Application for SRSU Summer Camps

This form should be used for SRSU Departmental Summer Camps

Camp Name ___________________________ Sponsoring SRSU Department ___________________________

Camp Sponsor/Dept. Head ____________________ Campus Phone ________ Campus email ______________________________

Camp Coordinator

This individual should be a SRSU employee, informed about the details of this camp and able to make decisions regarding this camp.

Camp Coordinator ____________________ Campus Phone ________ Campus email ______________________________

Proposed Camp Information:

Brief description of the camps purpose and proposed activities (information may be used on website or other promotion.)

________________________________________________________________________________________

Day Camp (camp participants do not stay overnight on-campus) ☐ Overnight Camp ☐

Estimated Number of Campers ________ Ages of Campers ________ Number of Staff ________

Camp Website Address (if applicable)

________________________________________________________________________________________

Camp Dates and Times

Staff Arrival/Check-in, __________ Date ________ Time ________
Camp Participants Arrival/Check-in, __________ Date ________ Time ________
Camp Participants Departure/Check-out, __________ Date ________ Time ________
Staff Departure/Check-out, __________ Date ________ Time ________

Facilities/Rooms Needed

(if unsure of actual room or facility, describe the type of space required. For example classroom that seats 30.)

Facility/Room __________________ ________Capacity ________ Room Access Open Time ________ End Time ________
Facility/Room __________________ ________Capacity ________ Room Access Open Time ________ End Time ________
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Notes:

________________________________________________________________________________________

Upon initial consideration of this application Campus Activities may require more detailed information including camp schedules and requirements which may require some back and forth revisions to fit the camp to available SRSU resources such as facility/room availability. Once resource needs and availability have been verified a camp agreement will be prepared and presented to the camp sponsor for final approval.

Camp Sponsor Signature ___________________________ Date __________

President or Vice President Approval ___________________________ Date __________