



Camp Wilmot, Inc.

Returning Summer Staff Application Form 2010

5 Whites Pond Road, Wilmot, NH 03287 Phone: (603) 768-3350

Today's Date	
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Name	
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S.S.#	
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Address	
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Date of Birth (if under 18)	
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Telephone/Cell	
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Email Address	
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Church Member of (name and address)	
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T-shirt Size	
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Camp Experience: Camp Name & Location/ Dates Attended /Camper/C.I.T./ Employee / Volunteer

Please highlight which week(s) you are interested in/ available to work at:

July 1 - 5 Family Camp #1 and Staff Training
July 5-10 MAD Camp (Music, Arts and Drama)
July 11 - 17 Junior Camp
July 18 - 24 Adventure Camp
July 25 - 31 Advanced Adventure Camp
August 1 - 7 Family Camp #2

If applying for specific staff position besides counselor, please indicate here: _____

Certification or Special Skills: Please include details of any First Aid, CPR or EMT certification.

Please list the activities that you would be comfortable leading or helping with in order of preference.

Please answer the following questions as fully as you can.

1. Describe your Christian faith and the impact that it has on your life.

2. What have you learned from working as part of a team and working with children at camp?

3. Describe a situation where you were challenged last summer and how you dealt with it.

4. Please explain why you want to return as staff this summer and what your strengths & weaknesses were last year.

Have you ever been convicted of an infraction or crime other than a minor traffic violation, or have you been found liable for having committed sexual misconduct, sexual abuse, or other offence of a sexual nature (highlight one):

YES NO

If answered YES to above, please explain on a separate page.

References: Please provide all information for these 3 references, who should not be related to you and should be knowledgeable about your experiences, abilities and character. By signing below, you give permission for these references to be contacted.

1. Pastor/ or Elder
Name Address Phone Email
2. Friend or Peer
Name Address Phone Email

I hereby promise that by signing my name all information provided is true to the best of my knowledge and I hereby give permission for the references listed to be contacted by Camp Wilmot, Inc..

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(Signature and Date)

Signature and info of Parent or Guardian (if under 18)

Signature Name Address Phone Email

Return completed application to:
Camp Wilmot
5 Whites Pond Rd, Wilmot, NH 03287
Email: rachel1248@aol.com