

# CAMP ELMWOOD

## TEEN LEADERSHIP PROGRAM RECOMMENDATION

August 1-5, 8-12, 2011

Name of Applicant \_\_\_\_\_

Please rate the applicant for the following traits:

	Excellent	Good	Fair	Poor
Honesty	_____	_____	_____	_____
Reliability	_____	_____	_____	_____
Patience	_____	_____	_____	_____
Creativity	_____	_____	_____	_____
Intelligence	_____	_____	_____	_____

How have you come to know applicant? \_\_\_\_\_

\_\_\_\_\_

Tell us about applicant's special skills and interests. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tell us about any experience applicant has had in working with younger children. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tell us anything you know about applicant which might help us to decide whether applicant would be able to lead and set a good example for younger children as a teen counselor at our camp.

\_\_\_\_\_

\_\_\_\_\_

Dated \_\_\_\_\_ Name \_\_\_\_\_

Telephone \_\_\_\_\_ Address \_\_\_\_\_

Please return completed form to St. John's/Camp Elmwood, 2727 College Avenue, Berkeley CA 94705

**CAMP ELMWOOD'S TEEN LEADERSHIP PROGRAM**

August 1-5, 8-12, 2011

**PARENT/GUARDIAN PERMISSION**

Name of Applicant \_\_\_\_\_

I certify that I am the parent or guardian of the applicant.

I have read the application being submitted by the applicant and will support the applicant in fulfilling the promises and commitments made. **I know of no reason why the applicant will not be able to participate fully from 9:00 AM to 3:00 PM Monday through Thursday and from 9:00 AM to 9:00 PM each Friday.**

Except as noted below, the applicant is fully able and has my permission to participate in all normal camp activities and excursions. Members of Camp Elmwood staff have my permission to authorize emergency medical treatment for the applicant. I will pay any cost of treatment not covered by my insurance.

\_\_\_\_\_ Applicant may participate in skateboarding, I will provide helmet.

Special needs or activity restrictions \_\_\_\_\_

\_\_\_\_\_

Health insurance program and number \_\_\_\_\_

\_\_\_\_\_

Parent or guardian name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cel) \_\_\_\_\_

Email \_\_\_\_\_

Emergency contact (name and phones) \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**CAMP ELMWOOD TEEN LEADERSHIP PROGRAM  
CERTIFICATIONS AND PROMISES**

August 1-5, 8-12, 2011

After reading carefully, please write "YES" in your own handwriting (check marks are not acceptable) in each space below to confirm that you have read and understand each promise and representation you are making as part of this application.

I certify that I have a good record of school attendance and participation. \_\_\_\_\_

I do not use tobacco, alcohol, or illegal drugs. \_\_\_\_\_

If selected I will participate fully in the entire camp **from 9:00 AM to 3:00 PM Monday through Thursday and from 9:00 AM to 9:00 PM each Friday** unless excused for illness or required school registration. \_\_\_\_\_

I will **NOT** leave the camp without the permission of the director. \_\_\_\_\_

I will at all times be courteous and respectful toward camp leaders, my fellow teen counselors, and all the campers. \_\_\_\_\_

I will **NOT** use vulgar or abusive language at any time during camp. \_\_\_\_\_

I will **NOT** use a cell phone, i-pod, or other electronic equipment at any time from the time camp begins until camp ends each day. \_\_\_\_\_

I understand that to participate as a teen counselor at Camp Elmwood August 8-12 and receive my honorarium I must successfully complete Teen Leadership Camp August 1-5 and show that I can play a positive role in the camp. \_\_\_\_\_

I am submitting this application because I want to learn, to participate, to help others, and to have fun. I am not submitting this application just to please my parents or any other adult. \_\_\_\_\_

**I have personally completed this application.** \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

# CAMP ELMWOOD TEEN LEADERSHIP PROGRAM APPLICATION

August 1-5, 8-12, 2011

**Must be completed in applicant's own handwriting.**

Name \_\_\_\_\_ Birth Date and Year \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Telephone (home) \_\_\_\_\_ (cel) \_\_\_\_\_

email \_\_\_\_\_

School \_\_\_\_\_ Entering Grade (Fall 2011) \_\_\_\_\_

Favorite school subjects \_\_\_\_\_

Musical instruments played \_\_\_\_\_

Areas of special interest and participation (teams, music and art lessons, hobbies, youth groups)

\_\_\_\_\_

\_\_\_\_\_

References (name, address, and telephone of two adults, at least one of whom has worked with you as coach, teacher, or activity leader) \_\_\_\_\_

\_\_\_\_\_

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**Do not submit this application until you have carefully read and written "YES" as your response to each certification and promise on the back of this form.**

Completed parent or guardian permission slip must be submitted with this application.

If you are new to Camp Elmwood, a completed recommendation form must also be submitted.

Return all forms to Camp Elmwood, 2727 College Avenue, Berkeley CA 94705.

# CAMP ELMWOOD'S TEEN LEADERSHIP PROGRAM

**For Young People Ages Thirteen to Eighteen  
Monday through Friday, August 1-5, 8-12, 2011**

Under the Redwoods on the Grounds of St. John's Presbyterian Church,  
2727 College Avenue, Berkeley, 94705

**Schedule:** 9:00 AM to 3:00 PM Monday through Thursday. 9:00 AM to 9:00 PM each Friday.

**Teen Leadership Camp** for teens only is August 1-5. This will be a week of training and practice for leadership in life and in camp activities including volley ball, basket ball, ping pong, skate boarding, gymnastics, lawn games, cooking, art, music, drama, dance, science, community service, and other activities suggested by our participants. We will also be preparing to lead our campers in exploring our theme for this year: *Patience: What is it? Why should we be patient? Are there times we should be impatient?* Our exploration will be through role play, art, drama, music, shared experiences and stories of patient and impatient people. We will plan and host an event for other teens Friday evening, August 5.

**Camp Elmwood** for campers ages 5-13 and teen counselors ages 13-18 is August 8-12. Everyone who successfully completes Teen Leadership Camp and demonstrates the ability to play a positive role in our camp will be invited to be a teen counselor for Camp Elmwood.

**Cost:** Teen Leadership Camp August 1-5 is free. Teen Counselors at Camp Elmwood August 8-12 will receive an honorarium of \$50.00 in appreciation of their help plus \$10.00 additional for each year of prior service. Everyone brings her/his lunch.

**Applications:** Space is limited. Please complete and return registration application as soon as possible. Persons new to our program should also submit a recommendation form. For more information, applications, and recommendation forms call (510) 845-6830 extension 13 or go to <http://www.stjohnsberkeley.org>.

Camp Elmwood is community service program of St. John's Presbyterian Church, Berkeley, emphasizing creativity, values, and concern for others. This is our eighteenth year.

**KIDS TOGETHER, HAVING FUN, SHARING SKILLS,  
HELPING OTHERS**