



NEW AVENUES TO INDEPENDENCE, INC.

Broadmoor Summer Camp

8090 Broadmoor School, Mentor, OH 44060

216-701-4577

ghalliday@newavenues.net

VOLUNTEER APPLICATION

Camp is June 27-July 29 2011, 8:00 a.m. – 1:30 pm

NAME: _____ DATE OF BIRTH: _____ AGE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

PHONE: (____) _____ - _____ EMAIL: _____

T-SHIRT SIZE (Adult Sizes): S M L XL

I AM AVAILABLE TO VOLUNTEER FROM 8:00am-1:30pm ON THESE DAYS:

___ MON ___ TUES ___ WED ___ THURS ___ FRI _____ SPECIAL EVENTS

I ENJOY PARTICIPATING IN THE FOLLOWING ACTIVITIES:

__CRAFTS __MUSIC __SWIMMING __GYM __COOKING __READING TO KIDS

PLEASE LIST ONE PROFESSIONAL, VOLUNTEER OR SCHOOL REFERENCE:

NAME _____ TITLE _____

ADDRESS _____ CITY: _____ ZIP: _____

PHONE NUMBER: _____ E-MAIL: _____

PLEASE EXPLAIN ANY EXPERIENCE YOU HAVE WITH INDIVIDUALS WITH DEVELOPMENTAL DISABILITIES:

WHY ARE YOU INTERESTED IN VOLUNTEERING AT BROADMOOR SUMMER CAMP?

[ALL VOLUNTEERS MUST ATTEND ORIENTATION, Please select ONE of the following dates/times for your orientation. Orientations are held at Broadmoor School](#)

___ Monday, June 20th from 2:30 p.m. to 5:30 p.m.

___ Wednesday, June 22nd from 5:30 p.m. to 8:30 p.m.

THE FOLLOWING INFORMATION IS CONFIDENTIAL

EMERGENCY CONTACT and RELATIONSHIP: _____

EMERGENCY TELEPHONE: (_____) _____

STREET ADDRESS: _____

CITY _____ ZIP: _____

Please list any accommodations you may require to complete your summer camp volunteer assignments:

New Avenues to Independence, Inc. complies with federal and state regulations regarding convicted felons in our direct care programs and facilities. Have you ever been convicted of, plead guilty or no contest to a felony? YES NO (please circle)

If yes, please explain:

My signature constitutes that my responses are true and complete. I understand and agree that any falsification or omission, either on application or in my responses to questions asked during interview / orientation, is grounds for immediate dismissal, no matter when the falsification or omission is discovered. **I understand that my approval as a volunteer is contingent on the successful completion of orientation.**

_____ I will allow my photo to be used in print publications, New Avenues' website and/or New Avenues' Facebook page.

_____ I will NOT allow my photo to be used in print publications, New Avenues' website and/or New Avenues' Facebook page.

Volunteer Signature

Date

Parent / Guardian Signature (Required, if under age 18)

Date

[Please return to:](#)

Heidi Lamb, Resource Development Coordinator
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New Avenues to Independence
17608 Euclid Ave., Cleveland, Ohio 44112
Fax: 216-481-2050
216-481-1909 x221

Thank you for your interest in volunteering at Broadmoor Summer Camp. If you are selected for a volunteer position, you will be contacted about orientation.