

NEW YORK STATE SHERIFFS' CAMP

Camp Iroquois 2022

NAME _____ SOC. SEC. # _____
FIRST MI LAST

Home Address _____ PHONE _____
CITY STATE ZIP

College Address _____ Cell PHONE _____
CITY STATE ZIP

E MAIL _____

How many weeks would you like to work? _____

Please check all weeks that you are available:

- Week 1: June 26 – July 2
- Week 2: July 3 – 9
- Week 3: July 10 - 16
- Week 4: July 17 - 23
- Week 5: July 24 – 30
- Week 6: July 31 - August 6

Birth date: ___/___/___

Anyone under the age of 18 must be able to provide valid working papers

T-shirt size: _____

Have you had any criminal convictions?

YES NO

EDUCATION

School	Name	Date Enrolled	Year of Graduation	Course of Study
High School				
College				
Other				

REFERENCES

Please give three references who are not relatives.

NAME	EMAIL ADDRESS	PHONE	OCCUPATION

Emergency Contact _____ Relationship _____ Phone _____

I understand that any misrepresentation of facts on this form is cause for dismissal.

signature of applicant

date

Archery, Arts and Crafts, Basketball, Cheerleading, Dance, Football, Gymnastics, Hiking, Lacrosse, Nature Study, Photography, Soccer, Volleyball and Yoga are some of the land classes that we teach. Do you have experience in any of these activities or other activities suitable for 9-12 year olds.

Canoeing, Fishing, Kayaking, sailing, snorkeling and swimming are some of the water classes that we teach. What experience do you have in water activities:_____

Some skills that are helpful at camp are cooking, Bike and/or boat maintenance, carpentry and electrical knowledge. Musical talent including singing and/or the ability to play guitar or trumpet. Knowledge of skits, project adventure activities and experience with children are all helpful. What skills do you have that would be beneficial to camp.

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CERTIFICATIONS

(Please include cards or a photocopy with this application)

	EXPIRATION DATE	TRAINING SITE
CPR/AED	_____	_____
FIRST AID	_____	_____
LIFEGUARDING	_____	_____
WATERFRONT	_____	_____
WSI	_____	_____
RN, LPN, EMT	_____	_____

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PLEASE WRITE A BRIEF STATEMENT ON WHY YOU WOULD LIKE TO BE A SUMMER CAMP STAFF MEMBER.

Please complete this application with optional resumé and mail to Camp Iroquois Director Dave Sherman at 905 Mt. Zoar Rd., Elmira, NY 14904 or email to dsherman@stny.rr.com