Rules for volunteers under the age of 18 (not part of a group)

Please read over this information carefully and with a guardian present. Contact Lauren Unger, Camp Director with any questions you may have.

- All volunteers must attend a mandatory volunteer training.
- After the training the volunteer must stay with an authorized adult. (i.e. parent, older sibling, prearranged group supervision)
- If there is no one to supervise the volunteer must go home after training and return the Sunday morning of their week of service.

Training Dates for Summer 2017
June 10th 2017 (Preferred for underage volunteers)
June 17th 2017
June 24th 2017
July 1st 2017
July 8th 2017
July 15th 2017
July 22nd 2017
July 29th 2017

- All non group volunteers must turn in their cell phones to Camp Administration after lunch on Sunday and will have use of them each evening after campers are in bed. If a volunteer needs to be contacted during the day families may call the Camp Office – 1.800.419.6513 or the Camp Director, Lauren Unger – 740.610.6712.

- Volunteers under 18 planning to serve more than one week must contact Camp Echoing Hills with a parent in order to go over rules and expectations. Volunteer will also need to undergo a short interview process and provide a personal reference. (i.e. teacher, youth pastor, supervisor... etc)

- Volunteers must check in with full time staff throughout the day to ensure they are meeting camp expectations.

- Volunteers that are not meeting the expectation or of camp staff or if they are ill they will be sent home. A guardian will be called and asked to pick them up from camp.

If this will not be a possibility for the time of service please do not send your child to volunteer.
Volunteer Name: _________________________
Week(s) of service: _______________________

Volunteer Reference Form
(For volunteers under the age of 18 not serving with a group.)
Please return to Lauren Unger

Mail Address:
Camp Echoing Hills • 36272 CR 79 • Warsaw, OH. 43844 • Fax: 740.327.2333 • Email: lunger@ehvi.org

_________________ plans to serve at Camp Echoing Hills as a volunteer serving individuals with intellectual and developmental disabilities. They will have a range of tasks during their time at camp and are expected to give of themselves and build relationships with the special people we serve. Please take some time to consider this as you answer the questions below.

How do you know ________________________________?

Would they work well in a group setting? Please explain.
_____________________________________________________________________________________
_____________________________________________________________________________________  
_____________________________________________________________________________________  
_____________________________________________________________________________________  
_____________________________________________________________________________________  

Would you say they follow instruction well? Please explain.
_____________________________________________________________________________________
_____________________________________________________________________________________  
_____________________________________________________________________________________  
_____________________________________________________________________________________  
_____________________________________________________________________________________  

Do they have any sort of work experience? Please explain.
_____________________________________________________________________________________
_____________________________________________________________________________________  
_____________________________________________________________________________________  
_____________________________________________________________________________________  
_____________________________________________________________________________________  

Please explain why ______________________ would be a good fit as a volunteer at Camp Echoing Hills.
_____________________________________________________________________________________
_____________________________________________________________________________________  
_____________________________________________________________________________________  
_____________________________________________________________________________________  
_____________________________________________________________________________________  

Name if person filling out form ______________________ Date ________________________________
Signature _________________________________