



Girl Scouts®

MiCaSa Service Unit Day Camp  
"Mystery Week"  
Adult Volunteer Application



Girl Scouts®

Volunteer's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Name of girl(s) you are volunteering for: \_\_\_\_\_

Please circle your t-shirt size (for **5 day volunteers** only) Sm Med Lg XL XXL

Please circle what days you would like to volunteer to help at Day Camp

Monday Tuesday Wednesday Thursday Friday all 5 days

Please note that only volunteers who help all five days will receive a 50% discount.  
All volunteers will have a mandatory training that will be scheduled before camp begins.

**Volunteer Information:**

Are you a current member of Girl Scouts? \_\_\_\_\_ yes \_\_\_\_\_ no\*

Is your background check current (within the past 2 years) \_\_\_\_\_ yes \_\_\_\_\_ no\*

**\*Please note: You must be currently registered as an adult member of Girl Scouts (2016-17), & you must have passed a Girl Scout background check within the past 2 years in order to volunteer at MiCaSa Summer Day Camp. Registration & background checks will be verified. Sorry, no exceptions!**

**Training and Certifications (Girl Scouts and other):**

Standard First Aid current \_\_\_\_\_ expired \_\_\_\_\_

CPR current \_\_\_\_\_ expired \_\_\_\_\_

Other (specify) \_\_\_\_\_

**Do you have any special skills, experience, interest, or knowledge that you feel would be helpful to share at day camp? (ex: art, science, lanyards, etc.)** \_\_\_\_\_

Have you ever been convicted of a crime (other than traffic violations) \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, please explain: \_\_\_\_\_

Volunteer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Please email Michelle Kienitz any questions about volunteering [Kienitz.michelle@gmail.com](mailto:Kienitz.michelle@gmail.com)

Return completed application to: MiCaSa Day Camp, 2244 Derby St. Camarillo, CA 93010