



Outdoor Program Department
1301 Marina Village Pkwy, Suite 200
Alameda, CA 94501-1083

Volunteer Run Camp 2025 Volunteer Services Agreement

Name _____ / Camp Name _____

Phone _____

Email Address _____

Mailing Address _____

Driver's License # _____ State _____ Exp. Date _____

Camp: **Butano Creek Sleepaway Camp** Dates: **(see below)** Responsibility: **Camp Staff**

- I offer my services to the Girl Scouts of Northern California as a volunteer and understand that I will receive no monetary compensation for my work.
- I agree to fulfill the responsibilities assigned to me and to abide by any Council policies or regulations that affect those responsibilities.

Conditions :

Camp Butano Creek Trainings are a required part of your staffing obligation. This is accomplished by a combination of 4-days of online, and on-site trainings (with a minimum of 2-days on-site).

Training dates :

1. **New Staff Orientation – 5/4/2025 2-4pm (zoom / online)** – for new staff
 2. **Staff Training - Friday 6/20/2025 at 6 :30pm to Sunday 6/22/2025 at 3 :00pm (on-site)** – required for all full-time staff | optional for Pre-Camp and Part-time Staff
 3. **Pre-Camp Training - arrival at camp two days prior to the start of the session (on-site)** – required for full-time & Pre-Camp session staff.
- I understand that I am not considered an employee or agent of Girl Scouts of Northern California, and I am not entitled to Sick Leave, Vacation, Health and Welfare Benefits, Retirement Benefits, or any other leave or benefit established by State Law or Board Policy for employees of Girl Scouts of Northern California.
 - I understand that, in the event of a situation which renders it appropriate to do so, either the Girl Scouts of Northern California or I may cancel this agreement.

Event: Butano Creek Sleepaway Camp

S1 Dates: _____, 2025, ____:00 __. m. to _____, 2025, ____:00 p.m.

S2 Dates: _____, 2025, ____:00 __. m. to _____, 2025, ____:00 p.m.

S3 Dates: _____, 2025, ____:00 __. m. to _____, 2025, ____:00 p.m.

Volunteer Signature: _____ **Date** _____

Camp Director/Representative Signature: _____ **Date** _____

Directions for completing the **Volunteer Services Agreement**

- 1) Complete the top section.
- 2) Complete Event Dates and times using the applicable dates and times, as follows:

Pre-Camp Arrival Dates:

Who (* = and their children):

Directors*, Cooks/DH*, (minimum of 1) Nurse* and (minimum of 1) Pre-Camp staff*:

Session 1: June 25 after 4pm/dinner (bring your own dinner)

Session 2: July 9 after 4pm/dinner (bring your own dinner)

Session 3: July 23 after 4pm/dinner (bring your own dinner)

Core staff* & Unit staff*, Pre-Camp staff*:

Session 1: June 26 8:00 a.m. Pre-camp staff | 9:00 a.m. Core and Unit staff

Session 2: July 10 8:00 a.m. Pre-camp staff | 9:00 a.m. Core and Unit staff

Session 3: July 24 8:00 a.m. Pre-camp staff | 9:00 a.m. Core and Unit staff

NOTE: Lunch will be provided for everyone for all sessions on Pre-Camp arrival days

Camp Departure Dates:

Who (* = and their children):

Pre-Camp staff*:

Session 1: June 28 after lunch

Session 2: July 12 after lunch

Session 3: July 26 after lunch

Rest of staff*:

Session 1: July 5 3:00 p.m.

Session 2: July 19 3:00 p.m.

Session 3: August 2 4:00 p.m.

- 3) Complete, sign and turn in