VOLUNTEER QUESTIONNAIRE

We are so glad you are interested in being a part of our Annual Camp Abilities Four Corners!

By filling out this questionnaire, we are able to get to know you and your talents and this will help us determine if you are a good fit for our camp. If we feel that you are, the Camp Director or Assistant Director will email you a VOLUNTEER REGISTRATION FORM that is much shorter than the Questionnaire and will gather further information including medical insurance, health history and authorization for audiovisual products.

Requirements for being a coach at Camp Abilities Four Corners:

- *Ability to participate in high intensity physical activity all day for 7 days, including hiking on dirt/sand trails and lake swimming.
- *Availability for the duration of camp (Sunday, through 5pm Saturday, including overnights).
- *Enthusiasm for teaching students with visual impairments how to be healthier and more empowered.
- *Team player attitude and willingness to help with set up, tear down, lifting and carrying equipment etc.
- *Sufficient independence skills to follow the group to get on the van and to locations and to care for a young person with a visual impairment.
- *Ability to advocate for oneself, including telling leadership team if you need more orientation to any location or information about what your job entails.

We look forward to working with you to make our next camp an awesome one!

- -The Camp Abilities Four Corners Team
- **Please note that Cameron Trading Post is an alcohol, tobacco, and drug free program.

Alcohol, tobacco, and other drugs will not be allowed on camp, and use of such products anytime during the week of Camp Abilities Four Corners will result in you being asked to leave immediately and at your own expense**

BASIC INFORMATION

FIRST and Last Name	
Mailing Address	
Email Address	
Phone Number	_
Date of Birth	_
Gender: This is for housing purposes only. Camp Abilities Four Corners does not discrim basis of gender or gender identity. If male or female does not describe you, please write prefer under "other" or talk to the Camp Director about your housing needs	
Female Male Other	

Saturday	, including overni	rs requires coaches to be at camp from 1PM on Sunday, through 5 PM on ghts. Will you be available throughout this entire time? If you need to clar other" and explain.	
Yes	No	Other	
Do you u	ıse/speak any lar	guage other than English?	
•	ncy in another la	o speak Spanish or use ASL. Even knowing you have some degree of nguage is helpful for creating inclusive groups for our ELL and deafblind	
Answer:_			
Do you h	ave any of the fo	ollowing certifications/degrees?	
Please or you are o	•	ertification is current and you are willing to provide those services for whi	ich
First A	id		
CPR			
Certific	ed Adapted Physi	cal Educator (CAPE)	
Certific	ed Orientation an	d Mobility Specialist (COMS)	
Teach	er of the Visually	Impaired	
Certific	ed Adaptive Recr	eation and Sports Specialist (CARSS)	
Interp	reter		
Interve	ener		
Lifegua	ard* Please indica	ate if you are not willing to lifeguard in a pool or lake environment.	
Other			
If coming	g to camp for sch	ool credit, is there something specific you must accomplish?	
For exam	nple, specific amo	unt of clinical hours, videotaping a lesson, teaching a lesson, etc.	
Answer:			

T-Shirt	: Size:								
If acce	pted to	camp, yo	ou will re	ceive a	free car	mp t-shirt (adult unisex sizing).			
S	М	L	XL	2XL	3XL	4XL			
Which	of the f	ollowing	statem	ents be	st descr	ribes you?			
I am	a new C	Camp Ab	ilities vo	lunteer					
I have volunteered at another Camp Abilities. Name of camp:									
I an	n willing	to be a	one-on-o	ne coa	ch with	a student athlete			
I prefer to be a "behind the scenes" helper									
I ca	n instruc	ct the fol	lowing s	ports (p	olease lis	ist them):			
Answe	er:	ear abo							
impair unders Hope,	ments. A stand tha I Can, I	At camp, at I will l	we tead be asked f-advoc	h sports I to par acy han	s and ph ticipate dbook (corts experience for athletes who are blind or have visual hysical activity skills as a means to empower our athletes. It in one or more virtual trainings, required to read "I (on-line) and watch several videos all from			
			_Initial						
Descri	be your	coaching	g/leader	ship sty	/le in a f	few words.			
interacto pair	ctions; o	r quiet a h as we	nd passi	onate a	bout the	eading big groups, laid-back and prefer one-on-one ee work. This is just an assessment of what type of athlete and athletes based on shared personality traits or particular			
Answe	r:								

Do you play or coach any sports?
Specifically, do you swim, play soccer, horseback ride, or play golf as part of a team or for personal fitness? Do you play any other sports? This will help us match you with an athlete based on your shared skills.
Answer:
Do you have any special interests or talents?
Answer:
Reference:
Please list one person we can contact who will vouch for your professional skills. This can be a professor, the person who referred you to camp, an employer, etc.
Reference Name:
Reference Email or Phone Number:

Revised Form 11.7.2023

END of Questionnaire