



Summer Camp 2025

Volunteer Form

Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Phone Number: _____

Email Address: _____

Camps Interested in Volunteering:

Interested in: AM / PM or All Day camps

Signature: _____

Date: _____

Return To:
The Arts Center, 400 N. Queen Street,
Kinston, NC 28501
(252) 527-2517
eventsdirector@kinstoncca.com
communitycouncilfortheartskinston.com