

Day camp volunteer registration form

Adult's name _____

Birth date _____ Gender: male female Shirt size _____

Position of interest: Please check the position you are interested in: Unit leader Assistant unit leader

Address _____ City _____

State _____ County _____ ZIP _____ E-mail address _____

Home phone _____ Work phone _____ Cell phone _____

Authorization section: I give permission for all photos and videos of me at camp to be used for public relations purposes for Girl Scouts of Central Indiana. I understand that I must contact the Camping Services Department or the camp director immediately if I am unable to attend camp.

Signature _____ Date _____

Transportation

Check one: Car rider Bus rider (Dellwood, Na Wa Kwa and Sycamore valley only)

If bus rider, bus stop code _____

Bus stop location _____

Session information

Check one:

Dellwood

Na Wa Kwa Sycamore Valley

Session number: (circle one)

1 2 3 4 5 6 7

Date of session _____

With what age girls do you prefer to work with?

Girl Scout Daisy (Kindergarten-1)

Girl Scout Brownie (Grades 2-3)

Girl Scout Junior (Grades 4-5)

Girl Scout Cadette (Grades 6-8)

Fee waiver information

Name of the girl you are waiving the day camp fee for:

Return your application and the above girl's application together.

To waive the total camp fee for your daughter or Girl Scout of your choice, you must attend the pre-camp meeting, attend camp Monday through Friday, and stay on the overnight (Thursday night).

Disabilities

Please check if you need American Disabilities Act assistance. Explain _____

Do you wish to be in the same unit as your daughter?

Yes No

Daughter's name _____

You will be assigned based on the needs of the day camp session, not necessarily with your daughter.

You are required to be a registered Girl Scout member to work as day camp volunteer staff.

Are you currently a registered member of Girl Scouts of Central Indiana?

Yes, troop # _____ Service unit _____

Out of council
Council name _____

No, non-Girl Scout

If no, submit an adult membership registration form, volunteer application, and \$35 with camp registration.

Experience and skills

Have you worked day camp before? Yes No

If yes, what years? _____

Position(s) held _____

Which day camp _____

Day camp volunteer registration form continued

What skills do you have?

- Crafts Firebuilding Nature Knots Songs Compass Game Outdoor cooking
- Additional areas not listed _____

Stop here unless you are registering tag-a-longs.

Day camp tag-a-long registration

The tag unit is for children of adults working as camp volunteers only.

Note: Camp Na Wa Kwa does not permit Tags

Name of child / children registering for tag unit: _____

1. Girl Boy Shirt size _____

Date of birth _____ Grade in the fall _____

2. Girl Boy Shirt size _____

Date of birth _____ Grade in the fall _____

3. Girl Boy Shirt size _____

Date of birth _____ Grade in the fall _____

Please check if you need American Disabilities Act assistance. Explain _____

If yes, which child? Please list the number beside the child's name from above # _____.

Parent permission: I give my child (children), _____, permission to participate in all phases of the Girl Scouts of Central Indiana day camp tag-a-long program. I understand the arrangements as stated in the camp information. I will not allow my child (children) to attend camp if my child (children) has (have) been exposed to any contagious disease, and I will notify the camp director if this is the case. In an emergency, when neither I nor the emergency contact person named can be reached, I hereby authorize the camp director to take any action deemed necessary for the best interests of my child (children). I give permission for all photos and videos of my child (children) at day camp to be used for public relations purposes for Girl Scouts of Central Indiana.

Signature of parent/guardian _____ Date _____

Payment Information

Number of tagalong children = _____ x \$40 = _____ (Total amount due)

MasterCard Visa American Express Discover

(American Express, Discover can not be used for online registration. Registration must be completed on paper registration form.)

Card number _____ Expiration date _____ Amount to be charged \$ _____

Name of credit card holder _____ Signature _____



Note: No refund will be given for any amount below \$5. Refunds are given only if cancellation is received at least two weeks prior to sessions. \$25 of fee will be retained for handling charges. Bus fees are not refundable.

Visit our website for online registration • girlscoutsindiana.org

Additional forms are available at any Girl Scout service center, by calling 317.924.6800 or 855.GSCIN.4U, on our website at girlscoutsindiana.org, or forms may be duplicated.

For office use only

Receipt to:

10-5230-300-2700-XXXX-190 (Dellwood)

10-5230-300-2700-XXXX-210 (Na Wa Kwa)

10-5230-300-2700-XXXX-220 (Sycamore Valley)

\$35 Membership fee if needed \$ _____

\$40/child Tagalong fee \$ _____

Round up \$ _____

Amount enclosed \$ _____

Cash

Check # _____

Charge _____

Round Up
to help a
girl come to
camp!