

CACA Chinese Culture Camp 2010  
Youth Volunteer Application Form

Applicant must have completed the 9<sup>th</sup> grade in July 2010. Mail all three forms to: Youth Volunteer program; 29 Schubert Ave. Edison, NJ 08820. Post marked on or before **May 6, 2010**

*Note: Positions are limited; all applications will be considered and reviewed carefully. Decision will be made and notified via email. Incomplete applications will not be considered.*

Name: \_\_\_\_\_ Chinese name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_

High school name: \_\_\_\_\_ grade: \_\_\_\_\_

Phone: \_\_\_\_\_ cell: \_\_\_\_\_

eMail: \_\_\_\_\_ sn: \_\_\_\_\_ AIM Google

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Male Female  
Month day year

Were you a camper of this camp? yes no if yes, when? 2009 2008 2007 2006 2005

Membership:

Murray Hill Chinese School Mid-Jersey Chinese School Raritan Valley Chinese School

Union Chinese School Edison Chinese School CACA Teen Club Other (specify) \_\_\_\_\_

Commitments:

I agreed to serve the complete service period. July 26–July 30, 2010 8:15am to 5:30pm. initial \_\_\_\_\_

I agree to wear camp T-shirt during service period. T-shirt Size: S M L XL. initial \_\_\_\_\_

I have emailed my recent photograph to caca.counselors@gmail.com (Mandatory). initial \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Chinese Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Office Phone: \_\_\_\_\_

Chinese Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Medical Information:

The health record form must be filled out by the guardian (part 1) and the physician (Part 2).

Please also list all known allergies and medical conditions here: \_\_\_\_\_

Medical Insurance Carrier: \_\_\_\_\_ Policy No. /Group ID: \_\_\_\_\_

Emergency Medical Waiver: In case of emergency, permission is hereby granted that my child can be treated at nearby hospital as per discretion of Staff of CACA Chinese Culture Camp.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Signing Parent/Guardian: \_\_\_\_\_

Please Print

Chinese American Cultural Association  
Chinese Culture Camp 2010 Youth Volunteer

**Parental Consent Form**

In order for your child to volunteer with us, your consent and involvement is needed to allow him/her to have a productive experience. Please read and sign this parental consent form. If your child is under the age of 18, a parent/guardian signature is required in order for the application to be considered.

*I understand that my child, \_\_\_\_\_, wishes to be considered for a volunteer position and I hereby give my permission for them to serve in that capacity, if accepted by the CACA Chinese Culture Camp. I understand that they will be provided with orientation and training necessary for the safe and responsible performance of their duties and they will be expected to meet all the requirements of the position, including regular attendance and adherence to CACA Chinese Culture Camp policies and procedures. I understand that they will not receive monetary compensation for the services contributed.*

*I give permission and consent for \_\_\_\_\_ to allow photographs, videos to be taken during camp session activities. I further give permission and consent that any such photographs, videos may be published and used by the Chinese American Cultural Association®, to illustrate and promote the camp experience, CACA Chinese Culture Camp, or the Chinese American Cultural Association.*

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

Relationship to volunteer: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

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

