

Summer 2020 Camp at Home Volunteer Application

Name:				
Email Addres	SS:			
Phone Numb	er:			
Home Addre	SS:			
What session	n(s) are you available to v	olunteer?		
	Kidney Disease & Trans	plant, Liver Dise	ase & Transplant, PIDD, TP	N, IBD, &
	Pulmonary Hypertens	ion: June 25-28		
	Rheumatic Diseases: Ju l	ly 9-12		
	Muscular Dystrophy & Special Diagnoses: July 16-19			
	Hemophilia/vWD & Tha	alassemia: July 2	3-26	
	Skeletal Dysplasia & MP	S: August 6-9		
	Sibling: August 13-16			
	ition time(s) works best f ntation will be 5-6:30pm	•		ne orientation prior to your
	June 24	July 8	July 15	

Additional notes regarding schedule (are you interested in volunteering at more than one session, preference between those you marked, etc.)

August 5

August 12

July 22



Volunteer Application (Page 2)

Do you have reliable access to a webcam, computer, and stable wifi? If no, describe any difficulties or limitations you have.
Please describe any relevant experience you have participating in or facilitating calls on technology platforms (such as Zoom, Google Hangout, Skype, etc).
In your experience, what do you feel is most important that campers and families take away from a program with The Painted Turtle?
As a facilitator and counselor, what do you feel is most important to keep in mind when interacting virtually with families?
(Optional) Anything additional you would like us to know!

Thanks so much for applying to volunteer with Camp at Home! Don't forget to email the completed pages to Kylie at kylies@thepaintedturtle.org. We will get back to you as soon as possible regarding your application status and next steps. Please note that confirmed applicants will be directed to CampSite to complete some additional forms for clearance, clear the background check that TPT will run, and attend a mandatory orientation session in order to serve as a counselor with our program. We'll be in touch soon!