

**2016 Camper/ Junior Counselor Application
South Carolina National Guard Youth Camp**

Boys and Girls, ages 9-17, are invited to apply and must be a legal dependent of a South Carolina National Guard member, personnel and/or retiree. Grandchildren of Guard member/personnel will be considered after all dependents of Guard members/personnel.

For further information, you may contact James E Harris, Jr at (803) 667-2056 or Tiffany Lloyd at (803) 521-1038 from 7:30 am - 5:00 pm Monday through Friday (0730–1700).

Note: All applicants will be notified by email whether or not they have been accepted. Written details will be sent to parents as to dates, times, in-processing locations, items to bring, etc.

APPLICATION MUST BE SUBMITTED by 15 June 2016 

Would you like your camper to be considered for a Junior Counselor position? Yes No
(Ages 15-17 ONLY. This is a leadership position. Serves as mentor to the campers under the guidance of the Senior Counselor and Platoon Leader. Assists in carrying out the tasks assigned to the Platoon Leader and Senior Counselors. Requires previous experience with the SCNG Youth.) If yes, complete all pages.

Camper's Name: _____
Last First Preferred / Nickname

Gender: Male Female Date of Birth: _____ 

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Parent Cell Phone: _____

 Parent Email Address: _____

T-shirt size (adult sizes): S M L XL 2XL 3XL

Does camper have any dietary requirements / restrictions? Yes No

If yes, please specify: _____

Does the child have any medical condition that might limit participation in Youth Camp activities? Yes No If yes, please list: _____

Sponsor Name: _____

Relation to Child: _____

Is sponsor a National Guard Member / Employee? Yes No

If Yes, Rank: _____ Status: Current Member Retired Contractor

Unit: _____

Is Sponsor currently deployed? Yes No N/A

Has the Sponsor returned from deployment within the last 12 months?
Yes No N/A

For Campers, please continue to page 3. JC Applicants, complete all pages.

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JUNIOR COUNSELOR APPLICANTS ONLY

*****Failure to answer application completely will bar the camper
from being considered as a JC.*****

Have you served as a Junior Counselor before? Yes No

Please explain your experience with SCNG Youth Camp in the past.

Why would you like to be considered for a Junior Counselor position?

I acknowledge that being a JC is an honor and is a leadership position. I am setting the example for the younger campers. My behaviors are subject to disciplinary action including being removed as a JC should I disobey camp rules and/or camp leaders.

****There are a limited number of JC positions available. Any applicants not accepted will have a spot as a regular camper.****

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ALL CAMPERS/JC APPLICANTS

Emergency contact information:

1st Contact

Relation to Camper: **Mother** **Father** **Other:** _____

Name (Last, First, MI): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Primary Email Address: _____

2nd Contact

Relation to Camper: **Mother** **Father** **Other:** _____

Name (Last, First, MI): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Primary Email Address: _____

Who will bring your child to camp? _____

Who will pick up your child from camp? _____

All campers should be picked up by 1200 on Saturday, after graduation.

INSURANCE INFORMATION:

Name of Insurance Company: _____

Address of Insurance Company: _____

Policy Holder: _____ Policy Number: _____