



**Work Scholarship Application Form**  
 (Please print clearly or type all information except for signatures.)  
 Fill out and return **BOTH** Pages: Application & Student Release Form  
**Application deadline - May 11, 2018**

Open to 12-17 year olds. Work Scholars may assist with one camp and in return receive 50% off another camp of equal value. Many Work Scholars choose to volunteer their time and not use the reduced camp price. Work Scholars are expected to assist teachers with camp tasks, work with campers, set up and clean up snack times, and help out in general with making camps flow smoothly. Work Scholars arrive ½ hour earlier than camp start time and stay an extra ½ hour at the end of each day.

Applicant's Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Gender \_\_\_\_\_

Please rank all of the camp weeks that you are **available** to work in your order of preference.  
 (Note: There are three Disney camps that each run for 2 weeks.)

June 18 – 22 \_\_\_\_\_ June 18 – 29 (2 wks) \_\_\_\_\_ June 25 - 29 \_\_\_\_\_ July 9 - 13 \_\_\_\_\_

July 9 – 20 (2 wks) \_\_\_\_\_ July 16 - 20 \_\_\_\_\_ July 23 -27 \_\_\_\_\_ July 23- Aug 3 (2 wks) \_\_\_\_\_

July 24-26 (3 days) \_\_\_\_\_ July 30 – Aug 3 \_\_\_\_\_ Aug 6-10 \_\_\_\_\_ Aug 13-17 \_\_\_\_\_

I would like to take Camp \_\_\_\_\_ at the 50% reduced rate. T-shirt size \_\_\_\_\_  
 (Discount is only available to this applicant – not to be transferred to any other camper.)

Parent or Guardian Name/s \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell # \_\_\_\_\_ E-Mail \_\_\_\_\_

Grade Entering \_\_\_\_\_ School \_\_\_\_\_

Have you worked with younger children before? \_\_\_\_\_ Individually \_\_\_\_\_ In groups \_\_\_\_\_

If yes, where, when and in what capacity? \_\_\_\_\_

Teacher or Community Reference \_\_\_\_\_ Position \_\_\_\_\_

Phone # \_\_\_\_\_

Why do you think that this applicant is a good choice as a teen volunteer for our summer camp program?

\_\_\_\_\_  
 \_\_\_\_\_

**Community Reference Signature** \_\_\_\_\_

**Applicant's Signature** \_\_\_\_\_

Should my son/daughter receive this scholarship, I will provide the necessary transportation.

**Parent Signature** \_\_\_\_\_

After receipt of your application, you will be contacted for an interview. If selected, there will be a mandatory orientation meeting held in June. Attached release form must be signed and included.

**Application deadline - May 11, 2018**

**Return your completed application to:**

**DreamWrights** 100 Carlisle Avenue York PA 17401 or [info@dreamwrights.org](mailto:info@dreamwrights.org) Questions? Call 717-848-8623

# DreamWrights

Center for Community Arts

## Student Release Form

STUDENT'S NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ CELL # \_\_\_\_\_

GUARDIAN'S NAME \_\_\_\_\_ WORK # \_\_\_\_\_

GUARDIAN'S NAME \_\_\_\_\_ WORK # \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE # \_\_\_\_\_

ALLERGIES \_\_\_\_\_

MEDICATIONS \_\_\_\_\_

SPECIAL NEEDS (Autism, ADD/ADHD, Physical limitations, Learning disability etc...)

I understand that in order to assure that our programming runs as smoothly and productively as possible, DreamWrights (DW) reserves the right to remove any individual who causes undo disciplinary problems.

DW recommends cell phones remain in silent mode and be kept out of sight during programming. **Use of any camera device is strictly prohibited in dressing rooms and bathrooms and subject to confiscation of phone/camera.**

*Registration and/or participation in DW constitutes an agreement by the participant to allow DW to use and distribute (both now and in the future) the participant's image, quote or voice in photographs, video, audio and electronic reproductions of such events and activities.*

I agree to indemnify and hold harmless DreamWrights (hereinafter referred as DW), it's Employees, Agents, Officers, Board Members, Volunteers or any other person against loss or expense, including attorney fees, due to any bodily injury, personal injury or property damage which may result from any and all activities while participating in programming or any other activity sponsored by or conducted by DW, or while visiting any facilities owned by, leased by or controlled by DW.

DW guarantees that all equipment and facilities are in good repair and are appropriate for the purposes to which they will be put, and personnel are appropriately trained and screened. Participants may have the opportunity to use power tools in set or props creation. DW safety rules require that everyone working with, or near, a power tool must wear proper eye protection. Safety glasses will be provided for those who need them. I agree to follow all safety rules when using these tools.

It is understood and agreed that this Release of All Liabilities shall remain in force until DreamWrights receives notification otherwise. The release is recorded and kept on file through a computer system.

Signature of participant or parent/guardian acting on behalf of a participant under 18 years of age

\_\_\_\_\_  
Participant if over 18 or Guardian's Signature

\_\_\_\_\_  
Date