

Teen Camp Volunteer Application

| Date | | | | | |
|--|---|--|--|--|--|
| First NameLa | ast Name | | | | |
| Street Address | | | | | |
| City/State/Zip Code | | | | | |
| Home Phone | Cell Phone | | | | |
| Birth Date | | | | | |
| School Name | Grade | | | | |
| Are you 14 years of age or older?yesn | | | | | |
| • • | erious crime? If yes, please describe the nature of the | | | | |
| T-shirt Size:SMLXL2XL (Volunteers are required to wear the camp T-shirt provided by Imagination Station.) | | | | | |
| Parent/Guardian Information | | | | | |
| Parent/Guardian First Name | Last Name | | | | |
| Work Phone | Cell Phone | | | | |
| Email | | | | | |
| Emergency Contact if you are not available: | | | | | |
| Phone # Relationsh | nip | | | | |

Please return completed application to:

Imagination Station Attn: Aubry Hall 1 Discovery Way Toledo, Ohio 43604



Teen Camp Volunteer Rules and Regulations

We're happy that you are interested in applying to be a Teen Volunteer! All Teen Volunteers represent Imagination Station. We ask that you conduct yourself in a mature manner and live up to the trust placed in you. Please read the following information carefully.

Procedures & Regulations

- Be attentive and friendly to campers, complete your assigned duties and offer to help team members whenever you see a need.
- Be punctual. Team members count on you to arrive on time for your scheduled shift Monday through Friday. If you are ill, please notify your supervisor as soon as possible.
- Sign in upon arrival and sign out upon departure.
- Report to your designated team member at the beginning of your shift.
- Model good behavior and language since you are a role model for younger campers.
- Maintain the confidentiality and privacy of campers.
- Wear the proper shirt/identification required by Imagination Station.
- Adhere to the required dress code. Pants or shorts should be black and not be torn.
- Do not chew gum or eat while on duty unless directed by team members at snack times in appropriate areas.
- Texting and cell phone use is not allowed while volunteering. Cell phones should remain turned off during your shift.
- Leave personal belongings such as cameras, MP3 players, etc. at home. Imagination Station is not responsible for any damaged, lost or stolen items. A locked area will be available for purses, etc.
- Remain in your assigned area. Volunteer counselors should not leave Imagination Station's premises while on duty under any circumstances.
- Assure that you are dropped off and picked up no later than 15 minutes before your shift starts or after your volunteer shift ends.
- Never bring a friend or relative with you while you are volunteering.
- Report any illness or accident while on volunteer duty to your supervisor.
- Adhere to Imagination Station's Drug Free Policy.

Unacceptable behavior which may result in dismissal from the program includes, but is not limited to:

- Violation of Imagination Station's drug-free environment.
- Absenteeism.
- Unbecoming behavior, including but not limited to a negative attitude and unwillingness to follow directions.
- Violation of the dress code.



- Evidence of loss of interest in volunteer service, such as leaving your assigned area or not completing assigned tasks.
- Inappropriate language.
- Eating or chewing gum while volunteering.
- Using cell phones or other personal electronic devices while volunteering.

I have read and agree to abide by the above standards and perform all duties assigned to me. I understand that unacceptable behavior may result in disciplinary action or dismissal from the Teen Summer Camp Volunteer Program.

Volunteer Name (Print)

Volunteer Signature _____ Date _____

Parent/Guardian:

I understand my support is vital to the success of my child's volunteer experience. I will remind my child of the dress code and appropriate behavior. I will also make sure that my child has transportation and that they are dropped off and picked up promptly. I understand that my child will arrive and be picked up no more than 15 minutes before their shift begins and after their volunteer shift ends. _____ (parent's initial)

I have reviewed the above standards in regard to the Teen Summer Camp Volunteer Program.

| Parent Signature |] | Date | |
|------------------|---|------|--|
| | | | |

Parent Daytime Phone Number _____



Please write a half-page response to the following question:

"Why would you like to volunteer at Imagination Station as a Teen Summer Camp Volunteer?"



Check the dates, times and camps you prefer:

Teen Volunteers are required to work a minimum of three camps. You must be able to commit to a full week, Monday through Friday. You may select either morning (8:30am - 1pm) or afternoon (1pm - 5:15pm) shifts. For more details about the camp themes, please visit **imagination**station**toledo**.org/SummerCamp.

Please select your availability below.

June 6 – 10 Pirate-ology

Campers will be ages 6 – 8 Morning Shift

Make. Code. Create. Campers will be ages 9 – 13 Morning Shift Afternoon Shift

Make. Code. Create. Campers will be ages 9 – 13 Morning Shift Afternoon Shift

June 20 – 24 Pirate-ology Campers will be ages 6 – 8 Morning Shift Afternoon Shift

Make. Code. Create. Campers will be ages 9 – 13 Morning Shift Afternoon Shift June 27 – July 1 Super Splatter Science Campers will be ages 6 – 8 Morning Shift Afternoon Shift

Super Splatter 2.0 Campers will be ages 9 – 13 Morning Shift Afternoon Shift

July 4 – 8 Super Splatter Science Campers will be ages 6 – 8 Morning Shift Afternoon Shift

Super Splatter 2.0 Campers will be ages 9 – 13 Morning Shift Afternoon Shift

July 11 – 15 Super Splatter Science Campers will be ages 6 – 8 D Morning Shift Afternoon Shift

Super Splatter 2.0 Campers will be ages 9 – 13 Morning Shift Afternoon Shift July 18 – 22 Campers Guide to the Galaxy Campers will be ages 6 – 8 Morning Shift Afternoon Shift

Game On! Campers will be ages 9 – 13 Morning Shift Afternoon Shift

July 25 – 29 Campers Guide to the Galaxy Campers will be ages 6 – 8 Morning Shift Afternoon Shift

Game On! Campers will be ages 9 – 13 Morning Shift Afternoon Shift

August 1 – 5 Campers Guide to the Galaxy Campers will be ages 6 – 8 D Morning Shift Afternoon Shift

Game On! Campers will be ages 9 – 13 Morning Shift Afternoon Shift

If selected as a Summer Camp Volunteer,

you will need to attend one day of training (9am - 2:30pm). Please choose your preferred day below.

Giriday, May 27

Saturday, May 28



Letter of Reference Form

Please have a teacher, coach or school counselor that you have had within the last two years complete the following Letter of Reference. Please note: No form letters or letters from family or friends will be accepted.

| Teen Applicant Name | |
|---|---|
| Reference Name | |
| School Address | |
| Email | |
| How do you know the Teen Applicant? | |
| How long have you known this person? | |
| Has the applicant proven to be dependable with regards to se | chedules? |
| Has the applicant proven to be good at following instructions | ? |
| Please explain why you feel this applicant would make a good | d Teen Camp Volunteer at Imagination Station. |
| | |
| | |
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| | |
| | |
| Signature | Date |