



Campground Host Volunteer Application

Swift Falls Park

Applicant Information

Applicant's name (First, Middle Initial, Last)

Address

City

State

Zip Code

Retired?

Occupation (Current or Past)

Phone Number

Yes No

E-mail Address

Application

I am applying for a position as a Campground Host at the Swift Falls Park.

Have you ever camped at this campground before?

Yes No

Are you familiar with the park's rules/ordinance?

Yes No

Approximately how many years have you been a camper?

Camping Dates

Volunteers are expected to serve at the campground for a minimum of four weeks.

What is the earliest date you are available to begin hosting?

What is the last date you are available to host?

What month is your preferred choice to host?

How long would you like to host?

Camping Equipment

Describe the camping unit you will be using if selected to be a Campground Host. This will help determine if it will fit the host site at the campground.

What type of camping unit will you use?

5th wheel trailer Car/Truck/Van RV (motor home) Pick-up Camper
Pop-Up Trailer Tent Travel Trailer

What type of slide out does your unit have?

No Slide Out Left Slide Out Right Slide Out

What is the width of your camping unit measured in feet?

What is the length of your camping unit measured in feet?

Private Vehicle Liability Insurance

Volunteers using their personal vehicle as part of their volunteering assignment must have a valid driver's license and carry personal auto insurance in the minimum liability amount for their state, as well as uninsured/underinsured motorist coverage and No-Fault insurance if the vehicle is registered in a state that requires it.

Name of insurance company

Policy Number

Expiration date of policy

Special Needs

Select any special accommodations that you may need to help you fulfill your volunteer duties as a Campground Host.

- Flexibility in work requirements
- Handicap accessible campsite
- 24-hour generator
- Other special needs _____
- None

Others at your campsite

List all the additional people who will reside full-time with you at your campsite. Each person over 18 years of age who is residing in your campsite and plans to help with hosting duties must also complete a volunteer agreement and consent to a background check.

| | | |
|------------------------|---------------------------|----------------------------|
| Full name of Person #1 | Relationship to Person #1 | Adult or Child (Under 18)? |
| _____ | _____ | _____ |
| Full name of Person #2 | Relationship to Person #2 | Adult or Child (Under 18)? |
| _____ | _____ | _____ |
| Full name of Person #3 | Relationship to Person #3 | Adult or Child (Under 18)? |
| _____ | _____ | _____ |
| Full name of Person #4 | Relationship to Person #4 | Adult or Child (Under 18)? |
| _____ | _____ | _____ |
| Full name of Person #5 | Relationship to Person #5 | Adult or Child (Under 18)? |
| _____ | _____ | _____ |

References for Campground Host Position

List two people who can talk about your camping experience, work habits, character, and skills. This may include people you know from work, school, leisure activities, groups, or organizations.

| | | |
|---------------------------|------------------------------|-----------------------------------|
| Full name of Reference #1 | Phone number of Reference #1 | E-mail of Reference #1 (optional) |
| _____ | _____ | _____ |
| Full name of Reference #2 | Phone number of Reference #2 | E-mail of Reference #1 (optional) |
| _____ | _____ | _____ |

Submit

You can email your completed application to devon.savage@swiftmn.us or mailed to the following address for review.

1635 Hoban Ave, Box 241, Benson, MN 56215

Applications must be received 30 days before the date you would like to start serving as a campground host. If selected to host, you will need to provide consent for a background check. If you have additional questions, please call the Swift County Parks office at 320-843-5341.