1. What is Camp Smiles?

Camp Smiles is a week-long overnight camp for children ages 6-14 with cerebral palsy or similar neurological disorders. Volunteers work one on one with a camper and act as their buddy and personal care giver for the week. Each day campers participate in awesome outdoor camp activities such as rock climbing, fishing, paint ball, karaoke, swimming, and many more activities that have all been adapted to fit the needs of each camper. We host about 60 campers during the week at Camp For All, an adapted camping facility in Burton, TX. Camp Smiles is only offered for one session during the summer; the 2019 dates are June 29th-July 5th for volunteers. All volunteers must be 16 years of age or older to volunteer at Camp Smiles.

2. How do I apply to volunteer for Camp Smiles?

- Fill out an online application through the Active website. Applications can be found on the Camps & Recreation page of the Easter Seals website or by contacting Kenzie Richard at MRichard@eastersealshouston.org
- Sign and return the Camp For All release form. If you are under the age of 18, please have your parent or guardian sign for you. This form is available on Active- you can sign immediately when registering OR you can scan and return the form by e-mail at MRichard@eastersealshouston.org
- If you are over the age of 18, you will receive an e-mail from ‘Verified First’ asking you to fill out information for a background check. Please submit your information as soon as possible to complete your background check.
- A phone interview will be required for all new volunteers. Interviews will be held February 18th-March 8th. Please sign up for a time using the Calendly link, here: https://calendly.com/escamps
- All new volunteers are strongly encouraged to sign up for one of our trial volunteer opportunities, hosted from February to the middle of March. These dates are opportunities for new volunteers to get experience working with individuals with disabilities and to show your interest in volunteering with Easter Seals. Sign up to volunteer with our Family Day Out program or the adult program at the Calendly link above.
- All volunteers will receive an e-mail confirming their acceptance, denial, or waitlisted spot as a volunteer for Camp Smiles on March 30th.

3. Is there an orientation for volunteers?

Yes! There are multiple training dates before camp starts. On Saturday, June 15th, we will have an in-person orientation and Meet & Greet in Houston. This session is mandatory for new volunteers, and strongly encouraged for returning counselors. This orientation will help prepare you for Camp Smiles and your responsibilities during the week; the Meet & Greet is an opportunity to meet your “buddy” and their family! On June 29th, we will meet again at Camp For All and have a day of training before the campers arrive on Sunday.

If you would like to have more opportunities for volunteering or working with individuals with disabilities prior to camp, please consider volunteering with one of our other programs!
4. Do volunteers get paired one to one with a camper?  
What is a buddy?

Yes, most volunteers will get paired one to one with a camper. Each volunteer will have the opportunity to review their camper’s application and have an understanding of their needs before camp starts. Volunteers should be prepared to assist their camper with feeding, bathing, toileting, and other needs. “Buddies” are the pair between 1 camper and 1 counselor. There will be up to 7 campers and 8 counselors (including one head counselor) in each cabin, and there should always be enough hands to help out!

5. Can I receive service hours for volunteering with Camp Smiles?

Yes! Camp Smiles is 135 hours of service for the week. Easter Seals will provide service hour verification forms at the end of camp. Volunteers are welcome to bring/send other forms to be signed by the camp director.

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Houston Orientation/ Meet and Greet</td>
<td>June 15th</td>
<td>Westbury United Methodist Church</td>
</tr>
<tr>
<td>Volunteer Orientation</td>
<td>June 29th-June 30th</td>
<td>Camp For All</td>
</tr>
<tr>
<td>Camp Smiles</td>
<td>June 30th-July 5th</td>
<td>Camp For All- 6301 Rehburg Rd, Burton, TX</td>
</tr>
</tbody>
</table>
CAMP FOR ALL FOUNDATION
CAMP RELEASE FORM

A. This agreement must be read and signed for you/your child to be eligible to attend Camp Smiles at Camp For All.

Your/Your Child’s Name: ___________________________________________________________

I. PARTICIPATION CONSENT

I understand and certify that my/my child’s participation in Camp Smiles and its activities at Camp For All is completely voluntary. I have familiarized myself with the Camp Smiles program and activities at Camp For All in which I/my child will be participating. I recognize that certain hazards and dangers are inherent in these activities, which may include, but not limited to, the activities of horseback riding, high and low elements ropes course, swimming, archery, riflery and canoeing. I acknowledge that although Easter Seals and Camp For All have taken safety measures to minimize the risk of injury to camp participants, Easter Seals and Camp For All cannot insure or guarantee that the participants, equipment, premises or activities will be free of hazards, accidents or injuries. I recognize and have instructed my child in the importance of knowing and abiding by the rules, regulations, and procedures Camp Smiles at Camp For All. Further, I have received approval from a doctor authorizing me/my child to participate in the Camp Smiles activities at Camp For All. I also agree to inform Easter Seals of any activities in which I/my child may not participate.

II. LIABILITY RELEASE

I, the undersigned, understand that occasionally accidents occur during camp activities and that participants may sustain serious personal injury and property damages as a consequence thereof. Knowing the risks of camp activities, nevertheless, I agree to assume those risks and by signing this liability release, I intend to legally bind myself, my minor children, my heirs, executors, and administrators. I hereby release and forever discharge Easter Seals and Camp For All, and any of their officers, directors, employees, and agents from all claims, causes of action or damages arising out of any injury, illness, or loss of any kind, known or unknown, including but not limited to injuries to property or person, to me/my child during or related to my/my child’s attendance at Camp Smiles at Camp For All.

III. MEDIA RELEASE

I hereby give Easter Seals and Camp For All the right to interview and/or to take photographs, audio or audio-visual recordings of me/my child to be used in promotional, educational or fundraising materials including, but not limited to videotapes, pamphlets and brochures. I understand my/my child’s name may be used in connection with these materials. By signing this media release, I intend to legally bind myself, my minor children, my heirs, executors and administrators. Easter Seals and Camp For All shall have the right to use photographs or other images of me/my child in promotion, educational or fund-raising materials. I acknowledge that Easter Seals or Camp For All shall have all rights of copyright in and to such photographs and videotapes and may use such copyright fully. I also hereby release Easter Seals and Camp For All and its officers, agents and employees from all liability connected with the taking and use of these materials as is authorized by Easter Seals and Camp For All. In addition, I waive all rights, interest or claims for payment in connection with any exhibition or release of these materials. This consent is voluntary, and I give it in the interest of public information, education, the furtherance of the goals of these institutions, or other lawful purposes. I acknowledge that I have legal authority to sign this form on behalf of the minor whose name is mentioned above.

X__________________________________________________________
Parent/Guardian/Self Signature Date
__________________________________________________________
Date

__________________________________________________________
Printed Name

__________________________________________________________
Email

__________________________________________________________
Address

__________________________________________________________
City

__________________________________________________________
State

__________________________________________________________
Zip