

Childrenâ€™s Art Camp Volunteer Application Form

Full Name

Date of Birth

Address

Phone Number

Email

Emergency Contact Name & Relationship

Emergency Contact Phone

Relevant Volunteer or Work Experience

Skills or Artistic Background

Availability (camp weeks, days, hours)

Why do you want to volunteer at the Childrenâ€™s Art Camp?

Reference (name and contact)

☐ I am 18 years or older

☐ I consent to a background check if required