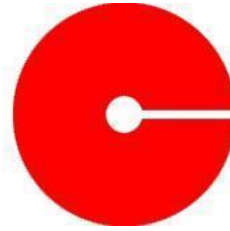


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**Summer Camp Aide Application**

Name:

Phone #:

Email Address:

Home Address:

DOB:

How did you hear about the Summer Camp Aide position?

What interests you about this opportunity?

What are you able to offer the position that will make you a good a camp aide?

Any prior volunteer experience? If so, please elaborate.

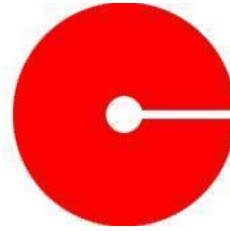
Please list one reference below (teacher, employer, etc):

- Name:
- Phone number:
- Email:
- How does this person know you?

Which of the following are you interested in?

- A. Morning Camp (9:00am-1:15pm) B.  
Afternoon Camp (1:15pm-4:45pm) C.  
Full Day (9:00am-4:45pm)

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Which week(s) you would be available to volunteer?

Week 1 June 17-21

Week 2 June 24-June 28

Week 3 July 1-July 5 (4 day week)

Week 4 July 8-July 12

Week 5 July 15-July 19

Week 6 July 22-July 26

Week 7 July 29-August 2

Week 8 August 5-August 9

Week 9 August 12-August 16

Week 10 August 19-August 23

Week 11 August 26-August 30

**Please return your application to Geraldine Ong, Director of Education**

**Programs & Operations at [gong@ccabedminster.org](mailto:gong@ccabedminster.org)**