

Congregational Christian Council of Maine  
Summer Camp Program 2017  
Andrea Cooper, Camp Administrator  
c/o EOCC 38 Johnson Mill Rd.  
Orrington, ME 04474  
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February 13, 2017

Dear Camp Winniauguamauk Staff Applicant,

Given the current blizzard conditions, what better time is there to look forward to camp!

Camp Winni 2017 will be held July 23-29, 2017 (staff will arrive on Saturday, July 22<sup>nd</sup>). We ask you to prayerfully consider serving God by working with our youth at Camp Winni. Staff fees have been covered by a generous donation by the CCC-ME in appreciation for your willingness to give your time to the camping program.

The completed staff application packet should include the following: completed application, medical form, Criminal Records Check form, and for staff members who may bring pre-camper aged children, pre-camper forms and pre-camper fee of \$ 40.00 (checks made payable to CCC-ME) . If any of your children are camper age and plan on attending camp, please enter their names on your application form. The requirements to qualify for the 50% fee reduction for your camper children are: 1. You must be the parent/guardian of the camper, and 2. You must volunteer the full week of camp. Please mail your staff application packet directly to me at the above address by April 30, 2016.

Staff will arrive at camp on Saturday July 23, 2017 between 3 and 5pm. It is important you plan to arrive at camp no later than 5:00 p.m. as we will be having a staff meeting to introduce staff and provide information regarding the upcoming week, followed by a mandatory child protection training for all new staff.

It is the purpose of the CCC/ME to provide a safe environment for our staff and campers. Insurance guidelines have mandated we institute child protection policies and procedures. We require national security checks on all camp staff. In order to obtain the national security checks, you will need to fill out the Criminal Records Check form and return it with your staff application.

I look forward to hearing from you soon! If you have any questions, please feel free to call me using the phone number in the header.

Yours in Christ's Service,

Andrea Cooper, Camp Winni Administrator 2017

**CONGREGATIONAL CHRISTIAN COUNCIL OF MAINE SUMMER CAMP STAFF  
APPLICATION – DUE APRIL 30, 2017**

**Mail your completed application(s) to:  
Andrea Cooper, c/o EOCC, 38 Johnson Mill Rd, Orrington, ME 04474**

The CCC/ME summer camp program is held at Camp Winniauguamauk in Brooksville, Maine. Staff is expected to work the FULL WEEK of camp. Staff who are PARENTS/LEGAL GUARDIANS of campers attending camp qualify for a 50% reduction in their camper's fees. Staff receives no pay but many benefits: minimal room and board and daycare costs for their pre-camper aged children (\$40), 50% fee-reduction for their camper aged children, and most importantly, the satisfaction of serving God in a great camping program. Please complete and mail your staff application, medical form, criminal records check authorization form, pre-camper forms and fee (if applicable) to the Camp Administrator (at address listed above).

**NAME:** \_\_\_\_\_ **M** \_\_\_ **F** \_\_\_ **DOB:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**TOWN/CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**Phone number (day):** \_\_\_\_\_ **(eve):** \_\_\_\_\_ **(cell):** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Names/ages of children:** \_\_\_\_\_

**In case of notify:** \_\_\_\_\_

**Relationship to staff member:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**T- SHIRT SIZE:** Sm \_\_\_ Med \_\_\_ Lrg \_\_\_ XL \_\_\_ XXL \_\_\_ XXXL \_\_\_

**Previous Staff Experience:** Y \_\_\_ N \_\_\_ **List experience and yrs:** \_\_\_\_\_

**POSITION REQUESTED (no guarantees)** \_\_\_ Girl's cabin counselor \_\_\_ Boy's cabin counselor  
\_\_\_ Daycare \_\_\_ Arts and crafts \_\_\_ Athletics \_\_\_ Kitchen/Dishwasher \_\_\_ Nurse\*  
\_\_\_ Waterfront\* **(\*PLEASE INCLUDE COPY OF CURRENT CERTIFICATION WITH APPLICATION)**

**It is the purpose of the CCC/ME to provide a safe environment for our staff and campers. Insurance guidelines have mandated we institute child protection policies/procedures. We require national security checks on all camp staff; please complete the National Security Background Check Authorization Form and return with your completed application packet.**

**Church: \_\_\_\_\_ Pastor: \_\_\_\_\_  
(Camp Administrator may call your Pastor for background/references as needed.)**

**If not a member of a CCC/ME church or if you are a Pastor, please list the names and phone numbers of two references: \_\_\_\_\_**

**Have you been convicted on any crimes? (not including traffic violations) Y\_\_\_ N\_\_\_ IF YES, EXPLAIN \_\_\_\_\_**

**Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**

## MEDICAL INFORMATION – STAFF APPLICANT

*Please submit this form with your application*

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_

DATE OF LAST: Tetanus booster \_\_\_\_\_ physical exam \_\_\_\_\_

NAME OF PHYSICIAN: \_\_\_\_\_ PHONE: \_\_\_\_\_

HEALTH INSURANCE COMPANY \_\_\_\_\_ POLICY/GROUP \_\_\_\_\_

ALLERGIES TO (please list and describe the nature of the reaction):

Medicines: \_\_\_\_\_

Food: \_\_\_\_\_

Other: \_\_\_\_\_

DISABILITIES: Are there any medical reasons why this person may not fully participate in all camp activities? N\_\_ Y\_\_ Explain: \_\_\_\_\_

MEDICAL CONDITIONS (Please list all): \_\_\_\_\_

MEDICINES BROUGHT TO CAMP:

If you are a cabin counselor, all medicine brought to camp MUST be given to the camp nurse, labeled with the original RX label, dosage, instructions, staff member's name, doctor's name and dates. THIS APPLIES TO ALL MEDICINES. We must have proper labeling to store medications, so please check all medication prior to leaving home. No medications may be kept in camper cabins. Staff living in staff dorms or motel may keep their medications in their rooms or have the nurse store them in the infirmary.

In case of emergency, notify: \_\_\_\_\_

Relationship to staff member: \_\_\_\_\_

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

The nurse of the Congregational Christian Council of Maine Summer Camp has permission to treat me with first aid or if necessary, to take me to Blue Hill Hospital for treatment. I further agree to assume financial responsibility for any emergency treatment.

Staff Applicant Signature: \_\_\_\_\_

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

## **CAMP WINNIAUGUAMAUK SUGGESTED STAFF EQUIPMENT LIST**

**IMPORTANT:** Please bring a refillable water bottle

### **BEDDING**

Sleeping bag or bedroll  
Extra blanket, just in case  
Pillow  
Twin sheet (optional)

### **CLOTHING**

6-7 changes of everything like shorts, sports shirts, socks, underwear, etc.  
3 pairs of long pants or jeans  
1 rain jacket or poncho  
2 sweatshirts or sweaters  
1 pair of sneakers and one additional pairs of shoes (sneakers, hiking boots, etc)  
Water shoes or aqua socks for use at the waterfront Sandals (optional)  
Bathing suit-no bikinis allowed by staff or campers  
Pajamas "Nice" outfit for dance and senior night (optional)

### **PERSONAL ARTICLES**

Towels and facecloth  
Toiletries (soap, shampoo, toothbrush, toothpaste, etc)  
Pen or pencil, notebook  
Bible (bring your own or borrow one from camp)  
Flashlight  
Camera  
Stamps and writing paper  
Reading materials, cards, games for quiet time  
Insect repellent  
Sunscreen  
Clothesline or drying rack  
Small fan (optional)  
Items relating to camp theme: (decorations for cabin, costumes for skit, etc.)  
Alarm clock (campers are not allowed to bring these, so if you want a clock, you must bring one)

**IMPORTANT:** PETS ARE NOT ALLOWED AT CAMP AT ANYTIME