Valley Adventures Day Camp 2020

***Volunteer Registration Form – Type or Print clearly in Blue or Black ink***

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| **Volunteer Information** | | | | | | | | |
| Name of Volunteer (First, Last): | | | | | Are you a registered Girl Scout?  Yes No | | | |
| Street Address: | | | City/State: | | | | | Zip Code: |
| Email: |  | | | Cell Phone: | | | | Text Okay?  Yes No |
| Have you ever been convicted of a felony? Yes No  If Yes, please specify: | | | | | | | T-shirt Adult Sizes only – please circle size and style –  Women or Men  S M L XL 2XL 3XL | |
| List complete name of Camper(s) at Camp and Fall Grade Level:  1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |
| Signature: | | Service Unit: | | | | Date: | | |

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| **Sibling Care & Boys Unit** | | |  | **Volunteer Training** |
| Will you need Sibling Care? Yes No  Will you need the Boys Unit? Yes No   * All children must be potty trained. * Boys grades 1-6 are eligible for boys’ unit and there is a $60 camp fee.   **Reminder: No sibling care or boy’s unit provided for the Thursday overnight. All are welcome for dinner.** | | |  | Please RANK the area in which you would like to volunteer in order of your preference with ‘1’ being your first choice.  \_\_\_ With my daughter’s unit  \_\_\_ Daisies / Brownies (Grade 1-3)  \_\_\_ Juniors (Grade 4-6)  \_\_\_ Boys (Grade 1+)  \_\_\_ Sibling Care  \_\_\_ Food Crew  \_\_\_ Floating Volunteer/Photographer  \_\_\_ Friday Clean Up |
| Child #1 Name: | | |  | Other relevant experience applicable to role of UNIT LEADER (teacher, Boy Scouts, etc.) |
| Age / Grade: | Gender:  M F | Youth T-shirt size: |  |  |
| Child #2 Name: | | |  | Do you have current first aid training? |
| Age/Grade: | Gender:  M F | Youth T-shirt size: |  | Do you have current CPR training? |

Do you have a tent that could be used for the overnight on 06/18/2020? Yes No

For Office Use Only: HF\_\_\_\_ Amt Paid\_\_\_\_\_\_\_\_\_\_ Check \_\_\_\_ Cash\_\_\_\_\_ Cookie Credits \_\_\_ Amount Due\_\_\_\_\_\_\_\_\_\_\_\_\_ Reminder letter sent \_\_\_\_\_\_\_\_\_\_