

Teen Time of Edmonton - Summer 2024 Returning Staff Form

Personal Information Please fill this section out in full.

Name: _____ Camp Name: _____

Address: _____ City: _____ Postal Code: _____

Date of Birth (dd/mm/yy): _____ Age during Camp: _____

Phone/Cell: _____ Email: _____

Do you have Standard First Aid & CPR or equivalent First Aid Training? ☐ Yes ☐ No

If yes, when did you receive your First Aid Training? _____

Camps for which I am available: (please place checkmark beside camps)

July 2-6	<input type="checkbox"/>	Fishing Camp (10-13yrs Boys)	<input type="checkbox"/>	Paintball #1 (12-17yrs Co-ed)
July 8-12	<input type="checkbox"/>	Ranch #1 (7-11yrs)	<input type="checkbox"/>	
July 14-19	<input type="checkbox"/>	Blitz #1 (12-14yrs)	<input type="checkbox"/>	
July 21-26	<input type="checkbox"/>	Riding School (12-17yrs)	<input type="checkbox"/>	Paintball #2 (12-17 Boys)
July 28 – Aug 1	<input type="checkbox"/>	Ranch #2 (7-11yrs)	<input type="checkbox"/>	
August 6-10	<input type="checkbox"/>	Ranch #3 (7-11yrs)	<input type="checkbox"/>	
August 11-16	<input type="checkbox"/>	Blitz #2 (12-14yrs)	<input type="checkbox"/>	
August 18-23	<input type="checkbox"/>	Super Camp (14-17yrs)	<input type="checkbox"/>	

Positions applying for (we will try our best to give you the positions requested)

- | | | | |
|---|-------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> Camp Director | <input type="checkbox"/> Counselor | <input type="checkbox"/> Ass't Counselor | <input type="checkbox"/> Dish Worker |
| <input type="checkbox"/> Skill Instructor | <input type="checkbox"/> Wrangler | <input type="checkbox"/> Ass't Wrangler | <input type="checkbox"/> Maintenance |
| <input type="checkbox"/> Spiritual Director | <input type="checkbox"/> Nurse | <input type="checkbox"/> Lifeguard | <input type="checkbox"/> Videos |
| <input type="checkbox"/> Cook | <input type="checkbox"/> Ass't Cook | <input type="checkbox"/> Housekeeper | |

I could teach (T) or assist (A) in the following activity areas:

- | | | |
|--|---|--|
| <input type="checkbox"/> T <input type="checkbox"/> A – Archery | <input type="checkbox"/> T <input type="checkbox"/> A – Canoeing | <input type="checkbox"/> T <input type="checkbox"/> A – Horsemanship |
| <input type="checkbox"/> T <input type="checkbox"/> A - Camping Skills | <input type="checkbox"/> T <input type="checkbox"/> A – Arts & Crafts | <input type="checkbox"/> T <input type="checkbox"/> A – Swimming |
| <input type="checkbox"/> T <input type="checkbox"/> A – Song Leading | <input type="checkbox"/> T <input type="checkbox"/> A – Wide Games | <input type="checkbox"/> T <input type="checkbox"/> A – First Aid |
| <input type="checkbox"/> T <input type="checkbox"/> A - Paintball | | |

I want to put my Christian faith in action by serving at Teen Time Camps again this summer.

Signature

Date

Please print name