



JUNIOR LEADER APPLICATION

We request that you please include a photo with your application.

Return completed form via one of the following:
1. Mail or Drop off at our office location
2. Email – doc@theyofacadiana.com
3. Fax - (337) 993-9632

Name _____ Age/Birthday _____ M/F _____
 Address _____ City _____ St _____ Zip _____
 Mom's Name _____ Cell _____ Work _____
 Dad's Name _____ Cell _____ Work _____
 Home Phone _____ Email _____

Emergency Contact (other than parent):

Name _____ Cell/Work #s _____
 Name _____ Cell/Work #s _____

You must be 13 years of age by the first day of Summer Camp and have participated as a YMCA camper for one complete summer in order to be eligible for the Junior Leader Program.

Are you willing to devote time and energy toward being an active Junior Leader?

What other interests or school organizations are you involved in?

What is your current GPA? (Please provide current report card) _____.

I understand that the Junior Leaders Program is not a paid position and that all of my time is voluntary. _____

As a Junior Leader I am responsible to: CEO, Sr. Program Director, Program Director and Camp Counselors.

General Responsibility as a Junior Leader: To identify and meet camper needs; to carry out camp programs; to fulfill all responsibilities assigned by administrative staff; to provide a positive role model for all campers and staff

***Please write an essay about your experience as a camper and why you would like to become a YMCA Junior Leader.**

HEALTH INFORMATION

1. Is there any reason for physical restriction and to what extent?
2. Any medication to be taken during camp? If so, ask about medicine release form.
3. Any other medical information you feel would help the YMCA serve your child?
4. If medical attention is required, what Doctor or Hospital do you prefer?

WAIVER

I understand that the YMCA of Acadiana assumes no responsibility for injuries or illness that my child may sustain as a result of physical condition or resulting from participation in any athletic activities.

I specifically waive, give up, and release the YMCA and staff from liability from any claim for damages which I or my child may have relating to injuries or illness that he/she may sustain at the YMCA while participating in YMCA activities. I agree to indemnify and hold harmless the YMCA from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities equipment of the YMCA or participating in any programs affiliated with the YMCA whether caused by the negligence of the YMCA or otherwise.

In signing the waiver, I certify that my child is in good health with no chronic illness or abnormal tendencies. In the event of any emergency in which my child requires medical care, I authorize the YMCA to act for me, and to obtain for him/her whatever medical treatment the staff in its best judgment deems necessary and appropriate; including, but not limited to, whatever medical and/or dental examination, diagnosis, and/or treatment is deemed necessary.

I understand the YMCA of Acadiana is NOT responsible for personal property lost or stolen while members and/or program participants are using YMCA facilities or on YMCA premises. The YMCA reserves the right to expel any participant for bad behavior, lewd conduct, or physical confrontation with another camper or YMCA staff personnel.

I give permission to the YMCA of Acadiana to use, without limitation or obligation, photographs, film footage, or tape recordings, which may include my image or voice for purposes of promoting or interpreting YMCA programs.

The fee associated with Junior Leader participation is \$300, and must be paid by the second week of camp in order to continue participation. Signing below indicates that you have read and agree to these terms.

Parent's Signature _____

Junior Leader Applicant Signature _____

T-Shirt Size (**Please write in size needed**): Youth _____ Adult _____