

Full Legal Name:

Upside Arts

2025 Summer Camps **Counselor Application**



Birthdate:

ull Legal Nar	me:		Age: _	Birthdat	e:
Addres	ss:				
City:			State: _	Zip:	
Email: Ph			ne:		-
	Position(s) applied for:	Day Camp		Overnight Cam	р
Are you available for the entirety of the camp program(s) you are applying for?					
		Yes	No		
<u>DAY CAMP</u> : June 23-August 2, training June TBD <u>OVERNIGHT CAMP</u> : August 12-23, training August 11-12					
Please list any and all potential conflicts. If any unavoidable conflicts arise after your application is submitted, please update us at info@theupsideartscompany.org.					
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What skills would you bring to Upside Arts' summer camps?					
What is yo	ur experience in theater educat	ion/summer car	mp?		
What do y	ou think is important for our cam	pers to take aw	ay from th	eir Upside Arts ex	perience?
	s of workshops would you be inte Songwriting, Choreography, Stag				e, Puppetry, Stage
Why do yo	ou want to work with Uncide Artes	2			
vviiy do yc	ou want to work with Upside Arts?	?			

For first-time Upside Arts applicants, please attach 2 letters of recommendation.