



<h2 style="text-align: center;">Buffington Park Host Application</h2>

Application for the calendar year: _____ # of people occupying the host site: _____

Applicant's Last Name: _____ First Name: _____ MI: _____

**If you are submitting this form as part of a Camp Host team, please list the other person(s) below. Each participant must fill out an individual application.*

Full Name of the person staying with you at Host site: _____

Will you have a pet with you? Yes No (Current rabies vaccination certificates required)

Are you currently employed? Yes No

Current Occupation(s): _____

Previous Occupation: _____

Part 1: Contact Information

Mailing Address

Street, City, St, Zip:
Phone #:
Alternate #:
Email address:

Part 2: Past Hosting Experience

Have you been a Camp Host at another park or recreation area? **Yes** **No**

(If yes, please complete the information below and list most recent experiences first)

1) **Park:** _____ **State:** _____ **Public** **Private**

Host Type/Duties: _____

Dates (from/to): _____ **Contact Name and Number:** _____

Reason for leaving: _____

2) **Park:** _____ **State:** _____ **Public** **Private**

Host Type/Duties: _____

Dates (from/to): _____ **Contact Name and Number:** _____

Reason for leaving: _____

Part 3: Your References

List three professional references, non-family, below. Please indicate how long you have been acquainted with each.

Name	Company Name & Address, City, State, Zip	Phone Number	Occupation/Title	How long have you known this person

Part 5: Your Recreational Vehicle/Camping Equipment

Make/Year of RV: _____ Motorhome Fifth Wheel Trailer

Length of entire unit: _____ Slide out? Yes No How Many? _____ Both Sides? _____

Electrical Amps Needed? _____

Thank you for your interest in volunteering for Buffington Park. Qualified applicants will be subject to a background check.

Please read the statement and sign below:

I, _____, hereby certify that the information provided on this application is true and correct to the best of my knowledge and belief. I hereby grant the City of Gold Beach permission to verify facts contained herein. I hereby authorize the release of any relevant information pertaining to reference checks, criminal history, work and volunteer history to verify my eligibility to volunteer at Buffington Park. I agree to abide by City of Gold Beach Volunteer Code of Conduct and all City and department policies and procedures, as provided upon scheduling.

Applicant's Signature: _____ **Date:** _____

Please send application to:

City of Gold Beach
29592 Ellensburg Ave
Gold Beach, OR 97444
541-247-7029

Completed applications may also be scanned and emailed to apagano@goldbeachoregon.gov