



**Volunteer General and Emergency Contact Form**  
**SOCCER SKILLS CAMP – July 8–12, 2024 - 8:15am–3:30pm**

**PLEASE PRINT CLEARLY and COMPLETE BOTH PAGES**

Name \_\_\_\_\_ Sex: M F

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Cell #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Birthday: (MM/DD/YYYY) \_\_\_\_\_ Age: \_\_\_\_\_ Grade next fall: \_\_\_\_\_

Adult Size Soccer Jersey: S M L XL

Provincial Health Card Number#: \_\_\_\_\_

Photo Authorization (not for outside publication): YES NO

**EMERGENCY CONTACT:**

Parent/Guardian Name (if under 18 yrs.): \_\_\_\_\_

Telephone #'s: Home #: \_\_\_\_\_ Work #: \_\_\_\_\_

Cell #: \_\_\_\_\_ E-mail: \_\_\_\_\_

Name of Family Physician: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact Relationship to Volunteer: \_\_\_\_\_

**HEALTH INFORMATION:**

Do you have any severe allergies? (Bee stings, food, penicillin, other drugs) YES NO

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Do you have any life-threatening allergies? YES NO

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Are you bringing any medication with you? (Antibiotics, ventilator, Ritalin) YES NO

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Do you have any physical, emotional, mental or behavioral concerns or limitations that we should be aware of?                      YES    NO

If yes, please explain: \_\_\_\_\_

Precautions are taken for the safety and health of all our soccer camp participants, but in the event of accident or sickness, Elmvale Community Church, its staff, and its volunteers are hereby released from any liability. In the event that you require special medication, x-rays or treatment, the parents/guardians will be notified immediately.

**Volunteer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**AVAILABILITY:**

If you are not available every day for camp, please explain your availability below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**HIGH SCHOOL 40 VOLUNTEER HOURS:**

Are you hoping to log hours for your High School Volunteer Requirement:                      YES    NO