



2023 Leadership Training Summit

Volunteer Information Form – Applications are due **December 1, 2022**

Contact Information

Name: _____ Company: _____

Address: _____

City: _____ St: _____ Zip: _____ Gender: M ___ F ___ Age at Summit: _____

Phone: _____ Email: _____

Emergency Contact Name: _____ Emergency Phone: _____

Volunteer Opportunities

___ Instructor (please specify type of class/expertise): _____

___ Team Leader ___ Villa Leader ___ Any Job **Attire: Thur-Black Golf Shirt (FBA or Other), T-Shirts will be provided for Fri & Sat,**

Company Shirt on Sun. T-Shirt Size (S-3XL) ___ **OPTIONAL:** Do you want a black FBA Logo Golf Shirt - Cost \$30.00* Yes ___ No ___ Size: _____

Volunteer Background Information

Are you an FBA Alumni? Yes ___ No ___ If yes, what was your last year as a student at an FBA Summit? _____

Is this your first time volunteering for the FBA Summit? Yes ___ No ___ If no, list volunteer positions held and number of years as a FBA volunteer.

Do you have experience with other youth camps? Yes ___ No ___; If yes, please describe: _____

Certifications/Training

Please list any certifications or training you have had relevant to the summit or youth camp settings (ex. first aid, CPR, lifeguard, professional/industry certifications) _____

Housing Requirements

Will you need overnight housing during the summit? Yes ___ No ___ If yes, which nights? Wed (*) ___ Thur ___ Fri ___ Sat ___

* Note: FBA can only pay for Wed night arrivals for those counselors that have more than a 3-hour drive or are part of the set-up team. If you would like to join us on Wed, the cost will be \$85 for the night*. Private rooms **MAY** available at \$85 per night but cannot be guaranteed due to the anticipated enrollment for the Summit. Would you like a private room?* ___ Yes ___ No Which nights?: Wed ___ Thur ___ Fri ___ Sat ___

Meals Only? Please specify: Thur: L ___ D ___ Fri: B ___ L ___ D ___ Sat: B ___ L ___ D ___ Sun: B ___ L ___

Do you have any special needs accommodations or special meal requirements? Yes ___ No ___; If yes, please describe: _____

Signature: _____ Date: _____

COST PER COUNSELOR (Excludes Teachers, HBA EO's, Alumni Counselors Under 24, Counselors that are Sponsor of \$500 or more- 1 per company): \$175.00 Cost for meals: Breakfast - \$20.00 Lunch - \$25.00 Dinner - \$25.00

Please return to: Cindy Hall @ Cindy.Hall@HBI.org.

***Please make checks payable to: Home Builders Institute and mail to PO Box 429, Jensen Beach, FL 34958**