

Orangevale Recreation & Park District 6826 Hazel Avenue, Orangevale CA 95662 916. 988.4373 FAX/916.988.3496 info@ovparks.com OVparks.com

## Junior Leader Application - Rec'ing Crew Summer Day Camp

		Applicant Infor	mation			
Full Name:		Birth Date:			re:	
	Last	First		M.I.		
Address:	Street Address				Apartment/Unit #	
	Street Address				<i>Араптепиот</i> п #	
	City			State	ZIP Code	
Phone:		Email				
I am available to volunteer on the following days (checked) and times (checked):						
Mo Days: [	ON TUE WED THUR FRI	Mornings Times: ☐	Afternoons	Evenings	T-Shirt Size (Youth / Adult):	
I am not available during these summer dates (vacation dates):						
Have you ev	er volunteered for OVparks?	YES NO If yes	s, when?			
Education School:				_Grade:		
		Guardian Inforr	nation			
Full Name:				Relationship:		
Address:						
Email:				-		
		Reference	s			
Please list one reference, other than a relative, that knows you and can tell us about your work habits, skills, previous volunteer experiences or work experiences.						
Full Name:				Relationship:		
Company:						
Email:				-		
		- Francisco -				
Please share any experience you have that has prepared you for this role (babysitting, teen/youth leadership, tutoring, volunteering, etc.):						
What are some of your relevant or irrelevant skills/Interests (include hobbies, sports, clubs, personal skills etc.):						
List any certi	fications you have (CPR/First Aid):					

## Junior Leader Application – Rec'ing Crew / Wiggles & Giggles Summer Day Camp

	Emergency Contact			
In case of emergency, we will contact the gu	ardian first. (information must be differe	nt than guardian information):		
Full Name:	: Cell Phone:			
Relationship:	Home	Home Phone:		
Address:				
D	isclaimer and Signature			
Potential Jr. Leaders must complete this app The Rec'ing Crew Summer Day Camps are and week. If chosen to be a Jr. Leader, appl depending on availability. Jr. leaders are vol in the summer camp itself. There are manda preparation for the camp. More information of Please note volunteer positions with the Ora work performance & behavior during the pro-	olication themselves and interview to be scheduled for June 16 – August 8, 2024 icants will be given a "shift" of at least 4 unteer helpers, assigned to aid OVparks atory training dates in mid-June to refine regarding training will be given at the indungevale Recreation & Park District are considered.	I. Camp hours vary by camp hours, twice a week, s staff and are not participants leadership skills in lividuals leadership interview.		
I acknowledge the dates and disclaimers complete to the best of my knowledge.	of this program and certify that my a	nswers are true and		
Applicant Name:				
Applicant Signature:		Date:		
In consideration for being permitted by waive, release, and discharge any and all which I may have, or which may hereafter release is intended to discharge in adva agents) from any and all liability arising of even though that liability may arise out of persons or entities mentioned above. It is to be binding on my heirs, administrated OVparks (including its officers, employeliability, damage, cost, or expense which said activity. Additionally, I fully understame to the risk of personal injury, deat damage. I hereby acknowledge that I am such risks.	er accrue to me, as a result of participate of the connected in any way with my of active or passive negligence or carefurther agreed that this waiver, releases, executors, and assigns and that ees, volunteers, and agents) free an may arise out of or connected in any and that my participation in the above the communicable diseases, illnesse voluntarily participating in this activity.	ipation in said activity. This employees, volunteers, and participation in said activity, elessness on the part of the se and assumption of risk is I shall indemnify and hold and harmless from any loss, way with my participation in-referenced activity exposes s, viruses, and/or property ty and agree to assume any		
PHOTO/VIDEO RELEASE: I understand hereby grant OVparks permission to use materials.	that photographs/videos may be take any such photo(s)/video(s) for advert	n during this activity and ising or in promotional		
PARENTAL CONSENT: (to be complete of age) I hereby consent that my son/dau above activity, and I hereby execute the athat said minor is physically able to partipersons and entitles mentioned above freexpense which they may incur as a result sustain while participating in said activity	ghter,	participate in the on his/her behalf. I state to indemnify and hold the ty, damage, cost, or		
I HAVE CAREFULLY READ THIS AGREEMENT AM AWARE THAT THIS IS A RELEASE OF LIA SIGN IT OF MY FREE WILL.				
Guardian Name (Print)	Guardian Signature			