



# CAMP BOLD 2020 COUNSELOR APPLICATION

Office Use  
 Date Received: \_\_\_\_\_  
 Session: 1    2    3    4  
 Payment: \_\_\_\_\_

Counselor Name:		Application for: _____ Peer Partner    _____ Helper (working 1 on 1 with camper)	
Address (Street):	City & State	Zip Code:	Age:
Parent(s)/Guardians(s) Name:		Grade for 2020 - 2021 School Year:	
Parent Contact Phone Number:		School:	
Emergency Contact Name and Phone Number:		Gender: _____ Male    _____ Female	
Email Address: (This is how we will contact you. Print neatly!)		Counselor Cell Phone Number:	

Sessions:  
**(Rank preference by numbering "1, 2, 3, 4." Put an "X" on any week you CANNOT work.)**

Session (all sessions are from 8:30 a.m. to 12:00 p.m.):

\_\_\_\_\_ Week 1 - June 16 - 19, 2020 (ages 3 to 6) \*four-day session

\_\_\_\_\_ Week 2 - June 22 - 26, 2020 (ages 7 to 9)

\_\_\_\_\_ Week 3 - July 6 - 10, 2020 (ages 10 to 14)

\_\_\_\_\_ Week 4 - July 13 - 17, 2020 (adults ages 15 and older)

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IMPORTANT: **DO NOT** sign up for a week that you are only partially available to work. You must be available from 8:00 a.m. to 12:15 p.m. each day of camp.

You will be notified if you are chosen to work. **DO NOT** assume that just because you have checked a week that you are guaranteed a spot in that week. We had over 100 counselor applicants last year. We are not able to give every applicant a position.



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Counselor Name:

Why do you want to work at Camp BOLD?

What is your previous experience working with children with special needs? Please be specific.

**PARENT CONSENT:**

I am aware that my child, \_\_\_\_\_, has put in an application to be a counselor at Camp BOLD, a camp for children and adults with intellectual and developmental disabilities.

I am also aware that my child must be at camp every day on the week he/she is working and be able to stay from 8:00 a.m. to 12:15 p.m.

I understand that if my child is chosen, he/she will have to participate in a 1-hour training session before camp begins.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

Scan and email applications to: [rebecca@thearcnwms.org](mailto:rebecca@thearcnwms.org)

Mail applications to: CAMP BOLD, 5699 Getwell Road, Building G, Suite 1, Southaven, MS 38672

Hand deliver applications to The Arc NWMS office: 5699 Getwell Road, Building G, Suite 1, Southaven, MS 38672

**Counselor Applications are due by May 22, 2020.**