## Sheboygan County 4-H Base Camp 2021 Adult Application



Name:								
Street Add	dress:							
City:						State	ate: Zip Code:	
Telephone Number: ()				E-mail address:				
Gender: _	Female	Male	T-shirt	Size:			Years as a 4-H Volunteer:	
Have you	been on the camp s	taff before?		Yes		No 🗆	Number of Years	
If you hav	e been a member o	f the camp sta	aff, are yo	ou will	ing	to help	elp plan and lead staff training?	
Check the	position(s) you wo	uld like to app	oly for:					
☐ Dining Hall/Snack & Photography Suppor				rt			Cabin Counselor Support	
☐ Waterfront/Canoeing							Jr. Director Support	
☐ Nature and Flag Ceremony Support							Recreation and Hiking Support	
☐ Camp Crafts							Camp Nurse/Medic	
	Archery and Hiking	g Support					4-H Camp Adult Ambassador	
	ember of the camp ain from the experie		ill you do	to cor	ntrib	oute to	to the camp operation, and what do you personall	У
2. What s	trategies would you	u use to build	a relation	nship v	vith	and su	support youth counselors before and during camp	1?
•	require any special ase attach and explo		•				-H Base Camp? (Circle One) Yes No n.	
						-	cle) First Aid or CPR are applying for the Camp Medic position.)	

\*Return this form to your County Extension Office by June 1, 2021

No

5. Adults who chaperone 4-H events must be a Certified 4-H Volunteer Leader. Are you a Certified 4-H Volunteer

If you have not gone through Youth Protection, you will need to complete it prior to attending 4-H Base Camp.

Leader who has gone through Youth Protection Certification? (Circle One) Yes