

Kern County Parks and Recreation a division of General Services 1115 Truxtun Avenue, Third Floor Bakersfield, California 93301 (661) 868-7000



CAMP HOST APPLICATION

Date:			
Name: Mr./Ms.			Age:
Mailing Address:			
Telephone(s): Day:	Evening:	Cell:	
Email Address:			
Preferred Location:			
☐ Kern River Campground			
☐ Buena Vista Campground			
☐ Greenhorn Mountain Cam	pground		
Size of Vacation Trailer/Motorhome:			
Self Contained: \square Yes or No \square	YEAR MADE:		
Will anyone be living with you at the ca	mpground? \square Yes or No \square		
Please enter their name and age. Note.	: Only one other occupant is allowed.		
Name:	Αε	ge:	
Pets: ☐ Yes or No ☐ How m	any pets: Type of pets:		
Person to notify in case of emergency:			
Name:			
Address:			
Street	City	State	Zip Code
Telephone(s): Day:	Evening:	Call·	

Please list three personal references: Name Address Telephone **Do you speak any languages other than English:** \square Yes or No \square ☐ Spanish ☐ Other: ☐ Yes or No ☐ Have you ever been a Camp Host? If yes, Where: ______ Contact: _____ Telephone: _____ When: _____ How long: _____ Why do you want to be a Camp Host? What skills and qualifications do you have that would make you a good Camp Host? (e.g., employment, previous volunteer work, or other activities including hobbies or sports.) **Do you have any previous computer or cash handling experience?** \square Yes or No \square If yes, please explain: Have you ever been convicted of a misdemeanor or felony? ☐ Yes or No ☐ If yes, please list the date of conviction(s) and nature of the offense(s): Please note that background checks and drug testing may be conducted on applicant and the other occupant of the Camp Host campsite. This is a volunteer position and not to be considered as an application for employment, or considered as employment with the County of Kern.

Return your completed Camp Host Application to:

cc: swanl@kerncounty.com

Volunteer's Signature