CUB SCOUT DAY CAMP VOLUNTEER AGREEMENT

I would like to volun	teer at Cub Scout Day Camp at	(camp location)
during the week of	I will pay \$10) to register my camper which will be
returned to	me after I have completed all hou	rs/days as a camp volunteer.

My Campers/Scouts name is ______.

Please initial each line below after reading it.

I understand that I must be Youth Protection Trained to volunteer at camp

____ I understand that I must attend a pre-camp training (dates TBD)

____ I understand that I am expected to attend ALL 5 days of camp

____ I understand that while I may request a specific camp duty that I will be placed wherever I am needed the most.

____ I understand that I will be required to have a physical and submit the paperwork (physical must be within one year of camp date)

____ I understand that in past year's I may have been able to skip pre-camp training, this year I MUST be present at one of the training dates provided or I will not be eligible to volunteer (this will apply to both adult & youth volunteers).

I, ______(name) have read the above and understand that these are the requirements of all volunteers at Cub Scout Day Camp and by signing below I am agreeing to meet all of these requirements in exchange for a free week of camp for my child. I will initially pay \$100 to register my camper which will be returned to me after I have completed my obligation. If I do not fulfill these requirements, I will pay the remaining fee of \$140.00 to the Connecticut Yankee Council and will not be refunded the \$100 already paid..

Signature

Date

If you have any questions or concerns, please contact Cindy Pepe, 203.951.0228.