

# 2025 National Disabled Veterans Golf Clinic (NDVGC)

Dear Golf Buddy Applicant:

The 32<sup>nd</sup> annual National Disabled Veterans Golf Clinic (NDVGC) will be held at Riverside Resort in Riverside, Iowa. Golfing will be offered on Monday, September 8 – Thursday, September 11, 2025. This application is so we can gather <u>preliminary</u> information on potential volunteers available to support this year's program.

- Please read all information provided. If you feel you can meet the needs of the program and are interested in serving as a golf buddy at the NDVGC, please return:
  - Application form
  - Code of Conduct form
- If selected to support, you will receive confirmation. Do not make any arrangements until you have been officially accepted for the 2025 NDVGC.
- If you are not selected to support, you will receive notification of that decision in June 2025.
- Please keep a copy of the completed application for your records.
- You will receive an email confirming we have received your paperwork. If you do not receive an email, please follow up with Nick Beelner regarding your paperwork submission immediately at <u>Nicholas.Beelner@va.gov</u> or (319) 358-5963.

# What to Expect if Selected

- To provide the best experience for the Veterans, we strongly encourage you to support each of the 4 days your Veteran will be golfing.
- Golf buddies are <u>not</u> allowed to golf with or for their assigned Veteran.
- Expect to work at least 32 hours.
- You will be provided meals throughout the duration of your assignment.
- While we take considerable time and effort to address as many dietary restrictions and special diets as possible, we cannot guarantee we will be able to accommodate all of them.
- You will be provided lodging (if living more than 50 miles from Riverside, lowa) during the clinic. We will assign you to lodging (if applicable) and you may have a roommate. If you have a roommate preference, please indicate that on your lodging form.
  - It is your responsibility to get to Riverside, Iowa.
  - Local volunteers will be responsible to get to assigned venues.
- You may be working in inclement weather.
- You will be working and providing support to Veterans with profound disabilities. These include, visual impairments, spinal cord injuries, traumatic brain injuries, limb-loss, Parkinson's, multiple sclerosis, strokes, and others.
- Training will be provided on our website, mobile app, and in person.
- Once selected, you will receive information on the NDVGC Mobile App where you will find clinic details.
- This will be an incredibly rewarding experience.







# What Will be Expected of You

- You must be able to meet the requirements identified for the area you will be assigned to.
- To follow the rules and guidelines provided to you by the clinic and your assigned coordinator or lead.
- You <u>MUST</u> be on time.
- You MUST provide an email address.
- You MUST read, understand, and adhere to privacy rules and regulations.
- If you have to cancel, you <u>MUST</u> notify Nick Beelner as soon as possible.
- You MUST always conduct yourself in a professional manner.
- You are volunteering for a VA Federal Government/DAV program. You are representing these two organizations; therefore, drug use, inappropriate behavior, or harassment of any form will not be tolerated. We reserve the right to immediately remove anyone in violation.
- Consideration will only be given to those who return a complete application (<u>3 pages must be</u> returned; <u>4 pages for VA employees</u>).
- Return your application to support by the April 4, 2025 deadline.

# Additional Expectations for VA Government Employees

- Your supervisor must sign your application authorizing support of your attendance.
- Travel costs are not provided by the program. You will need to discuss your options for travel with your facility.
- You will be required to let us know if you are on official travel status, authorized absence, or annual leave.
- Lodging for employees is only available if the commute from your assigned duty station is more than 50 miles from Riverside, Iowa.

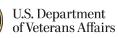
**Application forms are due by April 4, 2025** for you to be eligible to support the 2025 National Disabled Veterans Golf Clinic. Please fill out the application in its entirety as all information is pertinent to being accepted as a golf buddy. Please return the **application** and **code of conduct forms**.

If you have any questions or concerns, please feel free to contact Nick Beelner at (319) 358-5963 or via email at <u>Nicholas.Beelner@va.gov</u>.

Respectfully,

Nick Beelner Director, National Disabled Veterans Golf Clinic









## 2025 National Disabled Veterans Golf Clinic (NDVGC) Golf Buddy Application

## Please send completed registration forms by April 4, 2025 to:

Iowa City VA Health Care System Attn: Veterans Golf Clinic 601 Highway 6 West Iowa City, IA 52246-2208 or email to: nicholas.beeIner@va.gov

# **Applicant Information**

Full Name:							
		Last			First		М.І.
Address:							
		S	Street Addres	S		Apart	tment/Unit #
		City			State		Zip Code
Cell Phone:				Date	of Birth:		
Sex:	Male	Female					
Primary Email:							
Secondary Emai	l:						
T-Shirt Size:	SM	MED	LG	XL	2XL	3XL	4XL

# **Emergency Contact Name and Relation:**

## **Emergency Contact Phone Number:**

Your contact information will only be used to contact you about pertinent information to the NDVGC.







#### **Golf Buddy Opportunities**

Golf Buddy (Monday 9/8 - Thursday 9/11 7:30a – 4p): Supports Veterans needs while on the golf course. Veterans participating in the clinic have profound disabilities including visual impairments, spinal cord injuries, traumatic brain injuries, limb-loss, Parkinson's, multiple sclerosis, strokes, and others. They may need assistance traversing the golf course terrain, golf club selection, alignment, determining distances, and basic support to play the game.

Golf Buddies must be able to drive a golf cart and are not allowed to golf with or for the Veteran. As a Golf Buddy, you are expected to actively support your Veteran by getting out of the golf cart to physically assist your Veteran. Golf Buddies are responsible for taking notes for their Veteran during golf instruction and assisting their Veteran with lunch service while at their assigned golf course.

What days are you able to commit as a Golf Buddy? To provide the best and most consistent experience for the Veterans, we are encouraging commitment for the full clinic (Monday - Thursday). First consideration will be given to those who can commit Monday - Thursday.

Do you have any physical limitations that may affect your ability to be a Golf Buddy?         No       Yes (please explain):         What is your golf skill and/or knowledge?       Novice       Intermediate       Advanced         How often do you golf?       Once a week or more       1-2 times a month       1-2 times a year       Never         What is your average score on 9 holes?       Please select preferred golf course(s): (subject to change):       Pleasant Valley (lowa City) (Black and Blue Team)       Pleasant Valley (lowa City) (Creen and Purple Team)         Kalona (Yellow Team)       Elks Lodge (lowa City) (Red Team)       Elks Lodge (lowa City) (Red Team)	Monday		Tuesday	Wednesday	Thursday
What is your golf skill and/or knowledge?       Novice       Intermediate       Advanced         How often do you golf?       Once a week or more       1-2 times a month       1-2 times a year       Never         What is your average score on 9 holes?       Please select preferred golf course(s): (subject to change)       Blue Top Ridge (Riverside)       Pleasant Valley (Iowa City)         Blue Top Ridge (Riverside)       Pleasant Valley (Iowa City)       (Green and Purple Team)         Kalona       Elks Lodge (Iowa City)	Do you have any	physical limitations	that may affect you	r ability to be a Golf Buddy?	
How often do you golf?       Once a week or more       1-2 times a month       1-2 times a year       Never         What is your average score on 9 holes?       What is your average score on 9 holes?       Please select preferred golf course(s): (subject to change)         Blue Top Ridge (Riverside)       Pleasant Valley (lowa City)       (Green and Purple Team)         Kalona       Elks Lodge (lowa City)	No	Yes (please exp	plain):		
Once a week or more       1-2 times a month       1-2 times a year       Never         What is your average score on 9 holes?         Please select preferred golf course(s): (subject to change)         Blue Top Ridge (Riverside) (Black and Blue Team)       Pleasant Valley (lowa City) (Green and Purple Team)         Kalona       Elks Lodge (lowa City)	What is your gol	f skill and/or knowled	ge? Novice	Intermediate	Advanced
What is your average score on 9 holes? Please select preferred golf course(s): (subject to change) Blue Top Ridge (Riverside) (Black and Blue Team) Kalona Elks Lodge (lowa City)	How often do yo	u golf?			
Please select preferred golf course(s): (subject to change)         Blue Top Ridge (Riverside)       Pleasant Valley (Iowa City)         (Black and Blue Team)       (Green and Purple Team)         Kalona       Elks Lodge (Iowa City)	Once a w	veek or more	1-2 times a month	1-2 times a year	Never
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(Black and Blue Team) (Green and Purple Team) Kalona Elks Lodge (Iowa City)	Please select pro	eferred golf course(s)	: (subject to change	)	
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Have	you been a (	No	Yes	
ls the	ere a Veteran	you would like to be paired with?		
	No	Yes (Name of Veteran):		
Are y	ou willing to	support alternative activities after golf?	No	Yes

Is there any information you would like us to know about you?

Would you like your volunteer hours registered with the host sponsor DAV (Disabled American Veterans)? If you are a VA employee on official government time, please select no.

No Yes

Lodging

If you live outside the direct commuting area (50 miles) of the NDVGC and need lodging, please indicate the nights you will need a room. Golf Buddies will be assigned a roommate. **VA EMPLOYEES:** Lodging is only available if the commute from your assigned duty station is more than 50 miles from Riverside, Iowa.

Do you need lodging?	No	Yes	Room pre	eference:	Non-Smoking	Smoking
What days will you nee	ed lodging:					
Sunday	Monday	Г	luesday	Wedı	nesday	Thursday
		_				

If there is someone you would like to room with, please indicate their name below:









## **VA Employees Only**

What is your parent facility or duty station (CBOC, etc.)?

Facility Director Name (if applicable):

Facility Director Email (if applicable):

Are you attending with a Veteran or a group of Veterans?	No	Yes (please list below)
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#### Do you possess any training or experience in the following specialties?

BROS	VIST	PT	PTA	ОТ	COTA	Prosthetist
Chiropractic	Massage Therapy	Rec Therapy	Social Work	Psychology	,	Psychiatry
LPN	RN	PA	ARNP	MD		

Please list any certifications that may be of use at the golf clinic (i.e., battlefield acupuncture, acupressure, tai chi, yoga, etc.):

#### What type of leave will you be requesting for the NDVGC? (check one)

_A - Annual Leave	RG - Official Government Travel	LN - No Cost Government Travel

All VA employees <u>MUST</u> provide supervisor approval for the application to be processed.

Supervisor Name and Title:

Supervisor Signature:

Date:







U.S. Department of Veterans Affairs

# **VOLUNTEER INFORMATION SHEET**

2025

#### NATIONAL DISABLED VETERANS GOLF CLINIC (NDVGC) RIVERSIDE RESORT, RIVERSIDE, IA

#### PLEASE RETAIN THIS SHEET FOR REFERENCING

1. <u>Privacy Act Information</u>: I understand all officially journalized volunteers are covered under the *PRIVACY ACT, PUBLIC LAW* 93-579, that unlawful disclosure of patient related information to unauthorized individuals is against the law and the volunteer(s) is subject to a \$5,000 fine. (The words "unauthorized individuals" means anyone).

2. I hereby waive all claims to monetary benefits for services rendered as a volunteer worker on a "without compensation basis." I understand that this wavier applies only to compensation for specific services rendered in the Voluntary Service Program at the National Disabled Veterans Golf Clinic and has no relation to compensation for other services or benefits to which I may be entitled.

3. I understand that the National Disabled Veterans Golf Clinic has the right to terminate, at any time, my authorization to serve as a volunteer for unsatisfactory performance, unbecoming behavior/ conduct, and /or for violation of established policy and/or procedures (38 U.S.C. 513).

4. Volunteers are responsible for:

- a. Completing the application forms in full.
- b. Carrying out the duties of their assignment under the direction of assignment supervisor.
- c. Completing all required training prior to the National Disabled Veterans Golf Clinic.
- d. Reporting for duty in a timely manner and being prepared for the assignment.
- e. Wearing appropriate clothing to perform their assignment.
- f. Contacting your assignment supervisor in advance if sick or otherwise unable to report for duty.
- g. Reporting immediately to the *National Disabled Veterans Golf Clinic* medical room if injured while on assignment.

# 5. Please Note:

- a. Accepted volunteers will be provided meals.
- b. Accepted volunteers are expected to support the program and their assignment supervisors throughout their assigned shift.
- c. Any pertinent clinic information can be obtained at the Command Center.
- d. Lost and found is located at the Command Center.

VA

## NDVGC Code of Conduct Volunteer Agreement

The National Disabled Veterans Golf Clinic is a Department of Veterans Affairs/Disabled American Veterans co-sponsored event. The program is an outreach of the Iowa City VA Health Care System and Veterans Integrated Service Network (VISN) 23. Compliance with VA regulations and policies by staff and volunteers is expected during this program. Possessing weapons, non-prescribed drugs, drug paraphernalia, non-performance of assignment, exhibiting disruptive, abusive or unbecoming behavior, and harassment of others in any form will not be tolerated and will result in immediate expulsion from this program and will affect future involvement.

The Department of Veterans Affairs and the Disabled American Veterans work to promote a safe environment for everyone involved with the program. Observing these policies will aid in our efforts for a safe program.

Any violations will be taken to the National Disabled Veterans Golf Clinic Director who will make the final decision on what action will be taken.

Acknowledgment of Volunteer Information Sheet/Code of Conduct (Please return this form) by April 4, 2025

I hereby certify that I have read and understand the above information. I also acknowledge that I have specifically read and understood the information regarding #1 The Right to Privacy Act, #2 Waiving Claim to Monetary Benefits, and #3 NDVGC Code of Conduct.

SIGNATURE

DATE

PRINT NAME

Please return signature page only and keep the rest of the information for your records to reference.