



# Junior Camp Counselor Participant Volunteer Application

Thank you for your interest in being a part of Balance 180 Gymnastics & Sports Academy's Summer Camp 2019 as a Junior Camp Counselor! Balance 180 is a non-profit organization in Gainesville. Our mission is to develop a new model for recreational and competitive sports within our community that serves children and young people with varying abilities and needs. Our goal is to give all children an opportunity to participate in sports, while encouraging them to learn and grow to realize their unique potential.

We are looking for well-rounded individuals who enjoy working with kids, and who will bring their excitement and energy to the Balance 180 team. Our athletes look up to our Junior Camp Counselors who should be a good friend, leader, and role model for our young athletes. Our Senior Camp Counselors will serve as mentors to our Junior Counselors, and will work alongside them to deliver a fun and safe gymnastics camp.

Please fill out the following application in its entirety. We want to hear more about **YOU**, and what talents **YOU** can bring to the Balance 180 team as a Junior Camp Counselor. Once we receive your application, you will be contacted via email to come in for an interview.

Volunteer Information			
Name:	Gender:	Age:	D.O.B.:
Address:	City:	State:	Zip:
Home Phone #:	Cell Phone #:	E-mail:	
Mother/Parent 1 Name:	Father/Parent 2 Name:		
Parent 1 Cell #:	Parent 1 Work #:		
Parent 2 Cell #:	Parent 2 Work #:		
Emergency Contact Person:	Emergency Phone #:	Relation to Volunteer:	
Do you have any medical conditions/allergies to which we should be notified? <input type="checkbox"/> Yes <input type="checkbox"/> No Please Specify:			

## EDUCATION

School Currently Attending: \_\_\_\_\_ Grade/Year: \_\_\_\_\_

School Activities and/or Organizations:  
\_\_\_\_\_  
\_\_\_\_\_

Favorite Class(es): \_\_\_\_\_

Extracurricular Activities and/or Organizations:  
\_\_\_\_\_  
\_\_\_\_\_

## EXPERIENCE

Please list any experience you have working with typically developing and/or children with special needs (babysitting, volunteering, etc.).

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Have you *attended* a summer camp before? If so, please list the name(s) of the camp and how long you attended for.

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Have you *worked or volunteered* at a summer camp before? If so, please list the names(s) of the camp and how long you worked or volunteered for.

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If you have attended or helped with a camp, what was your favorite thing about the camp (games, crafts, activities, etc.)? Please describe.

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What skills, talents, etc. can you bring to the Balance 180 team?

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## ACTIVITIES AND INVOLVEMENT

What is your favorite hobby, sport, activity, etc.? \_\_\_\_\_

What hobbies, sports, activities, etc. have you been involved in?

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What is your favorite group game or activity that you have played growing up, in P.E. class, for a sport, etc.? Please describe how the game is played.

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## Balance 180 Summer Camp

<b>How would you like to help?</b> <small>(Check all that apply.)</small>	<b>How can we help you?</b> <small>(Check all that apply.)</small>
<input type="checkbox"/> Crafts <input type="checkbox"/> Games <input type="checkbox"/> Strength and conditioning <input type="checkbox"/> Equipment set-up <input type="checkbox"/> Equipment take-down <input type="checkbox"/> Dance <input type="checkbox"/> Snack <input type="checkbox"/> Educational activities <input type="checkbox"/> Stretching <input type="checkbox"/> Athlete awards	<b>What would you like to gain from this volunteer experience?</b>  <input type="checkbox"/> School credit/volunteer hours <input type="checkbox"/> Personal fulfillment <input type="checkbox"/> Learn new skills <input type="checkbox"/> Make friends <input type="checkbox"/> Professional development <input type="checkbox"/> Other _____

<b>Availability</b> <small>(Indicate <input checked="" type="checkbox"/> for days and time you are available to volunteer. Our greatest need for volunteers is in the morning session.)</small>		
<b>Week 1: July 15 – 19</b>	<b>Week 2: July 22 – 26</b>	<b>Week 3: July 29 – August 2</b>
<b>Monday 7/15</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Monday 7/22</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Monday 7/29</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm
<b>Tuesday 7/16</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Tuesday 7/23</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Tuesday 7/30</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm
<b>Wednesday 7/17</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Wednesday 7/24</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Wednesday 7/31</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm
<b>Thursday 7/18</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Thursday 7/25</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Thursday 8/1</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm
<b>Friday 7/19</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Friday 7/26</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm	<b>Friday 8/2</b> <input type="checkbox"/> 8:00am-12:30pm <input type="checkbox"/> 12:30pm-5:30pm

I hereby certify that all statements made in this application are true and I authorize investigation of all matters contained in the application. I acknowledge that any false statements or misrepresentations on this application will be cause for refusal of placement or immediate dismissal at any time during the period of my placement.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*Applicant*

If volunteer is a minor under 18 years of age:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*Parent/ Legal Guardian*

## **PARENTAL PERMISSION**

I, \_\_\_\_\_, hereby acknowledge and give permission for my  
*(Printed Name of Parent/Legal Guardian)*  
son/daughter, \_\_\_\_\_, to participate as a Junior Camp Counselor for Summer  
*(Printed Name of Youth Volunteer)*  
Camp at Balance 180 Gymnastics & Sports Academy.

\_\_\_\_\_  
*(Signature of Parent/Legal Guardian)* Date: \_\_\_\_\_

## **JUST FOR FUN! Gymnastics Trivia**

Who was the first gymnast to score a perfect 10? \_\_\_\_\_

Which gymnastics team won the gold medal at the 2016 Summer Olympic Games? \_\_\_\_\_

**Bonus:** Who is the head coach of the Florida Gators Gymnastics Team? \_\_\_\_\_

**Please scan and email your application to [balance180summercamp@gmail.com](mailto:balance180summercamp@gmail.com) or drop it off at the gym 6527 NW 18th Drive Gainesville, Florida 32653 Monday through Friday between 3-8PM or Saturday from 8:00AM-12PM. If you have any questions please call (352) 340-1180 or email [balance180summercamp@gmail.com](mailto:balance180summercamp@gmail.com).**

***We appreciate your willingness to volunteer your time, and hope to see you for camp! 😊***

*This activity is neither sponsored nor endorsed by Alachua County Public Schools.*