



# VOLUNTEER PACKET

*Thank you for choosing to volunteer for Camp Apostles!*

Our hope for this special week is for everyone involved (teen participants, parents, young adults and high school counselors) to go away with a deeper understanding of God's love and a greater sense of belonging to the Basilica of Saint Mary community.

This packet will help you understand everything you need to know for the week of Camp Apostles. After thoroughly reading each section, **please return the *Volunteer Commitment Form* and the *Volunteer Risk Awareness Agreement* to Mariane Leite ([mleite@stmaryoldtown.org](mailto:mleite@stmaryoldtown.org)) or to the Parish Office (313 Duke St).**

## General Information

**What:** *The purpose of Middle School Camp Apostles is to make the Catholic Church matter by inspiring teens to become missionary-disciples in the Basilica of Saint Mary community.*

Camp Apostles is a day camp for middle school teens that involves fun activities, small groups, service projects, outdoor activities and more! It is best described as a week of faith, fun, friends and service!

**When:** The camp runs daily from July 23<sup>rd</sup> to July 27<sup>th</sup>. Time varies depending on each specific day. More information on volunteer time commitment is below.

**Where:** On Monday it will take place in and around the Basilica School of Saint Mary. On Tuesday it will take place at The Saint John Paul II National Shrine, with bus departure from the Basilica School of Saint Mary. On Wednesday it will take place at various service sites. On Thursday we will depart from the Basilica School of Saint Mary by bus for a white-water rafting trip.

## WE NEED YOU!

In order for Camp Apostles to be a truly memorable experience, we need all the help that we can get! That means we need parents, young adults and high school teens within the parish to come out and volunteer for various roles throughout the week. All volunteers must be Virtus-certified/OPCYP compliant.

The following are the volunteer roles that we will need covered in order to have a successful week:

### **Food Committee**

- Help prepare and set up food for breakfast one of the mornings during camp
- Help clean-up after breakfast and set out snacks for the teens later in the day

### **Crew Leader**

- Must be present 8:30am-3:30pm on Wednesday
- Assigned to 5-10 kids making up your crew (assisted by high school counselor)
- Will lead & work with crew throughout the day at work sites
  - o Sites include Christ House, St. Martin de Porres, etc.



- Must be over the age of 21
- You may also volunteer to be a small group leader if you take on this role

**White Water Rafting Chaperone**

- Must be present the entire day Thursday, 7:30am-5:30pm
- Supervise teens during white water rafting and hiking

**Small Group Leader**

- Must be present at entire Camp Apostles, July 23<sup>rd</sup>-27<sup>th</sup>
  - o 7:30am-5pm days
- Some conflicts during the week will be accepted
- Lead a gender-specific discussion group with another leader
- Participate in program activities
- Participate in white water rafting

If you are willing and ready to commit to one of these roles, we ask that you please sign and return the last two pages of this packet to Mariane Leite ([mleite@stmaryoldtown.org](mailto:mleite@stmaryoldtown.org)). An official schedule will be sent to you after the forms have been returned.

***Please note that we are grateful for any commitment that you can make for the week!***

***Some help is better than no help!***



## **VOLUNTEER RISK AWARENESS AGREEMENT**

I, \_\_\_\_\_, will offer my time and services as a volunteer to the **Basilica of Saint Mary Youth and Young Adult Apostolate**. I hereby acknowledge and state that I am not their employee, nor am I eligible for any compensation or benefits provided to an employee. As a volunteer, I recognize and acknowledge that I am not being compensated in any manner for services rendered. I further recognize and acknowledge that I am not provided with any form of workers' compensation or disability insurance coverage or other similar insurance program. As a participant in this program, I hereby state that I am aware of and accept the risk inherent in the above program activity.

**Liability Coverage:** I have been informed that the Diocesan Insurance Program maintains comprehensive general liability insurance, as well as directors and officers insurance, to protect me as a "Covered Person" for my negligent actions covered under these policies, only while acting in the scope of my defined responsibilities, which may result in damage or injury to another person or persons. However, I acknowledge these policies will not protect me for criminal or intentional acts committed by me. I further understand that there may be no insurance coverage for allegation of negligence in claims of sexual abuse activity involving a minor, which would include hiring, retention, and/or supervision of any kind.

**Use of Vehicles:** I further acknowledge, with regard to any personal vehicle driven by me as a volunteer that in the event of an accident, there is no coverage afforded to me through the Diocesan Master Insurance Program for physical damage sustained to any vehicle involved or liability incurred by me while operating my vehicle.

**Reimbursement of Medical Expenses:** I recognize and acknowledge there is volunteer accident coverage as well as medical payments coverage available to me in order to compensate me for expenses I incur from deductibles, co-payments, prescription drugs, or medical services not covered through my own health insurance provider(s) for any injury I sustain as a result of performing my services. I agree that any medical coverage(s) I have will be primary and under no circumstance will I seek any contribution from the Parish, or their insurer, for any medical expenses until all underlying coverage that may or may not apply is exhausted. I acknowledge that the circumstance and levels of coverage may vary and that the Diocese is under no obligation to continue to maintain any such coverage for my medical expenses.

**Informed Consent to Medical Treatment:** In the event of an injury, I hereby give the Basilica of Saint Mary full authority to take whatever action they feel is warranted under the circumstances regarding my health and safety if I am not in a condition to give informed consent including but not limited to the application of emergency medical procedures, the admittance to a hospital, or the care of a medical professional at my expense.

**Safety:** Further, I agree to follow all procedures and safety precautions set forth by the Diocese and the Basilica of Saint Mary in addition to ensuring the protection of minors from sexual misconduct and/or child abuse in order to conform with the requirements adopted by the United States Conference of Catholic Bishops and Catholic Diocese of Arlington Policy on the Protection of Children/Young People and Prevention of Sexual Misconduct and/or Child Abuse.

**Photo:** Also, I authorize the Diocese of Arlington to use my picture or video recording for educational and/or marketing purposes. If you wish not to be photographed or filmed you should notify the Office of Youth Ministry in writing.

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Signature of Volunteer

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Date

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Signature of Parent/Legal Guardian if Volunteer is less than 18 years old

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Date



# VOLUNTEER COMMITMENT FORM

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

Please check:     High School -Grade\_\_\_\_\_     Young Adult                      Virtus Certified?     Yes     No

Best Phone: \_\_\_\_\_    Email: \_\_\_\_\_

Please check the role(s) that you are willing to fill. Please take into consideration that some roles are more or less time consuming than others.

- Food Committee**
  - *Check all the times that you are available. You will only be scheduled to help 1 time.*
    - Monday, 8:00-9:30am
    - Tuesday, 8:00-9:30am
    - Thursday, 7:30-8:30am
  
- Crew Leader**
  - Wednesday, July 25<sup>th</sup>, 8:30AM-3:30PM
- White Water Rafting Chaperone**
  - Thursday, July 26<sup>th</sup>, 7:30AM-5:30PM
- Small Group Leader**
  - Monday, July 23<sup>rd</sup> – Thursday, July 26<sup>th</sup>, 7:30AM-5:00PM Daily

Please write any specific conflicts that you will have during the week so that we can make sure we have enough volunteers for each event:

Day: \_\_\_\_\_ Time Leaving: \_\_\_\_\_ Time Returning: \_\_\_\_\_

Day: \_\_\_\_\_ Time Leaving: \_\_\_\_\_ Time Returning: \_\_\_\_\_

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*Signature of Volunteer*

*Date*

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*Signature of Parent (if under 18)*

*Date*