**Summer Camp Counselor Volunteer Application**

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| Name (Last, First, Middle): |  | Age: |  |
|  | If under the age of 18, adult/guardian MUST sign form at the bottom.) |
| E-mail Address: |  |
| Street Address |  | Apt/Unit#: |  |
| State: |  | Zip: |  |
| Home Phone:(With area code) |  | Other Phone:(with area code) |  |
| Hobbies, Special Talents: |  |
| Last Grade in School Completed: |  | And/or, List Degree(s) earned: |  |
| Favorite fruit: |  |

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| Personal References: Required for first time applicants. List contact’s name and phone number. Please list up to three references. |
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| Dates & times available to volunteer (Camp weeks are June 19-23, 2017 & July 17 - 21, 2017: 9:00 am - 3:30 pm) |
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| Camp(s) and Instructor(s) you would like to work with: |
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| Signature of Applicant |  | Date: |  |
| Signature of Parent/Guardian if applicable: |  | Date: |  |

Please return this completed application as soon as possible to SUMMER CAMP! c/o The Randolph Arts Guild, PO Box 1033, Asheboro, NC 27204-1033 or email to programassistant@randolphartsguild.com.

**Volunteer assignment will be made no sooner than June 1, 2017. The deadline to apply for a volunteer position is June 12, 2017 by 5 pm.**