Return by **MAY 16TH** to: Meaghan Tent, Recreation Specialist
Town of Aurora Parks & Recreation
575 Oakwood Avenue, East Aurora, NY 14052

2025

TOWN OF AURORA PARKS & RECREATION

VOLUNTEER APPLICATION

JP Nicely DAY CAMP

NAME: _____ AGE: _____ DOB: _____
First Last

ADDRESS: _____ GRADE: _____
Street Town Zip

HOME PHONE: _____ CELL PHONE: _____ SCHOOL: _____

PARENTS NAMES _____ _____ EMERG PHONE _____

CONTACT PERSON _____ E-MAIL ADDRESS _____

The minimum age to volunteer for Day Camp is 13 years old. Please check what sessions you would like to volunteer for.

A Camp for children age 7-12 at Hamlin Park **Monday-Friday -- 9:00 - 3:45 pm**

Session 1: JUNE 30 - JULY 3
Session 2: JULY 7 – JULY 11
Session 3: JULY 14 – JULY 18
Session 4: JULY 21 – JULY 25
Session 5: JULY 28 - AUGUST 1
Session 6: AUGUST 4 – AUGUST 8

SESSION CHOICE: _____
SESSION CHOICE: _____
<u>*You may volunteer for more than one session</u>

PLEASE REMEMBER VOLUNTEER OPPORTUNITIES FOR EACH SESSION ARE LIMITED, WE <u>CANNOT</u> HONOR ALL REQUESTS. You will be contacted in **JUNE** about session choice and are expected to attend a **MANDATORY** volunteer meeting with the program supervisor.

Have you ever taken a Babysitting Course? _____ Where? _____

Please use Water Safety Aide, Exclusively Little, Dance/Theater or Sports Application if you wish to volunteer for those programs.

MEDICAL OR DEVELOPMENTAL INFO WE SHOULD BE AWARE OF _____

RELEASE: I hereby release the Town of Aurora and employees and/or volunteers and staff from any responsibility or liability in connection with this activity.

DATE_____ SIGNATURE _____
JPNVOLDAY25 PARENT/GUARDIAN