

Camp Mitre Peak Volunteer Application

Full Name	me		Date	
Address	City	State	Zip	
Phone NumberE	-mail			
Dates Available				
☐ Camp Session 1 June 22 – June 28, 20	<u>25</u>			
☐ Camp Session 2 June 29 – July 5, 2025	<u>.</u>			
☐ Camp Session 3 July 6 – July 12, 2025				
Do you have resident camp experience?	Yes	No		
If yes, please list your experience				
Are you a current volunteer with GSDSW?	Yes	No		
Have you ever been convicted of a felony?	Yes	No		
If yes, explain				
Occupation	Employer _			
Business AddressPhone Number				
List three persons not related to you who can experience as a volunteer, one reference shou		· ·		
1. Full Name		Relationship		
Address	City	State	Zip	
Phone NumberE	-mail			
2. Full Name		Relationship		
Address	City	State	Zip	
Phone NumberE	-mail			
3. Full Name		Relationship		
Address	City	State	Zip	
Phone NumberE	-mail			
I certify that my answers are true and complete	te to the best of my	v knowledge.		
I am acquainted with and subscribe to the prin a volunteer, I also agree to maintain my Girl So responsibilities to the best of my ability.				
Signature	Date			