



**2024 Holy Family Catholic School Summer Camp
2024 Junior Camp Assistant Application**

The Jr. Camp Assistant Training Program is an exciting professional development opportunity for rising 9th–12th grade students who are interested in working with children in an educational setting during our summer camp. Students may apply to assist camp educators with the day-to-day camp activities, such as setting up activities, prepping supplies, assisting campers with daily activities, and more. Be sure to check with your school for volunteer hours or community service credit! Interested students (and their parents) should complete the application attached and return it to Summer Camp Director, Sara Sparks, for review. Families will receive an email to confirm application and an initial virtual interview will be scheduled. Only a few spots will be filled based on performance and attendance during camp sessions. Applications can be submitted via email. Please email or call with any questions. Phone Number: (239)383-4486 Email: MakeBakeandDestroy@gmail.com

Please mark desired camp weeks/grade levels, noting that we can guarantee week selections but not necessarily grade levels. We assign Junior Camp Assistants based on experience, programmatic needs, and best fit.

Week 1 (June 3-7)	Week 2 (June 10-14)	Week 3 (June 17-21)	Week 4 (June 24-28)	Week 5 (July 1-5) No Camp July 4	Week 6 (July 8-12)	Week 7 (July 15-19)
___ Grades K-2	___ Grades K-2	___ Grades K-2	___ Grades K-2	___ Grades K-2	___ Grades K-2	___ Grades K-2
___ Grades 3-5	___ Grades 3-5	___ Grades 3-5	___ Grades 3-5	___ Grades 3-5	___ Grades 3-5	___ Grades 3-5
___ Assist with Themed Clubs	___ Assist with Themed Clubs	___ Assist with Themed Clubs	___ Assist with Themed Clubs	___ Assist with Themed Clubs	___ Assist with Themed Clubs	___ Assist with Themed Clubs

Do you have experience working with children? Please describe: _____

What experience do you have with STREAM (Science, Technology, Religion, Engineering, Art and Math)? _____

Why do you want volunteer at camp? _____

Can you commit to at least a full week of volunteering? ___ YES ___ NO. If NO, why not? _____

JCA First Name: _____ JCA Last Name: _____ Age: _____ Birthdate: _____

Grade Level: _____ School Name: _____

Home Address: _____

Home Phone: _____ Mobile Phone: _____

Email Address: _____

Allergies: _____

Special Needs: _____ Medical Conditions: _____

Parent/Guardian Name: _____ Relationship: _____

Parent/Guardian Mobile Phone: _____ Alternate Phone: _____

Parent/ Guardian Email Address: _____

Alternate Emergency Contact Name: _____ Relationship: _____

Alternate Emergency Contact Mobile Phone: _____

I, the undersigned, in my individual capacity as parent or guardian of the minor child named in this application, hereby release and hold harmless Make, Bake and Destroy, its employees, instructors, volunteers, and supervisors, from any and all liability, actions, causes of action, debts, claims, demands or other liability of every kind and nature whatsoever which may arise from or in connection with my child's participation in any activities sponsored through Make, Bake and Destroy, whether caused by ordinary negligence or otherwise; or damages, both personal and property, arising out of or as a result of said minor child's attendance at camp. I assume all risks incident thereto with respect to myself and to any other individuals for whom this registration is made. I give permission for the Make, Bake and Destroy staff to provide any medical assistance they feel appropriate for my child named above. I also give permission for any emergency personnel to treat my child in the event of an emergency. I will be responsible for any and all medical expenses that may be incurred. In case of emergency, Make, Bake and Destroy has my permission to have my child transported to and treated at a local hospital. This signed agreement will serve as a release or assumption of risks for my heirs, executor and administrators, assigns, or next of kin and for members of my family. If any portion of this release is found invalid, the balance will remain in full legal force and effect. I hereby authorize the Make, Bake and Destroy personnel to photograph, film, and/or interview the student during the summer camp program, to prepare slide presentations, photographs, video, and computerized multimedia in which the student named in this application will appear, so as to inform the public about the Make, Bake and Destroy education programs.

Parent/Guardian, please initial and sign below:

- _____ I understand that there will be a mandatory training prior to the start of camp that all Junior Camp Assistants must attend.
- _____ I understand there is a \$30 program fee due by the training session that covers the cost of a shirt, nametag, training, and all other Junior Camp Assistant programmatic needs.
- _____ I understand that my child's participation in the Junior Camp Assistant program is contingent upon their ability to arrive on time, volunteer full shifts, minimize missed days, actively assist with camp, and demonstrate appropriate behavior while at camp.

Parent/ Guardian Signature

Parent/Guardian Printed Name

Date