http://www.cpranch.org)

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