



**Summer 2023 Theater Arts Program**

**Counselor (16-17 years old)**

**&**

**Junior Counselor (14-15 years old)**

**Volunteer Application**

**Date:** \_\_\_\_\_

**DOB:** \_\_\_\_\_

**Volunteer's Name:** \_\_\_\_\_

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

**Parent Name:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**Address:**  
\_\_\_\_\_  
\_\_\_\_\_

<u>Session</u>	<u>Date</u>
_____ 6 Weeks	July 10th –August 18th
_____ 4 Weeks	July 10th – august 4th
_____ 4 Weeks	July 24th-August 18th
_____ 2 Weeks	July 10th – July 21st
_____ 2 Weeks	July 24th – August 4th
_____ 2 Weeks	August 7th – August 18th