



Louisiana Lions Camp

For Handicapped and Diabetic Youth

292 L. Beauford Dr. Anacoco, LA. 71403
337-239-6567 lalions@lionscamp.org

Medical Staff Application 2020

Name: _____ Age: _____ Sex: _____ DOB: _____
 First MI Last

Home Address: _____ Home Phone: _____
 Street / Box City State Zip

Shirt Size: _____ Social Security Number: _____

Email address: _____

Emergency Contact Name: _____

Phone: (H) _____ (W) _____

Married: (circle one) Y N Number of Children: _____

Employer: _____ Your Work Phone: _____ Dept: _____

Position: MD _____ RN _____ LPN _____ EMT _____

State of Licensure: _____ Expiration Date: _____

Have you ever been convicted of a crime? (Circle One) Y N If yes, explain _____

Do you have, or have you had any mental or physical health conditions: (Circle One) Y N (If yes describe below)

Please check weeks you would like to work: (schedule shows Sun. to Sat)

_____	Precamp	June 7 - June 13	Summer Staff (One Nurse)
_____	Session 2	June 14 - June 20	Mental 8 - 19 y/o
_____	Session 3	June 21 - June 27	Mental 8 - 19 y/o
_____	Session 4	June 28 - July 4	Physical 7 - 19 y/o
_____	Session 5	July 5 - July 11	Physical 7 - 19 y/o

Your signature below is required and affirms that all of the information in your application update is correct and true. Falsification of information gives the camp the right to dismiss you if employed.

Signature of Applicant

Date