

## Volunteer Application

## Camp Celiac – Pennsylvania 2026

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

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

Gender: \_\_\_\_\_ DOB.: \_\_\_\_\_

How did you hear about Camp Celiac: \_\_\_\_\_

Are you living gluten-free?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Any experience or interest working in a commercial kitchen setting?	YES	NO
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Any food restrictions other than gluten?					

### Questions

Why are you interested in volunteering at Camp Celiac?

\_\_\_\_\_

Do you have a child planning to attend camp? If so, please give their gender and age.

\_\_\_\_\_

Do you have any experience working with children?

\_\_\_\_\_

Campers range from 8 to 16 years old. Do you have a preferred age group?

\_\_\_\_\_

Camp Celiac has a limited cell phone policy to help everyone be fully immersed in the camp experience. Will having very limited access to your phone/ internet be a problem?

\_\_\_\_\_

Camp will require you to be highly active for 6 days. This will include lots of time outside, swimming, following a busy schedule and dealing with the weather elements. Do you have any physical restrictions?

\_\_\_\_\_

Do you have any other volunteer experience?

\_\_\_\_\_

## References

*Please list two references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

Address: \_\_\_\_\_

## Employment History or Attach Resume

Company: \_\_\_\_\_

Job Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Company: \_\_\_\_\_

Job Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

## Disclaimer and Signature

**Potential volunteer understands that this information will be held in confidence and that they will be notified by a Director of Camp Celiac if a volunteer position is available. This would then involve phone interviews and the submission of a full Background Check.**

*I certify that my answers are true and complete to the best of my knowledge.*

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

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

Please complete and email this application to: [info@campceliac.org](mailto:info@campceliac.org)

Alternatively, you may mail the application to: Camp Celiac, PO Box 100, Newfield, NJ 08344

If you qualify for a position, we will be in touch by April with an invitation to interview for an opening.