Name: ____________________________  4-H Age: ___________  Years in 4-H: ________
Mailing Address: ________________________________________________________________
Email: _______________________________  Cell Phone #: ________________________________
County: ________________________________  Grade just completed: __________________________

Please answer the following questions completely. If handwritten, please write neatly and legibly. If you need additional space, feel free to continue on an additional page.

1. Why do you want to be a 4-H camp counselor?
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

2. Why are counselors important to the camping experience?
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

3. In your opinion, what is the most important trait of a camp counselor and why?
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

4. What non-camp experiences have you had working with children?
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

5. Have you served as a camp counselor before?
Check: _______ 4-H ______ Non4-H  If non 4-H please explain: __________________________
Year(s): ______________________________

6. Have you attended camps before?
Check: _______ 4-H ______ Non4-H  If non 4-H please explain: __________________________
Year(s): ______________________________

7. Cedar Bluff Camp Counselor Experience:
   Check one:  ____ This will be my first year to serve as a counselor at Cedar Bluff Camp
   ____ This is my second year to serve as a counselor at Cedar Bluff Camp
   ____ I have been a counselor at Cedar Bluff Camp more than 2 years

8. Do you prefer to work with?
9. Please mark your t-shirt size:  S  M  L  XL  XXL

10. I would like to serve on the following committee(s): Please rank them 1 through 5, 1 being your favorite.
   ___ Counselor Training Planning Committee
   ___ Talent Show Committee
   ___ Flag Raising/Lowering
   ___ Campfire
   ___ Songs and Energizers

11. Please list two references, not related to you, that can attest to your ability to work with children, follow directions, take initiative, etc.

   Name: _________________________________  Name: _________________________________
   Phone: _________________________________  Phone: _________________________________
   How do you know this person?  How do you know this person?
   ______________________________________  ______________________________________

AGREEMENT BETWEEN COUNSELOR AND CEDAR BLUFF CAMP GROUP

This contract contains the responsibilities and duties of the camp counselor while at 4-H camp. By signing the contract, the counselors agree to accept and carry out these responsibilities.

CAMP COUNSELOR GENERAL RESPONSIBILITY
Assume responsibility for a group of campers from several counties for 24 hours a day during camp.

SPECIFIC DUTIES
* Counselor Job Description, Code of Conduct, and Counselor training material apply.
* Participate in camp counselor training session (June 12th)
* Know where your campers are at all times (including free time) and be present at critical times.
* Promote a helping relationship by interacting with your living group at all times during camp.
* Be aware of health, safety and well-being of your campers. Check for illness or injury.
* Report major health problems to camp health professional. Supervise taking medicine when appropriate.
* See that you, your living group and fellow counselors know and observe camp rules.
* Help your living group follow the daily camp schedule.
* Be sensitive to camper’s personalities, differences and needs.
* Be aware that your living group will copy your behavior.

In the event of a serious rule infraction, those involved will meet with the Cedar Bluff Camp disciplinary committee.
We have read the Code of Conduct and we agree to accept the above responsibilities and support our peers and agents while at camp.

________________________________________  ________________  ________________________  ________________
Counselor’s Signature:  Date:  Parent/guardian’s Signature:  Date:

________________________________________  ________________
Agent’s Signature:  Date:

Agent’s Notes to Housing Committee:
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Agents: Turn this application into Robyn Deines by April 15 for Camp Counselor Training responsibilities.