



GWINNETT COUNTY  
COMMUNITY SERVICES AND PARKS & RECREATION  
**CAMP AIDE VOLUNTEER APPLICATION**

Complete the application and email to [CommunityServices@GwinnettCounty.com](mailto:CommunityServices@GwinnettCounty.com), [Parks@GwinnettCounty.com](mailto:Parks@GwinnettCounty.com) or drop off at preferred site by April 21. Applicant must be 14 by the first day of selected participation.

**CAMP LOCATIONS** (select preferred location; complete one application per site)

**Berkeley Lake**

Pinckneyville Park CRC

**Buford**

- Bogan Park CRC
- Gwinnett Environmental & Heritage Center
- OneStop Buford

**Duluth**

Shorty Howell Park Activity Building

**Lawrenceville**

- Rhodes Jordan Park CRC
- Bill Atkinson Animal Welfare Center

**Lilburn**

- Lilburn Activity Building
- Mountain Park Park Depot

**Norcross**

- Best Friend Park Gym
- Lucky Shoals Park CRC

**Stone Mountain**

- Mountain Park Activity Building

**Suwanee**

George Pierce Park CRC

**CAMP AIDE INFORMATION**

Name: \_\_\_\_\_ Application date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Date of birth: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Do you have previous experience as an aide or assistant with another camp program? Yes No

If yes, describe: \_\_\_\_\_

Have you attended any teen leadership training? Yes No

If yes, describe: \_\_\_\_\_

List your volunteer experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe any special skill or interest that you could share or teach during camp:

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**PARENT OR GUARDIAN INFORMATION**

Parent or guardian name: \_\_\_\_\_

Email: \_\_\_\_\_ Phone(s): \_\_\_\_\_

Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Emergency contact: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

Volunteer medical alert or allergies: \_\_\_\_\_

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**DATE PREFERENCE** (*Mark the weeks you prefer to volunteer; there is no camp June 30 – July 4*)

\_\_\_\_\_ May 27 – May 30 (*only available Environmental and Heritage Center*)

\_\_\_\_\_ June 2 – 6    \_\_\_\_\_ June 9 – 13    \_\_\_\_\_ June 16 – 20    \_\_\_\_\_ June 23 – 27

\_\_\_\_\_ July 7 – 11    \_\_\_\_\_ July 14 – 18    \_\_\_\_\_ July 21 – 25

\_\_\_\_\_ July 28 – August 1 (*only available Environmental and Heritage Center*)

**T-SHIRT SIZE** (required; \$21/shirt)

Adult small    Adult medium    Adult large    Adult x-large    Adult xx-large

Quantity needed: \_\_\_\_\_

If accepted as a Camp Aide, I \_\_\_\_\_ understand that the camp staff depends on me to volunteer for a minimum of two weeks, and I will be required to follow instructions and perform other duties requested by the supervisor. Electronics, including cell phones, cannot be used while volunteering. Gwinnett County Government is not responsible for lost or stolen items. Accepted Camp Aides must complete a background check and fingerprinting as required by the State of Georgia Department of Early Care and Learning.

Camp Aide applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_