## WILD HORSE 4-H CAMP COUNSELOR APPLICATION



Return this application to your local extension no later than April 25, 2025

Na	me:	4-H Age:	Years in 4-H:	
Ma	ailing Address:			
Em	nail:	Cell Phone #:		_
County:		Grade just completed:		
Ple	ease answer the following questions completely.	If handwritten, please w	rite neatly and legibly.	If you need
ad	ditional space, feel free to continue on an addition	al page.		
1.	Why do you want to be a 4-H camp counselor?			
2.	Why are counselors important to the camping exp	erience?		
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		<u> </u>	2	
3.	In your opinion, what is the most important trait o	f a camp counselor and why	/ ?	
4.	<ol><li>What non-camp experiences have you had working with children?</li></ol>			
5	Have you served as a camp counselor before?			
5.	Check:4-HNon4-H If non 4-H ple	ease explain:		
	Year(s):			
6.	Have you attended camps before?			
	Check:4-HNon4-H If non 4-H ple	ease explain:		
	Year(s):			
7.	Wild Horse 4-H Camp Counselor Experience:			
	Check one: This will be my first year to serve			
	This is my second year to serve a		•	
o	I have been a counselor at Wild H	iorse 4-H Camp more than	2 years	
δ.	Do you prefer to work with?	and the units and the second sec	· · · · cth oth	<b></b>
	Elementary (1 <sup>st</sup> - 2 <sup>nd</sup> grades)Elementary (3	3'"-5" grades) Junior H	ligh (6 <sup>w</sup> -8 <sup>w</sup> grades) or	Either

	Please mark your t-shirt size:					
10	Please list two references, not related to you, that can attest to your ability to work with children, follow directions, take initiative, etc.					
	Name:		Name:			
	Phone:		Phone: How do you know this person?			
	How do you know this person?					
		etween <b>C</b> ounselof	R AND WILD HORSE 4-H CAMP GROU	JP		
<b>CA</b> As:	ECIFIC DUTIES Counselor Job Description, Code of Participate in camp counselor train Know where your campers are at a Promote a helping relationship by Be aware of the health, safety, and Report major health problems to t See that you, your living group, an Help your living group follow the d Be sensitive to camper's personalin Be aware that your living group with the event of a serious rule infraction	<b>ISIBILITY</b> ampers from several of f Conduct, and Couns ning on June 16 & 17, all times (including free interacting with your d well-being of your ca the camp health profe d your fellow counsel daily camp schedule. ties, differences, and ill copy your behavior.	counties for 24 hours a day during camp elor training material apply. 2025 ee time) and be present at critical times. living group at all times during camp. ampers. Check for illness or injury. essional. ors know and observe camp rules. needs.	isciplinary committee.		
We	e have read the Code of Conduct and nile at camp.	u we agree to accept	the above responsibilities and support (			
We wh		Date:	the above responsibilities and support o  Parent/guardian's Signature:	Date:		
We wh Co	unselor's Signature:	Date:		Date:		
We wh Co Ag	nile at camp. unselor's Signature: ent's Signature:			Date:		
We wh Co Ag	unselor's Signature:	Date:		Date:		