



# **Junior Camp Volunteer Sign-Up**

**St. John Neumann Catholic Church**

**Vacation Bible School**

**July 15-19, 2024**

**9 a.m. – 12:30 p.m.**

Calling all middle and high school students! We need YOUR HELP!

We are looking for **rising 6th – 12th graders** to help lead our activities at **Vacation Bible School** this summer. Below are the volunteer positions descriptions. All volunteers **must be available from 8:30 a.m. – 1 p.m. for the entire week of July 15 – 19. Service Hours (22 hours)** will be given for all volunteers requiring service hours. This is a great opportunity for teenagers to take their role as leaders in our parish and to enjoy a week sharing our Catholic faith with younger children through fun activities!

*\*Parental permission is required for all volunteers under 18 years old (see the other side).*

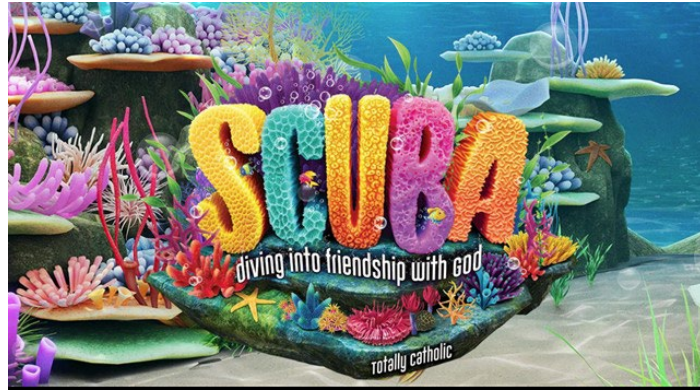
*\*\*All volunteers who will be 18 years or older by July 10th must comply with the Diocesan volunteer eligibility program, “Protecting God’s Children.” Please contact Phil Prinzevalli at [pprinzevalli@saintjn.org](mailto:pprinzevalli@saintjn.org) or 703-860-6156 if you need information on completing the program or verifying your status.*

**Please indicate your preference of the volunteer options by ranking them with a “1” (first choice) or “2” (second choice) in the boxes:**

- Crew Leader:** All elementary campers will be placed in a five-person crew with one teen crew leader. The crew leader’s job is to guide their crew from station to station, assist at each station’s activities, and help the crew join in the fun!
- Assistant Station Leader:** The assistant station leader’s job is to assist where necessary at a specific station (games, Bible adventures, crafts, movies). Unlike crew leaders, assistant station leaders stay in one location throughout the day and do not have a specific crew assigned to them.

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**Turn over to complete form**



## St. John Neumann Catholic Church VBS 2024 JUNIOR CAMP VOLUNTEER REGISTRATION FORM

All registered volunteers will receive a **SCUBA** Staff T-shirt!

Circle your size preference – Adult Size: S M L XL XXL

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Fall 2024 Grade: \_\_\_\_\_

Parent's Phone (accessible during VBS hours): \_\_\_\_\_

Teen Volunteer's E-Mail: \_\_\_\_\_

Parent's E-mail: \_\_\_\_\_

Emergency contact person during VBS Hours: \_\_\_\_\_

Cell Phone (accessible during VBS Hours): \_\_\_\_\_

***\*Parental Permission and Waivers on the next page***

Drop off your completed form at the Faith Formation Office.  
Contact Silvia Bustamante, [sbustamante@saintjn.org](mailto:sbustamante@saintjn.org) or 703-390-2348, with questions.

## Vacation Bible School 2023 Parent Permission and Waivers

**Parental Permission and Liability Release:** As parent/legal guardian of the participant named here, I give my permission to fully participate in Vacation Bible School from July 15, 2024, through July 19, 2024. I agree to indemnify and hereby release the Most Reverend Michael F. Burbidge Bishop of the Catholic Diocese of Arlington and his successors in office, as well as the Catholic Diocese of Arlington and all Diocesan clergy, employees, volunteers, and participating parishes and schools from any and all liability, claims, demands for personal injury, sickness and death, as well as property damage and expenses of any nature whatsoever which may be incurred by the undersigned of the participant resulting from said participant's involvement in the above mentioned event (including transportation to and from the event). Furthermore, I on behalf of the participant hereby assume all risk of personal injury, sickness, death, damage, and expenses resulting from said participant's involvement in the above-described event.

Parent Signature and Printed Name: \_\_\_\_\_

**Photo, Press, Audio, and Electronic Media Release:** I authorize St. John Neumann Catholic Church, its ministries, and its affiliated organizations and ministries (such as the Catholic Diocese of Arlington, its parishes, its schools and/or the Arlington Catholic Herald) to use and publish my child's photograph, video and/or audio recording for educational, news/community stories, illustration, and/or marketing purposes. (This could include, but is not limited to, bulletin boards in the parish, the parish bulletin, the parish website.) We will not use youth names without obtaining further permission.

Parent Signature and Printed Name: \_\_\_\_\_

**Informed Consent to Medical Treatment:** I request that in my absence the minor named here be admitted to any hospital or medical facility for diagnosis and treatment. I request and authorize physicians, dentists, and staff, duly licensed as Doctor of Medicine or Doctors of Dentistry or other such licensed technicians or nurses, to perform any diagnostic procedures, treatment procedures, operative procedures, and x-ray treatment of the above minor. I have not been given a guarantee as to the results of examination or treatment. I authorize the hospital or medical facility to dispose of any specimen or tissue taken from the above-named minor. I assume full responsibility for all costs of such treatment. Further, should it be necessary for the participant to return home due to medical, disciplinary, or other reasons, I do hereby assume responsibility for the participant's transportation home and any costs related thereto.

Parent Signature and Printed Name: \_\_\_\_\_