



GWINNETT COUNTY
SUMMER CAMP AIDE
VOLUNTEER APPLICATION

Email completed application to CommunityServices@GwinnettCounty.com, Parks@GwinnettCounty.com, or drop off at preferred site by Monday, April 20.

CAMP AIDE INFORMATION

Name: Application date:

Address: City: ZIP code:

Email: Phone:

Date of birth: School: Grade:

Desired camp location (separate application for each):

Do you have previous experience as an aide or assistant with another camp program? Yes No

Have you attended any teen leadership training? Yes No If yes, describe:

List your volunteer experience:

Empty box for listing volunteer experience.

Describe any special skill or interest that you could share or teach during camp:

Empty box for describing special skills or interests.

PARENT OR GUARDIAN INFORMATION

Parent or guardian name:

Email: Phone(s):

Address (if different): City: ZIP:code

Emergency contact: Phone: Relation:

Volunteer medical alert or allergies:

If accepted as a Camp Aide, I understand that the camp staff depends on me to volunteer for a minimum of two weeks, and I will be required to follow instructions and perform other duties requested by the supervisor. Electronics, including cell phones, cannot be used while volunteering. Gwinnett County Government is not responsible for lost or stolen items. Accepted Camp Aides must complete a background check and fingerprinting as required by the Georgia Department of Early Care and Learning.

DATE PREFERENCE (Mark the weeks you prefer to volunteer; there is no camp June 29 through July 3.)

- May 26 - May 29 (only available at Environmental & Heritage Center)
June 1 - 5 June 8 - 12 June 15 - 19 June 22 - 26
July 6 - 10 July 13 - 17 July 20 - 24
July 27 - 31 (only available at Environmental & Heritage Center)

T-SHIRT SIZE (required; \$21 for two shirts to be paid upon acceptance)

- Adult small Adult medium Adult large Adult x-large Adult xx-large

Camp Aide applicant signature: Date:

Parent or guardian signature: Date: