

Volunteer Application/Information Sheet

Name _____ Camp Name: _____

Address _____

Phone # _____ Cell # _____

Email Address _____

T-Shirt Size _____

Are you already a registered Girl Scout? _____ Volunteer/Background Check done? _____

Are you able to volunteer all week or only prior to camp? _____

Have you worked at Day Camp before? Where? _____

How long have you been involved with Girl Scouts? _____

Do you have a troop? Level? _____

Would your daughter / son / tag along be coming to camp? Child 1 - age/grade _____

Child 2 - age/grade _____ Child 3 - age/grade _____

Are you currently CPR/FA trained? _____ Expiration date? _____

What other certifications do you currently hold? _____

Would you like to lead a unit? _____ What grade? _____

Would you like to lead a program? _____ What type? _____

What experience do you have with the program or grade you have chosen?

What skills do you have that will make you an asset to our Twilight Camp team?

What are your favorite hobbies you'd like to share with girls? _____

Our theme is "Girl Scouts of Wild Western Washington" What ideas would you like to share to encompass this theme for the girls?
