

Nature Camp Counselor Volunteer Application 2022

Tauxemont Cooperative Preschool
7719 Fort Hunt Road
Alexandria, Virginia 22308

Date _____

Counselor's Name _____ Female _____ Male _____

Home Phone _____ Phone _____

E-mail Address _____

(The above e-mail address should be checked daily and will be used as our main way of communicating)

Address _____

City _____ State _____ Zip Code _____

Counselor's Birth Date _____ Age _____ (as of June 2022)

School you attend _____

If under 18 years of age

Mother/Father/Guardian _____

E-Mail Address _____

Phone: _____

Please check your session preferences:

| | |
|--|--|
| <u>Morning Camp</u> | <u>Afternoon Camp</u> |
| <input type="checkbox"/> AM Session 1 "On A Mountain" June 6 - 10 | <input type="checkbox"/> PM Session 2 "On The Farm" June 13 - 17 |
| <input type="checkbox"/> AM Session 2 "On The Farm" June 13 - 17 | <input type="checkbox"/> PM Session 3 "In The Sky" June 20 - 24 |
| <input type="checkbox"/> AM Session 3 "In The Sky" June 20 - 24 | |
| <input type="checkbox"/> AM Session 4 "At The Beach" Jun 27 - July 1 | |
| <input type="checkbox"/> AM Session 5 "In Our Backyard" July 4 - 8 | |

References: Please provide the names of two non-relative references, and their phone numbers:

1. _____ Relationship (teacher, etc.) _____ Phone _____

2. _____ Relationship (teacher, etc.) _____ Phone _____

Have you volunteered at Nature Camp in the past? _____ If yes, When? _____

Please list other current and past volunteer work.

Why do you want to be a counselor? _____

Special requests: _____

Please return completed application along with your health form to Tauxemont Cooperative Preschool at the above address, attention: Nature Camp or place them in the red box located in the school parking lot.