



**CAMP HAVEN, INC  
VOLUNTEER APPLICATION**

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone#: \_\_\_\_\_

Address: \_\_\_\_\_

Emergency Contact #: \_\_\_\_\_ Who? \_\_\_\_\_

How did you hear about Camp Haven? \_\_\_\_\_

What special skills and/or talents would you like to contribute to Camp Haven? (List):  
\_\_\_\_\_  
\_\_\_\_\_

What hours and days are you available to volunteer? \_\_\_\_\_

What types of activity would you like to volunteer? (Check all that apply):

- Fundraising projects       Meal preparation
- Mentoring
- Providing education on: \_\_\_\_\_ (topic)
- Administrative
- Other: \_\_\_\_\_

Other agencies and/or groups you have/currently volunteer at (list):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List two (2) references (name and phone contact):  
\_\_\_\_\_  
\_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_