Camp Tarpon 2023 June 5th - August 4th



Junior Counselor Application

Name:	Birthdate:	
Address:		
Phone Number:		
School:	Grade:	
Do you participate in any extra	curricular activities? If so, v	what do you participate in?
Parent/Guardian Name:		
Parent/Guardian Name: Emergency Number:	Health Insuran	ce Number:
Why do you want to be a Jr Co	unselor:	
Please choose the 3-week block *APPLICANT MAY SIGN UP	•	E WEEKS*
WEEKS 1-3	WEEKS 4-6	WEEKS 7-9
June 5 - June 23	June 26 - July 14	July 17 - August 4
Are you available for other volu Have you volunteered before? _	G	•
What did you do if you volunted	ered before?	
indoors and outdoors; actively counselors; must be at least 14	participate in all field trips 4 years of age and must at	
Signature:		Date:
Parent/Guardian Signature:		Date:
400 C ***	Tarpon Springs Recreation	
400 S Wal	lton Avenue, Tarpon Spring	gs, FL 34689

727-942-5628

PLEASE SUBMIT COMPLETED APPLICATION TO: TARPONREC@CTSFL.US