



SUMMER CAMP VOLUNTEER APPLICATION



We are looking for volunteer camp counselors! Helpers are asked to volunteer in 3-hour shifts throughout the summer season. Volunteers must be able to make a commitment of one week at a time and must pass a background check before starting.

First Name	MI	Last	Email
Street Address			Home Phone
City	State	Zip Code	Cell Phone

SHIFTS you are interested in: 9am-12pm 12pm-3pm 3pm-6pm **DATE RANGE** _____

PREFERRED LOCATION *(Optional)*

<input type="checkbox"/> Allred Clubhouse, Carmel Valley	<input type="checkbox"/> Harper Clubhouse, Solana Beach
<input type="checkbox"/> Del Mar Clubhouse, Del Mar	<input type="checkbox"/> La Colonia Clubhouse, Solana Beach
<input type="checkbox"/> Griset Clubhouse, Encinitas	<input type="checkbox"/> Polster Clubhouse, Carmel Valley

AREAS OF INTEREST

Specialty Camp Volunteer Use your expertise in a fun camp environment to help campers with arts and crafts, sports and fitness, dance, theater and science activities! *Name of specialty camp* _____

Day Camp Volunteer Lend a helping hand with various camp activities throughout the day!

Relevant skills, training or experience _____

Why are you interested in volunteering with Boys & Girls Clubs of San Dieguito? _____

Have you ever been convicted of any crime? (Exclude convictions for marijuana-related offenses for personnel use more than two years old; convictions that have been sealed, expunged or legally eradicated, and misdemeanor convictions for which probation was completed and the case was dismissed): **Yes** **No** This company will not deny employment to any applicant solely because the person has been convicted of a crime. The company however, may consider the nature, date and circumstances of the offense as well as whether the offense is relevant to the duties of the position applied for.

If yes, explain: _____

REFERENCES

Name	Relationship	Phone
Name	Relationship	Phone

Emergency Medical Care: I hereby consent to allowing the Boys & Girls Clubs of San Dieguito to contact emergency medical care or first aid in the event I suffer any illness or accident while performing volunteer activities. I hereby release, discharge and hold the Boys & Girls Clubs of San Dieguito harmless from any claim related to the provision of such emergency medical care. I also agree to provide an emergency contact to the Boys & Girls Clubs of San Dieguito in the event of an emergency where I am unable to provide the information.

Person to Contact in the Event of an Emergency: _____
Print Name Phone

Photographs and Video: I acknowledge and agree that while volunteering with the Boys & Girls Clubs of San Dieguito, my activities may be photographed or videotaped. I hereby consent to the use by the Boys & Girls Clubs of San Dieguito and/or its authorized representative of photographs or videos in which I appear, and I acknowledge and agree that I have no ownership rights in or to those photographs or videos.

I understand that I may be required to submit to a background check and that my status is conditional pending results.

Signature of Parent if under 18 _____ Date _____

Applicant Signature _____ Date _____