



Aide Contact Information

This form must be filled out by ALL Aide's

_____ Male _____ Female _____ Age _____ D.O.B. _____

Aide's Name _____
Last Name First Name

Aide's Home Address _____
Number, Street City State Zip Code

Aide's Phone Number _____ Aide's Email Address _____

Company who is providing Aide: _____

Company's Address _____
Number, Street City State Zip Code

Supervisor's Name _____ Supervisor's Phone Number _____

Name of Child who Aide will be Assisting _____ Is this your first time with this child? ____ YES ____ NO

In case of emergency, please contact:

Name _____ Relationship _____

Home Phone _____ Other Phone _____

Name _____ Relationship _____

Home Phone _____ Other Phone _____

Policies and Expectations:

- Aide must be with camper at all times
- NO cell phone use during camp hours
- Be positive and encouraging to all campers
- Aide must work closely with counselor by helping campers integrate and engage in the activities
- Aide's are not allowed to take camper to cars (unless requested by parent during drop off and pick up)
- Aide's must follow the master camp schedule and stay with their assigned group unless authorized by Camp Director
- Lunch is not an off time. Please make sure to have your lunch with you at the start of camp
- If there is an issue the Aide and Camp staff: 1) verbal warning, 2)written warning, 3) Dismissal

Camper's Parent's Signature: _____

Aide's Printed Name: _____

Aide's Signature: _____ **Date:** _____