Name: ____________________________________   Phone (for texting): ________________________________

Email: ____________________________________   Parent Name: ____________________________________

Parent Phone: ________________________________   Parent Email: ____________________________________

School Currently Attending: ___________________________   Current Grade: __________

AVAILABILITY & CAMP DATES & TIMES
Please mark all available weeks and circle preferred time. Low availability may result in denial.

Times: Full Day: 8:30am - 3:15pm   Half Day: 8:30am - 12:30pm   Afternoon: 2:00-6:00pm

____ June 8th - 12th   Full Day
____ June 15th - 19th   Full or Half Day
____ June 22nd - 26th   Full Day or Afternoon
____ June 29th - July 2nd   Full Day (Mon-Thur)
____ July 6th - 10th   Full Day
____ July 13th - 17th   Full Day
____ July 20th - 24th   Full Day or Afternoon
____ July 27th - 31st   Full or Half Day
____ August 3rd - 7th   Full Day or Afternoon

Mandatory Training is on Saturday, June 6th 1:30pm - 9:30pm. Are you available?    Yes ☐ No ☐

Do you have any medical conditions or allergies we should be aware of? YES ☐ NO ☐ If Yes, please explain: __________________________________________

Why are you interested in becoming a Junior Counselor?
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________

What qualities do you possess that will assist you in becoming a good camp counselor?
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________

List previous experience working with children.
_________________________________________________________________________________________
_________________________________________________________________________________________
_________________________________________________________________________________________

T-Shirt Size (Circle One):
Youth Unisex Size:    L           Adult Unisex Size:     S       M       L        XL       XXL
Name: ____________________________________________________________________
Last      First    Middle
Address: ______________________________City & State: _______________ Zip:________
Home Phone: (____)_______________________ Work Phone: (____)____________________
Cell Phone: (___)__________________________ E-mail Address: ____________________

1. Do you have a volunteer assignment in mind? Please select the programs that interest you most:
   □ Aquatics   □Art   □Camps  □Dance  □Golf
   □ Nature Programs  □ Older Adults □ Parks   □ Photography
   □ Programs for Disabled   □ Sports—Adult  □ Theatre Arts/ Drama
   □ Youth Programs  □ Undecided  □ Other:_____________________

2. Do you have any special skills or training (such as computers, dance, singing) that you can share?
__________________________________________________________________________________

3. What is your current employment status?
   □ Employed full or part-time    □ Student      □ Retired      □ Work in home    □ Self-employed
   □ Other. If employed, please list employer and profession. If student, please list grade and
   school._________________________________________________________________________

4. What is your highest level of education completed?
   □ Student (6-12th grade)    □ High School Grad.     □ Some College   □ College Grad./Graduate Degree

5. Comments or other information you wish to share:
_______________________________________

6. When are you available to work? Summer Only Position.
   Monday:  □ Morning  □ Afternoon □ Evening
   Tuesday: □ Morning  □ Afternoon □ Evening
   Wednesday: □ Morning  □ Afternoon □ Evening
   Thursday: □ Morning  □ Afternoon □ Evening
   Friday: □ Morning  □ Afternoon □ Evening
   Saturday: □ Morning  □ Afternoon □ Evening
   Sunday: □ Morning  □ Afternoon □ Evening

   Emergency Contact Information
   Name of person to contact & relationship
   ________________________________________________________________________________
   Phone number: _________________________________________________________________

Volunteer Declaration
• I hereby certify that all statements made in this application are true. I hereby declare under penalty of perjury that any information
  provided is true and correct.
• I agree and understand that misstatements or omissions of materials or facts herein may forfeit my rights to volunteer and H.A.R.D.
  may immediately cease allowing me to perform voluntary services, without notice. In seeking to be accepted as a H.A.R.D. volunteer I
  understand that my volunteer assignment may be terminated at any time, without notice.
• I hereby agree to indemnify and hold H.A.R.D. harmless from any and all claims, causes of action, suits, actions, damages, losses or
  liability arising out of volunteering or termination of my volunteer services rendered to H.A.R.D.

Signature ________________________________________ Date _________________________

Parent signature if volunteer is under 18 years old: _______________________________________

If under 18, what is your date of birth? _____________________________________________________
Volunteer Commitments and Policies

- I will perform only the duties described by the job description and/or my site supervisor or coordinator.

- I will always work with children in a location that is supervised by HARD staff and will notify the supervisor if I am ever asked to work in an unsupervised setting.

- I will not obtain phone numbers, e-mail addresses, or home addresses from children.

- I will not socialize with the children outside of the program.

- I will follow HARD rules and behave appropriately. I will support HARD policies.

- I will honor confidential information.

- I will be free of the influence of alcohol or illegal substances when volunteering.

- I will never purposefully endanger the life or health of a child.

- I will inform the supervisor of any changes in my address, phone numbers, or emergency contact. I will inform the supervisor if I will be absent or when I stop volunteering.

- I have read the above commitments and policies and understand that I may be dismissed at any time as a volunteer.

Volunteer Signature:______________________________ Date: ________________

Parent/Guardian Signature:__________________________ Date: ________________

(If under 18 years of age)
SULPHUR CREEK NATURE CENTER
Areas of Interest

Besides working with animals, Sulphur Creek Nature Center has many other operations. Below is a listing of the various jobs that are done, with a short description of each. Please take time to read these over and check those areas that you would be interested in.

_____ Wildlife Camp Counselor - Help oversee camp, enjoy games, crafts, and help kids learn about nature.

_____ Wildlife Volunteer - Care for both resident animals living permanently at Sulphur Creek and injured or orphaned animals being rehabilitated. Duties include cleaning, feeding, and assisting with the Lending Library.

_____ Convalescent Hospital Visits - Participate with a team of volunteers that visits convalescent hospitals with live animals.

_____ Fundraising - Help organize and staff fundraising events and solicit donations.

_____ Wildlife Docent - Assist naturalists with educational programs. Duties include leading school and public tours, staffing booths at fairs, and helping at special events. (Age 18 and up)

_____ Discovery Center Volunteer - Care for the reptiles, amphibians, fish, and arthropods in the Discovery Center. Duties include cleaning, feeding, setting up displays, and animal enrichment.

_____ Clerical Volunteer - Assist in answering phones, mailings, record keeping, computer data entry, and greeting the public.

_____ Gardener - Help maintain the wildlife garden and landscaped areas in the park.

For the above checked area, please list any special training or education you have that would help you out in these jobs. Also list any hobbies, special skills or “life-long interests” you might have that would be appropriate.

_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

BIRTHDATE: ____________________________________________

For Office Use Only

Called Date_____by_____ Comments___________________________________________

Date_____by_____ Comments___________________________________________

☐ Never returned call

Assignment  ☐ Rehab  ☐ Docent  ☐ Clerical  ☐ Vet  ☐ Gardening  ☐ Fundraising  ☐ Museum  ☐ Special Events

Orientation Date_________________________________________