



2025 SCAMP VOLUNTEER APPLICATION

Two sided application must be printed clearly by the applicant.

Personal Information

Name: _____ Date of Birth: _____

Address: _____

Email Address: _____

Emergency Contact Name: _____ Relationship: _____

Emergency Phone Number: _____

School Information

Attending High School: _____ Year of Graduation: _____

School Volunteer/Service Coordinator's Name & Email Address: _____

Other Information

Do you have any volunteer or work experience that would make you a good volunteer at SCAMP. If so please describe below. Feel free to attach any additional documentation.

Name and Number of Two References: (teacher or employer)

1. _____

2. _____

SCAMP Placement Information

Please Circle: What age group would you like to work with? 3-6 7-10 11-13 14+

* We will try and accommodate your request however placements are not guaranteed.

You must commit to one of the following sessions to volunteer at SCAMP. We do not place volunteers on a rotating basis such as Tuesday/Thursday or every Monday. CLOSED June 30th - July 3rd.

Hours: 9:00 - 2:15.

Session 1:

Training Day: June 20

Week 1: June 23, 24, 25, 26 Week 2: Holiday Break June 30 - July 3 Week 3: July 7, 8, 9, 10

Total: 9 days – approximately 45 hours

Session 2:

Training Day: July 9

Week 1: July 9, 10 Week 2: July 14, 15, 16, 17 Week 3: July 21, 22, 23, 24

Total: 10 days – approximately 50 hours

Volunteer Requirements: Please Check

_____ I will be 14 prior to the first day of SCAMP.

_____ I am able to follow and complete multi-step directions.

_____ I am able to provide a safe environment for all campers under the supervision of the SCAMP teacher.

_____ I am able to make quick, responsible decisions in emergency situations; must be able to relay all pertinent information to an adult in the teacher's absence.

_____ I am able to physically assist campers where needed, i.e., lavatory, playground, lake, wheelchair, and other activities

I certify that all of the information above is true, I have read the SCAMP **Volunteer Job Description** and understand the requirements of the position and am able to perform the required duties of the job.

Signature

Date

Please return mail to: The Booth Center
SCAMP – BH Recreation Dept.
7273 Wing Lake Road
Bloomfield Hills, MI 48301

OR: Email a PDF to scampfun@bloomfield.org