



**Availability**

Are you available to attend the training on Saturday, June 6, 10:00 am-12:00pm? Yes or No (circle)

*A parent/guardian is required to attend the first ten minutes. (If you are unable to attend the training we will coordinate another time)*

**You are required to volunteer for three weeks** (half days **only**). To ensure we can schedule you the three week minimum please list **all** of the weeks and times that you will be available.

Please circle if you are available for the **AM session** (8:30-1:00) and/or **PM session** (12:00-4:30)

\_\_\_\_ June 15-19 (AM/PM)    \_\_\_\_ July 6-10 (AM/PM)    \_\_\_\_ July 27-31 (AM/PM)  
\_\_\_\_ June 22-26 (AM/PM)    \_\_\_\_ July 13-17 (AM/PM)    \_\_\_\_ August 3-7 (AM/PM)  
\_\_\_\_ Jul 29-Jul 3 (AM/PM)    \_\_\_\_ July 20-24 (AM/PM)    \_\_\_\_ August 10-14 (AM/PM)

*Hartley Halfpint camps (3 year old camps) only meet Wednesday-Friday.*

Preferred ages: \_\_\_ 3 year olds    \_\_\_ 4-5 year olds    \_\_\_ 6-7 year olds    \_\_\_ 8-9 year olds    \_\_\_ 10-12 year olds

Are there any ages you would prefer NOT to work with? \_\_\_\_\_

Are you interested in assisting with a mountain bike camp? This would require you to bring a mountain bike and helmet for the week and feel confident in mountain biking skills. Yes/ Maybe-I want to learn more/ No (circle)

Please list the top two camps you would be interested in helping with. You are **NOT** guaranteed these camps.

\_\_\_\_\_

What is your t-shirt size (adult)? XS    S    M    L    XL

**References**

A reference should be someone who is not related to you that can talk about your personality, skills, abilities, and interests. Please include a current email address for each reference.

1. Name \_\_\_\_\_ Phone \_\_\_\_\_ Home Work Cell \_\_\_\_\_  
Please circle the type of phone number this is.

E-mail \_\_\_\_\_ How do you know this person? \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_ Home Work Cell \_\_\_\_\_  
Please circle the type of phone number this is.

E-mail \_\_\_\_\_ How do you know this person? \_\_\_\_\_

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

\_\_\_\_\_  
Parent/guardian signature Date

Please return this application to: Jenni Stafford-Faris  
edassistant@hartleynature.org  
Hartley Nature Center  
3001 Woodland Ave. Duluth, MN 55808  
218-724-6735