



Pine Lake Camp Chaperone Forms



Chaperone Information

Name: _____
(first and last name)

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone: _____ Email: _____

Chaperone Endorsement

***This section must be completed by your Corps Officer/Executive Director/Supervisor**

I _____
(CO/supervisor - first & last name, title, and position)

from _____
(MU name and location)

recommend the following individual as a Camp Chaperone for the Pine Lake Camp indicated below.

(camp chaperone – first & last name)

(camp name & dates)

(signature – camp chaperone)

(date)

(signature – CO/supervisor)

(date)



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Code Of Conduct Agreement

I, _____, understand and agree to
(first & last name)

abide by the following Pine Lake Camp Chaperone Code of Conduct:

- I agree to cooperate with and support other camp staff and volunteers.
- I agree to be available to the campers for their spiritual, emotional, and physical needs.
- I agree to be on time for and participate in all activities with the campers as required.
- I agree to not use tobacco, drugs, or alcoholic beverages.
- I agree to store and use my cell-phone and other electronic devices in the Canteen or The Palms **only** for the duration of my time at camp.
- I agree to wear clothing that is modest.
- I agree to not use profanity or engage in inappropriate conversations.
- I agree to not place myself in compromising situations with any other staff, volunteer, or camper.
- I agree to write down and report to the Program Director any and all disclosures made to me by campers or staff/volunteers of self-harm, abuse, or other serious concerns.
- I agree to participate in designated training sessions when provided to help in my assignment.
- I agree to fulfill the volunteers hours agreed upon.
- I agree to maintain strict confidentiality.
- I agree to provide my time and service without remuneration.
- I agree to support the principles of The Salvation Army and the implementation of the mission of The Salvation Army while on duty as a volunteer.

(signature)

(date)



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The Salvation Army
Summer Ministry Team – PINE LAKE CAMP
Chaperone Position Description

POSITION	Chaperone
OBJECTIVE	Oversee cabin group or assist with a cabin group as assigned by Assistant Program Director.
SUPERVISION	Head Cabin Leader, Assistant Program Director Administration & LIT – indirectly Program Director and Camp Director
RESPONSIBILITIES	<ul style="list-style-type: none">◆ Actively participate in the camp program, and strive for its smooth running.◆ Oversee cabin group of up to 8 campers or assist an Assistant Cabin Leader.◆ Work closely with Head Cabin Leader in assigned duties.◆ Ensure the health, safety, emotional wellness and personal development of campers.◆ Encourage the participation of each camper in all activities.◆ Maintain and enforce the rules and regulations of the camp at all times.◆ Guide the spiritual growth of campers through love, understanding, patience and example.◆ Broaden the interests of the campers and be innovative in offering cabin activities.◆ Assist with cabin devotions and be willing, at any time, to lead a child to Christ.◆ Participate in camp fire as required.◆ If acting as a Chaperone Cabin leader, ensure that Camper Spirituality Forms are completed accurately and submit to Assistant Program Director for review at the end of the camp session.◆ If acting as a Chaperone Cabin Leader, ensure that Camper Feedback Surveys are completed and submit to Assistant Program Director for review at the end the camp session.◆ Immediately notify Head Cabin Leader of any disclosure of abuse. Promptly create a written report disclosing required information on an Incident Report Form and follow relevant policy and procedure.◆ Actively participate in Options and facilitate as required.◆ Be flexible and have a good disposition.◆ Work within the total camp program and cooperate with staff members.

Minimum Qualifications:

- ◆ Age 18
- ◆ Current and clear Criminal Police Check
- ◆ Salvation Army Abuse Screening
- ◆ Current Covid-19 Vaccination

Chaperone

Date Signed



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THE SALVATION ARMY
Canada and Bermuda Territory

Date Signed

CODE OF CONDUCT FOR WORKING WITH CHILDREN, YOUTH AND VULNERABLE PERSONS

The Code of Conduct outlines specific expectations of personnel as we strive to accomplish our mission together.

The Salvation Army is committed to creating an environment that is safe, nurturing, empowering, and that promotes growth and success. No form of abuse will be tolerated, and confirmed abuse may result in immediate dismissal from involvement with children, youth and vulnerable adults within The Salvation Army. The Salvation Army will fully co-operate with authorities if allegations of abuse are made that require investigation.

The Code of Conduct outlines specific expectations of personnel as we strive to accomplish our mission together.

1. Children, youth and vulnerable persons will be treated with respect at all times.
2. Children, youth and vulnerable persons will be treated fairly regardless of ancestry, race, gender, sexual orientation, age, disability, creed or religion.
3. Staff, volunteers and leaders will follow Salvation Army policies regarding contact with children, youth and vulnerable persons outside of Salvation Army programs.
4. Staff, volunteers and leaders will adhere to uniform standards of displaying affection as outlined in this manual.
5. Staff, volunteers and leaders will avoid affection with children, youth and vulnerable persons that cannot be observed by others.
6. Staff, volunteers and leaders will not use profanity or tell off-colour jokes.
7. Staff, volunteers and leaders will not discuss with or around children, youth or vulnerable persons any conversation about their personal sexual encounters or involve them in their personal problems or issues."
8. Staff, volunteers and leaders will not date or become romantically involved with children, youth and vulnerable persons.



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9. Staff, volunteers and leaders will not use or be under the influence of alcohol or illegal drugs in the presence of children, youth and vulnerable persons.
10. Staff, volunteers and leaders will not have sexually oriented materials, including printed or online pornography, on Salvation Army property.
11. Staff, volunteers and leaders will not have secrets with children, youth or vulnerable persons.
12. Staff, volunteers and leaders will not stare at or comment on the body of a child, youth or vulnerable person.
13. Staff, volunteers and leaders will not engage in inappropriate electronic communication with children, youth or vulnerable persons.
14. Staff, volunteers and leaders are prohibited from working one-on-one with a child, youth or vulnerable person in a private setting. Staff, volunteers and leaders will use common areas when working with an individual child, youth or vulnerable person.
15. Staff, volunteers and leaders will not abuse a child, youth or vulnerable person in any way including (but not limited to) the following:
 - Physical abuse:* hitting, spanking, shaking, slapping, unnecessary restraints
 - Verbal abuse:* degrading, threatening, cursing
 - Sexual abuse:* inappropriate touch, exposing oneself, sexually oriented conversations
 - Mental abuse:* shaming, humiliation, cruelty
 - Neglect:* withholding food, water, shelter
16. Children and youth are prohibited from engaging in the following:
 - Hazing*
 - Bullying*
 - Derogatory name-calling*
 - Games of Truth or Dare*
 - Ridicule or humiliation*
 - Sexual activity*
17. Staff, volunteers and leaders will report concerns or complaints about other personnel, other adults or youth to a supervisor or the territorial abuse advisor at 705-764-0692



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18. Staff, volunteers and leaders will report allegations or incidents of abuse to the proper provincial/territorial authority. Please refer to the applicable provincial/territorial guidelines regarding mandated reporting.



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Canada and Bermuda Territory**

**ACKNOWLEDGEMENT THAT I HAVE READ THE CODE OF CONDUCT FOR
WORKING WITH CHILDREN, YOUTH AND VULNERABLE PERSONS**

I _____ acknowledge that I have read and agree to
(PRINT NAME)
the CODE OF CONDCUT FOR WORKING WITH CHILDREN, YOUTH AND VULNERABLE ADULTS.

SIGNATURE

DATE



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Canada and Bermuda Territory

ACKNOWLEDGMENT OF ABUSE PREVENTION POLICY MANUAL

I have read and agree to comply with The Salvation Army's Abuse Prevention Policy Manual.

Signature of Staff or Volunteer

Date



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STATEMENT OF APPLICANT TO WORK WITH CHILDREN AND YOUTH

Last Name	_____
First Name	_____
Date Submitted	_____
Statement of Applicant	_____
Armatus Online Abuse Prevention	
Training Complete	_____
Police Check	_____

It is essential that The Salvation Army provide a safe and secure environment for children who participate in its programs and who use its facilities. To help achieve this objective, this Statement will be completed by:

- a) Candidates to serve as officers.
- b) Officers, auxiliary-captains and envoys who may, by virtue of their responsibilities, be in proximity to children or youth in Salvation Army program activities.
- c) Applicants for employment and volunteer positions in The Salvation Army (including local officers) which involve ongoing contact with children or youth.
- d) Applicants for employment and volunteer positions, who may, by virtue of their job responsibilities, be in proximity to children or youth in Salvation Army program activities.

I. Personal Information

Name: _____
 LAST FIRST MIDDLE

Other Surnames: _____, _____, _____

Address: _____
 No. Street Town/City Province P/C

Telephone Numbers:
Home: () _____
Work: () _____



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Mobile: () _____

II. Training For Work with Children and Youth

List formal education and on-the-job training. Briefly describe the extent and nature of this education/training and identify the institution which provided this education/training. Those in category (d), described above, are not required to answer this question. If you are in category (d), mark an "x" in the following box and proceed to complete the application form.

Reference Contact Name(s): _____

III. Prior Work With Children and Youth

List all positions you have held as a volunteer or an employee that involved working with children or youth. Provide the name of each organization; indicate the approximate dates during which you held each position; and identify your reason for leaving each position.

Reference Contact Name(s): _____



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IV. Criminal Record

Have you ever been convicted of an offence which involved the abuse or endangerment of a child or youth? [You may answer "No" if you were convicted of an offence for which pardon was granted under the *Criminal Records Act* (Canada).]

Yes _____ No _____

If yes, provide details of all such convictions: _____

V. Authorization

1. I hereby authorize The Salvation Army to conduct whatever searches it deems necessary, including a Police Records Search, to confirm that the information set out above is accurate and complete.
2. I hereby authorize The Salvation Army to conduct a search of all Child Abuse Registries in Canada to confirm that I am not listed as a child abuser.
3. I hereby agree that, immediately upon request, I shall provide The Salvation Army with whatever consents and authorizations it requires to conduct the searches that are contemplated in paragraphs 1 and 2 above.
4. I hereby authorize any individual or organization, including any organization which maintains a Child Abuse Registry, and their agents, employees and representatives, to provide The Salvation Army with any information which they have regarding my character and fitness for work with children and youth. I hereby release all such organizations and individuals from all claims, demands, actions, and causes of action whatsoever, which may in any way arise out of the provision of such information to



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The Salvation Army.



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**THE SALVATION ARMY
Canada and Bermuda Territory**

STATEMENT OF APPLICANT TO WORK WITH CHILDREN AND YOUTH

SIGNATURE OF WITNESS

APPLICANT

NAME (PLEASE PRINT)

DATE

DATE



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The Salvation Army Pine Lake Camp Medical Form

GENERAL INFORMATION

Name (first & last): _____

Birth Date: ____ / ____ / ____
mm / dd / yyyy

Alberta Health Care No.: _____

Other Health Coverage: _____
Plan Holder Number

<u>Please contact the following person in case of an emergency:</u>	
Name _____	Relationship _____
Address _____ _____	Home Phone _____
	Bus. Phone _____
Family Doctor _____	Office Phone _____

HEALTH INFORMATION

1. Do you presently have, or have you recently had, any infectious disease? Yes _____ No _____
If yes, please specify the type of illness and provide a doctor's certification indicating you are now fit for camp.

2. Have you recently been exposed to an infectious disease (e.g. measles)? Yes _____ No _____
If yes, please specify the type of disease and when exposed.

3. Are your immunizations up to date? Yes _____ No _____



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4. Please specify any allergies (ex: medications, food, insect bites, etc.) and describe your reaction:

5. All medication which you must use, or may require during the camp period must be clearly labelled the type of medication, your name and specific instructions for use. For the safety of the campers and others all medication is to be kept and administered by the Camp Nurse. Please list any medication(s) that you know you will use during the employment period.

Name Of Drug	Reason For Use	Dosage/Time
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

6. Please state anything not previously mentioned of which the Camp Director and/or Camp Nurse should be aware of:

Signature of Employee/Volunteer

Date