



# Northern Lights E Day Camp Adult Volunteer Registration



July 10-July 14, 2023

**Mail check, registration, medication and health form to:**

**Northern Lights Day Camp % Parker J., 2233 Ryan Court, North St. Paul, MN 55109**

Name: (first, middle initial, last)		Registered Girl Scout Yes No (if no please add \$25 check made out to "River Valleys" for registration fee)	
Address		Your Girl Scout's name: Please send registration together	
City	State	Zip	
Date of Birth: (DD/MM/YY)	Phone Daytime:	Evening:	Cell:
Email: Can we use for primary contact? Yes No			
Have you ever been convicted of a felony? Yes No If yes, please specify/explain:			
I can volunteer the following days: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time (please indicate the days): M T W Th Overnight F			
Ways you would be willing to volunteer: (please check)  <input type="checkbox"/> Working with Girl Scout Daisies and Brownies (gr 1-3) <input type="checkbox"/> Working with Girl Scout Juniors (gr 4-5) <input type="checkbox"/> Working with Girl Scout Cadettes (gr 6) <input type="checkbox"/> Working with Program Crafts <input type="checkbox"/> Other: _____ <input type="checkbox"/> No preference  Number of summers you have volunteered: _____  Areas you have worked: _____ _____ _____		Please attach copies of current certifications!  Would you be willing to take any training as needed for camp? Yes No  <input type="checkbox"/> Current First Aid Training - Expires: _____ <input type="checkbox"/> Current CPR Training - Expires: _____  <input type="checkbox"/> LifeGuard <input type="checkbox"/> Girl Scout Basic Outdoor Skills <input type="checkbox"/> Girls Cook In <input type="checkbox"/> Girls Cook Out <input type="checkbox"/> Girls Sleep In <input type="checkbox"/> Girls Sleep Out <input type="checkbox"/> Archery <input type="checkbox"/> Adventure Course	

All campers/adults receive one camp T-shirt. Please check your size.

Small  Medium  Large  XL  XXL

Additional shirts can be purchased for \$15 each.

indicate size \_\_\_\_\_ (IE: 2 XL, 3XL, 4XL)

Additional qty of shirts \_\_\_\_\_ x \$15 = \_\_\_\_\_

***Checks payable: Northern Lights Service Unit***

I give permission to attend day camp and participate in all activities, including overnights, which are part of the program, unless otherwise indicated. I agree to cooperate with all regulations and policies. I give my permission to be photographed or recorded, and for River Valleys to use this material for publicity purposes. I will not attend if I become exposed to any contagious disease (including head lice), or if I am not in good physical condition. I give my permission to receive necessary medical treatment at area hospitals/medical centers or from the Day Camp Health Supervisor or designee. I agree to, if not currently a member, to join Girl Scouts of the USA and have enclosed \$25 membership dues. I will read and abide by communications from the Day Camp.

Adult Signature

Date: