



## Hiller Aviation Museum Aviation Camp Teen Volunteer Application

Complete all pages of application and return it with at least **one letter of recommendation** from a previous employer, scout leader, teacher, or other adult who is familiar with your performance. Applicants who have worked a previous summer do not have to provide a new letter of recommendation.

Name \_\_\_\_\_

Street address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

E-mail \_\_\_\_\_

Date of birth \_\_\_\_\_ (Must be between 14 and 17 years old on June 1, 2010)

Parent/Guardian 1 \_\_\_\_\_

Parent/Guardian 1 e-mail \_\_\_\_\_

Parent Guardian 1 Phone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Parent/Guardian 2 \_\_\_\_\_

Parent/Guardian 2 e-mail \_\_\_\_\_

Parent Guardian 2 Phone (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

How did you learn about the Hiller Aviation Museum Aviation Camp Teen Volunteer program?

\_\_\_\_\_

I. Describe your previous and current work and volunteer experience (Work can include babysitting, yard work, helping in family business, etc.)

II. List your extracurricular activities, including hobbies

III. Describe your experience, education or interest in the following areas:

Working with children

Science, technology or aviation

Summer camps

IV. How do other people describe you?

V. Why do you want to be an Aviation Camp Volunteer?

**The minimum commitment is two week-long half-day shifts (Monday through Friday), including at least one AM shift. Three or more shifts are greatly appreciated!**

AM Shift	8:30 AM to 12:30 PM
PM Shift	12:30 PM to 4:30 PM

How many shifts would you like to work? \_\_\_\_\_ (Minimum 2, including one AM shift . One week of full days counts as 2 shifts.)

**Please circle the shifts that you are available. Circling as many shifts as you can cover will make it easier to schedule you. You will only be scheduled for the number of shifts that you commit to in the section above. Volunteers who assist during the Vertical Challenge air show on June 19<sup>th</sup> receive free admission to the show for the entire day.**

Session 1	6/14—6/18	AM	PM
Session 2	6/21—6/25	AM	PM
Session 3	6/28—7/2	AM	PM
Session 4	7/5—7/9	AM	PM
Session 5	7/12—7/16	AM	PM
Session 6	7/19—7/23	AM	PM
Session 7	7/26—7/30	AM	PM
Session 8	8/2—8/6	AM	PM
Session 9	8/9—8/13	AM	PM
Session 10	8/16—8/20	AM	PM
Vertical Challenge	Saturday, 6/19	AM	PM

**Volunteers must attend a mandatory training session on Sunday, June 6<sup>th</sup>, from 1:30 PM to 4:30 PM. Volunteers are encouraged but not required to attend an additional training session aboard the USS Hornet Museum on Friday, June 11<sup>th</sup>, from 1:30 PM to 3:30 PM.**

---

**PLEASE READ THE FOLLOWING AGREEMENT AND SIGN BELOW**

**I understand that if I am accepted as an Aviation Camp Teen Volunteer I must:**

- Attend the training session from 1:30 PM to 4:30 PM on Sunday, June 6<sup>th</sup>.
- Volunteer for at least two five-day weeks of half-day shifts (including at least one AM shift), or one week of full days.
- Always arrive promptly for my assigned volunteer duty.
- Treat camp participants and museum staff, volunteers, and visitors with courtesy and respect at all times.

I understand that if I do not fulfill the requirements of the position of Aviation Camp Teen Volunteer, I may be asked to leave the program.

Applicant signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR PARENT OR GUARDIAN**

I will help my teen to participate fully in this program by supporting and facilitating him/her in the fulfillment of his/her responsibilities. I understand that if my teen does not fulfill the requirements of the Aviation Camp Teen Volunteer program he/she may be asked to leave the program.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**RELEASE**

Date \_\_\_\_\_ I, (signature) \_\_\_\_\_ / (print name) \_\_\_\_\_,

parent of \_\_\_\_\_ fully and unconditionally release the Hiller Aviation Museum, all associates and/or assigns from any and all claims for personal injury and/or property damage. I voluntarily declare this release to be my full acknowledgement to relinquish all rights for any and all injury and/or property damage resulting from participation in Hiller Aviation Museum activities. I further acknowledge and agree that photos or video taken during any program or activity may be used by the Museum for publicity or promotions and that no compensation will be provided for such use.

**Mail completed application and recommendation to:**

Aviation Camp Teen Volunteer  
Hiller Aviation Museum  
601 Skyway Road  
San Carlos, CA 94070

**or Fax to:** (650) 654-0220

**Questions?** (650) 654-0200 ext. 222

**Deadline Tuesday, June 1<sup>st</sup>.**