

**Jackson County Parks
Volunteer Campground Host Application**



Applicant Information

First Name _____ Middle Initial _____ Last Name _____
Address _____
City _____ State _____ Zip _____
Phone (____) _____ Email address _____
Date of birth _____ Retired _____yes _____no
Occupation _____
Employer _____
Retired from _____

Have you ever been convicted of a crime (list only convictions, not arrests, and do not list civil infractions like traffic or speeding tickets)?

____ Yes ____ No

If yes, please describe: _____

Co-Applicant Information

First Name _____ Middle Initial _____ Last Name _____
Address _____
City _____ State _____ Zip _____
Phone (____) _____ Email address _____
Date of birth _____ Retired _____yes _____no
Occupation _____
Employer _____
Retired from _____

Have you ever been convicted of a crime (list only convictions, not arrests, and do not list civil infractions like traffic or speeding tickets)?

____ Yes ____ No

If yes, please describe: _____

Emergency Information

Name _____ Relationship _____ Phone _____

Do you have any medical conditions or physical restrictions?

Additional Information

List the names of family members who will reside full-time on the campsite:

Will any pets reside with you? yes no if yes, what kind? dogs cats other
How many? _____

Have you served as a volunteer host before? yes no

if yes, where? _____ Dates served _____

What kind of camping equipment will you use? tent motor home trailer/camper

Length of unit _____

Personal References

Name _____ Telephone (____) _____ Relationship _____

Name _____ Telephone (____) _____ Relationship _____

Please read the following conditions and sign below:

- I hereby assume complete responsibility for any injury or damage sustained by the applicant and release Jackson County of any and all liability for such injury or damages that occur during volunteer work for Jackson County Parks.
- I understand that volunteering for Jackson County Parks may require or include a criminal background check, driver's license check or providing of other identification or certificates.
- I understand that I am not eligible for workmen's compensation.
- I give Jackson County Parks permission to use my photographic or video image for promotional purposes.

Signature of Applicant _____ Date _____

Signature of Co-Applicant _____ Date _____