Jeffrey Summer Camp
Junior Counselor Application

Name: _____

Phone Number: _____ **Email:** _____

Address: _____

Date of Birth: _____ **Shirt Size:** YL AS AM AL Other (Please Circle One)

Years at Jeffrey Summer Camp: ***as a camper*** _____ ***as a JC*** _____

Other Camp(s): *please list years, camp, and any leadership positions*

_____

1. Why do you want to be a Junior Counselor?

_____

_____

2. Do you have any special skills? sports, art, music, etc.

_____

_____

3. Do you have any related experience? leadership at school, babysitting, volunteering, etc.

_____

_____

_____

4. Will you be participating in Adventure Camp? Yes or No? (Please Circle One)

Junior Counselors are expected to be at camp all ten weeks. Please list any conflicts: daily conflicts, other camps, vacations, etc.

_____

_____