



Jr. Counselor Application

Name: _____

Address: _____

Phone Number: _____

Age: _____ School: _____

Please let us know of any work or time spent working with children:

Please let us know of any art interest or experience:

Why would you like to volunteer at the CCA Summer Art Camp:

Please email your application back to info@cheltenhamarts.org, Attention: Margaret Griffen

2019 Session Dates:

Crafty Kids Week 1: 6/17-6/21

Session 1: 6/24-7/5 (closed 7/4)

Session 2: 7/8-7/19

Session 3: 7/22-8/2

Session 4: 8/5-8/16

Crafty Kids Week 2: 8/19-8/23

You must be available to volunteer for an entire session – cannot come for one week out of a two week session.