CAMP AIDES

An exciting volunteer opportunity for ages 14 – 17* Apply by April 22 | Interview: April 24 – 28

Lead fun camp activities, learn communication skills, work in a team setting, expand your network, and apply your talents to make summer camp memorable for children!

Best Friend Park | Norcross Bogan Park | Buford Dacula Park Activity Building | Dacula George Pierce Park | Suwanee Gwinnett Environmental & Heritage Center | Buford Lilburn Activity Building | Lilburn Mountain Park Activity Building | Stone Mountain Mountain Park Park Depot | Lilburn OneStop Buford | Buford Pinckneyville Park | Berkeley Lake Rhodes Jordan Park | Lawrenceville Shorty Howell Park Activity Building | Duluth

Training will be scheduled between May 13 - June 2

Must have parent/guardian permission, be able to participate in swim activities, and commit to two weeks of camp between May 30 and July 28. *Must be of age by May 1, 2023.

Apply today! Email completed application to CommunityServices@GwinnettCounty.com







GWINNETT COUNTY COMMUNITY SERVICES 2023 CAMP AIDE VOLUNTEER APPLICATION

Complete application and email to CommunityServices@GwinnettCounty.com or drop off at site by April 22.

| APPLICANT INFORMATION | Application date | | | |
|--|------------------|--------------------------|---------|--|
| Name | School | | Grade _ | |
| Address | City | | | |
| Email | Phone | | | |
| Desired camp location (separate application for each) | | | | |
| Do you have previous experience as an aide or assista | int with ano | ther program? \Box Yes | □No | |
| Have you attended any teen leadership training? | | □Yes | □No | |
| Have you attended a Gwinnett Parks and Recreation teen club? | | □HOOKED | □N/A | |
| List your volunteer experience: | | | | |
| | | | | |
| | | | | |

Do you have a special skill or interest that you could share or teach during camp? If so, please briefly describe.

PARENT/GUARDIAN INFORMATION

| Parent/guardian name | Email | Email | | |
|--------------------------|-----------------|-------|--|--|
| Address | City | ZIP | | |
| | Secondary phone | | | |
| Emergency contact | Relation I | Phone | | |
| Medical alerts/allergies | | | | |

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

Date preference Rank by numbers 1 through 7 the weeks of camp you'd prefer to volunteer:

| May 30 – June 2 (Gwinnett Environmental & Heritage Center only) | | | | | | | | |
|---|--------------|------------------|------------------------|-----------------|-----------------|--|--|--|
| June 5 – 9 | June 19 - | - 23 <u>No (</u> | <u>camp</u> July 3 – 7 | | _ July 17 – 21 | | | |
| June 12 – 16 | June 26 - | - 30 | July 10 – 14 | 4 | _ July 24 – 28 | | | |
| T-shirt size (required: cost \$21): | □Adult small | □Adult medium | □Adult large | □ Adult x-large | □Adult xx-large | | | |
| Camp Aide applicant signature | | | | Date | | | | |
| Parent/guardian signature | | | | Date | | | | |