



# COVID CLEANING CORPS

A WORKFORCE DEVELOPMENT PROJECT



MONDAY THROUGH FRIDAY  
4:00–7:00 PM

The Camp Curtin YMCA COVID Cleaning Corps is a workforce development project offering **adults ages 16–24\*** the opportunity to learn the skillset of an essential career while earning a **stipend up to \$750** toward entrepreneurial expenses! Participants will earn ISSA and GBAC certifications and receive the tools they need to get hired or start a business of their own.

In partnership with **Clean For A Dream.**



**Register today** at the Camp Curtin YMCA!

Email us today at [ccyprograms@ymcaharrisburg.org](mailto:ccyprograms@ymcaharrisburg.org)



CLEAN FOR A  
DREAM

# COVID CLEANING CORPS INFORMATION SHEET

**PARTICIPANT'S:** (first name) \_\_\_\_\_ (last name) \_\_\_\_\_

**AGE:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **SEX:** \_\_\_\_\_

**CURRENT/LAST ATTENDED SCHOOL:** \_\_\_\_\_ **LAST GRADE COMPLETED:** \_\_\_\_\_

**RACE:** (circle one)    Hispanic/Latino    Black/African American    Native American    Asian/Pacific Islander    White    Other

**PARENT/GUARDIAN NAME:** (if under 18 years old) \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **CELL PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**In case of an emergency, notify:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

I agree to allow Camp Curtin YMCA COVID Cleaning Corps to use any photographic image of my child/myself taken while participating in programs. These images may be used in promotions or other related marketing materials.

**PARENT/GUARDIAN SIGNATURE:** (if under 18 years old) \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PARTICIPANT SIGNATURE:** (if over 18 years old) \_\_\_\_\_ **DATE:** \_\_\_\_\_

## WAIVER OF LIABILITY RELEASE FORM

I am aware of the nature of this activity and I hereby assume responsibility for \_\_\_\_\_ **(PARTICIPANT'S NAME)** to participate and to be photographed for publicity purposes. I will not hold Camp Curtin YMCA or its employees responsible in the case of accident or injury as a result of this participation. I understand that this completed form must be in the possession of the Camp Curtin YMCA prior to participation in this program.

**PARENT/GUARDIAN SIGNATURE:** (if under 18 years old) \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PARTICIPANT SIGNATURE:** (if over 18 years old) \_\_\_\_\_ **DATE:** \_\_\_\_\_

### PROGRAM ACCEPTANCE BASED ON TANF ELIGIBILITY.

Valid social security card and birth certificate are required for participation.