

# Camp Legacy



## Junior Counselor Program

Training day is May 13<sup>th</sup>, 2020. This is required.

From 6:00pm to 7:00pm

**APPLICATIONS DUE BY MAY 8<sup>th</sup>, 2020**

### Parent Information

Name: \_\_\_\_\_  
Last First Middle

Contact Information:

Home Telephone Mobile Email address

What is the best way to reach you quickly (home/cell/email)? \_\_\_\_\_.

\*Many Communications, like schedules, will be done via email.

\_\_\_\_\_ Please check if your child will be staying for before or after care. That is any time before 8:45am and any time after 3:30pm. It is a **\$25 fee each week if your child will stay for before or after care.**

### Junior Counselor Information

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street (Apt) City/State Zip

Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ School & Grade completed in May 2020: \_\_\_\_\_

Contact Information:

Home Telephone Mobile Email address

What is the best way to reach you quickly (home/cell/email)? \_\_\_\_\_.

\*Many Communications, like schedules, will be done via email.

Abilities and Talents: List positive leadership skills & things you are good at. (Example: Good in Math)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Achievements / Awards and Clubs: (Example: Honor Roll, Perfect Attendance)**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**References: List people who will say good things about you. Include at least one individual from your school building. Example: (Principal, teacher, school counselor)**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Where would you prefer to volunteer? Please rate 1-3. 1 being the most preferred and 3 being the least.**

\_\_\_ Lower Camp (3-4 Year olds)      \_\_\_ Upper Camp (Kindergarten-3<sup>rd</sup> Grade)      \_\_\_ Upper Camp (4<sup>th</sup>- 6<sup>th</sup> Grade)

**There will be 18 camp groups each week. Junior Counselors will be assigned daily/weekly to a group. There will be a cap for junior counselors of 18 upper volunteers for each day and 2 for lower camp each day. Turn in applications early to ensure receiving requested dates & age preference. If you mark that you are able to volunteer on a particular day, you will be expected to come on those days unless you are contacted because we met our cap for those dates.**

**DATES & TIMES I CAN COMMIT TO:  
MAY/JUNE**

Monday	Tuesday	Wednesday	Thursday	Friday
CLOSED	26 <sup>th</sup>	27 <sup>th</sup>	28 <sup>th</sup>	29 <sup>st</sup>
1 <sup>st</sup>	2 <sup>th</sup>	3 <sup>th</sup>	4 <sup>th</sup>	5 <sup>th</sup>
8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>
15 <sup>th</sup>	16 <sup>th</sup>	17 <sup>th</sup>	18 <sup>th</sup>	19 <sup>th</sup>
22 <sup>th</sup>	23 <sup>rd</sup>	24 <sup>th</sup>	25 <sup>th</sup>	26 <sup>th</sup>

**MARK THE DATES YOU ARE AVAILABLE WITH AN "X". HOURS ARE 8:45AM-3:30PM. If volunteers need to come before 8:45am or need to stay after 3:30pm, a \$25 extended care fee is required weekly.**

**DATES & TIMES I CAN COMMIT TO:  
JULY/AUG**

Monday	Tuesday	Wednesday	Thursday	Friday
29 <sup>th</sup> CLOSED	30 <sup>th</sup> CLOSED	1 <sup>st</sup> CLOSED	2 <sup>nd</sup> CLOSED	3 <sup>rd</sup> CLOSED
6 <sup>th</sup>	7 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>
13 <sup>th</sup>	14 <sup>th</sup>	15 <sup>th</sup>	16 <sup>th</sup>	17 <sup>th</sup>
20 <sup>th</sup>	21 <sup>st</sup>	22 <sup>nd</sup>	23 <sup>rd</sup>	24 <sup>th</sup>
27 <sup>th</sup>	28 <sup>th</sup>	29 <sup>th</sup>	30 <sup>th</sup>	31 <sup>st</sup>
3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>

**MARK THE DATES YOU ARE AVAILABLE WITH AN "X". HOURS ARE 9AM-3:30PM. IF EXTENDED CARE IS NEEDED, IT'S A \$25 FEE EACH WEEK.**

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I, \_\_\_\_\_, understand that being a part of the Camp Legacy Junior Counselor Program is a responsibility, and I am committing to attend and participate in camp and the related activities on the dates I signed up for. I understand that Junior Counselors are not employees, and that my participation and attendance at camp will not be compensated and will not entitle me to a future paid position at Camp Legacy.

\_\_\_\_\_  
(Junior Counselor Signature)

\_\_\_\_\_  
(Date)

On Behalf of \_\_\_\_\_, I acknowledge and agree to the terms of his/her participation and attendance at Camp Legacy, and I give permission for \_\_\_\_\_ to attend Camp Legacy as a Junior Counselor on the dates and times listed above.

\_\_\_\_\_  
(Parents Signature)

\_\_\_\_\_  
(Date)

Print Name and Relationship: \_\_\_\_\_