



## Junior Educator Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street address

\_\_\_\_\_

City

State

Zip

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

Email: \_\_\_\_\_

Birthday: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Available to start: \_\_\_\_\_

# weeks willing to commit to volunteer: \_\_\_\_\_

T-shirt Size  
*(please circle one)*

Youth:

Small

Medium

Large

Adult:

Small

Medium

Large

*For office use only*

Date received: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Accepted: Y N

Orientation completed: \_\_\_\_ / \_\_\_\_ / \_\_\_\_