

# OUTDOOR ACTION FROSH TRIP 2000 MANAGER/SUPPORT TEAM APPLICATION

(Application due by Friday, April 7. Please print)

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_ CLASS \_\_\_\_\_

UNIVERSITY ID# \_\_\_\_\_ SS# \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ SEX \_\_\_\_\_

CAMPUS ADDRESS '99 - '00 \_\_\_\_\_ PHONE \_\_\_\_\_ VOICEMAIL \_\_\_\_\_

CAMPUS ADDRESS '00 - '01 \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

*(We will mail information to you in mid-July. If you will be at a different address, please give it below with the dates at that address.)*

MID-JULY ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_ DATES \_\_\_\_\_

**SPECIAL NEEDS:** (Please indicate any special non-medical needs you have.)

I keep the Jewish Sabbath

Other \_\_\_\_\_

**T-SHIRT SIZE:** (100% cotton): \_\_\_\_\_ SMALL \_\_\_\_\_ MEDIUM \_\_\_\_\_ LARGE \_\_\_\_\_ XLARGE \_\_\_\_\_ XXLARGE

**POSITION:** I am applying for FT '00 (I will be available Thursday, August 31 - Saturday, September 9).

Manager (please complete the Manager section)  Support Staff (please complete the Support section)

Either (please complete both sections below)

\_\_\_\_\_ I worked for FT '99 as  Manager  Support Staff

\_\_\_\_\_ I will be on campus during the summer of '00 and can help with FT '0 preparations.

## **SUPPORT TEAM:**

I understand that I must be van certified by the end of this academic year.

I would like to do Support with: \_\_\_\_\_

Have you taken the Van Driver Training Class?  Yes  No  Scheduled \_\_\_\_\_

Have you passed the Behind the Wheel Driving Test  Yes  No  Scheduled \_\_\_\_\_

How long have you had your driver's license? \_\_\_\_\_ years. How many miles do you drive in a year? \_\_\_\_\_

Do you have experience driving a van?  Yes  No Do you have any experience driving a trailer?  Yes  No

Why are you interested in doing Support?

How well do you do handling a road map and navigating?

How well do you do work as part of a team?

How would you characterize your style in dealing with demanding or stressful situations?

Have you ever had any driving accidents?  No  Yes If yes, give brief description.

Have you ever had any speeding tickets?  No  Yes If yes, give brief description.

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**MANAGER TEAM:**

Why are you interested in being a Manager?

How well do you do handling road maps and navigating?

Describe your organizational skills for handling multiple tasks simultaneously.

How would you characterize your style in dealing with demanding or stressful situations?

How do you do with telephone contacts?

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I understand that this is only an application for a support, or manager position and that my application will be considered carefully with regard to my capabilities and the needs of the program. If accepted, I agree that I will cheerfully carry out whatever position I am assigned. **I understand that any cancellations to my application should be made by June 30. After that date, Outdoor Action will accept participants based on my pledge to return for the program.** I understand that the dates for the trip are Sunday, September 3 - Friday, September 8. I understand that I must return to campus on Thursday, August 31 by 5:00 PM, and that I will be expected to participate in pre-trip activities on Friday, September 1, Saturday, September 2, post trip clean-up activities on Saturday, September 9, and trip debriefing on Sunday, September 10. I am aware that as an OA staff member I am required to follow the policies and guidelines set by the Outdoor Action Program. As part of Princeton University, Outdoor Action adheres to the University standards of respect for others. Outdoor Action is a tobacco-free and substance-free program—alcohol or drugs of any kind are prohibited and the use of tobacco products is not encouraged.

I hereby certify that the answers set forth above are true. I acknowledge that my participation in this trip is voluntary. I am aware that my participation in this trip involves activities in remote locations with limited access to hospital medical care. I am aware of the potential hazards of this activity, including, but not limited to, insect bites and stings, infections, heat or cold related illnesses, falls, inclement weather, and difficult trail conditions. I understand that if accepted for a Support position, I will be required to drive a van and must have successfully completed the University Van Driver Training program. I am aware that there are risks of in driving, including risks associated with other drivers, vehicles, and poor driving conditions.

I believe that I have been fully and adequately briefed regarding the risks inherent in the trip. I have weighed the dangers inherent in this trip, the risks presented to my own health and well being, and my personal desire to participate in this trip. I have concluded that the risks are acceptable and are outweighed by my desire to participate.

In consideration of Princeton University enabling me to participate in this Outdoor Action program, I voluntarily assume all risks associated therewith. I hereby release the Trustees of Princeton University, its officers, agents, employees, and students, from any and all claims that I may have as a result of personal injury (including death), or property damage arising out of or connected in any way with this program, unless those claims arise as a direct result of the gross negligence or willful misconduct of Princeton University. This release includes claims arising out of the rendering of emergency medical procedures or treatment, if any. I hereby give my consent for medical treatment should it be required during this trip. This waiver is binding on my heirs and assigns.

**SIGNATURE REQUIRED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Please return to: Outdoor Action Program, 330 Alexander Road by Friday, April 7**