

Office fill in only			
Date application received:			
Interview Time & Date:			

# **RETURNING STAFF APPLICATION FORM**

Please print this application, fill it out, scan it, and email it to info@riversedgecamp.org.

Personal Inform	ation						
Please print on line ab	oove requested informa	tion					
					□Paid	□Volunteer	□Raising Support
Position examples	Position Applying	For					<u> </u>
•Cabin Leader				□Male	□Female		
•Medic	Full Name			Gender			Camp Nickname (eg. Moose)
-Photographer/							
Videographer	Address						
•Programmer							
•Food Services	City			Province		Postal Code	
<ul><li>Hospitality</li></ul>							
•Maintenance	Social Insurance N	Number		Citizenship		Driver's Licens	se #
<ul><li>Housekeeping</li></ul>							
•Equine	E-mail			Cell Phone #		Alternate Pho	ne #
	Best way to conta	act	□E-Mail	□Cell Phone (call)	□Cell Phone (tex	kt) □Home P	hone
	Birth Date (eg. Ja	n 1, 1990)			Age		Today's Date
	□Yes	□No			□Yes	□No	
	Are you currently in school? (high school,			Do you plan to return to school in the fall? (high school,			
	college, university, etc.)			college, university, etc.)			
Emergency Con	tact Information						
Please print on line ab	ove requested informa	tion					
	Parents/Guardians Name			Parents/Guardians E-mail			
	Parents/Guardians Cell Phone #			Parents/Guardians Alternate Phone #			
	Emergency Contacts Name			Emergency Contacts E-mail			
	Emergency Contacts Cell Phone #			Emergency Contacts Alternate Phone #			

#### 1+ Principle

The following information will assist us in knowing your interest level and skill in common Rivers Edge tasks/activities. During your time at Rivers Edge you may be asked to perform tasks outside of those listed as your preferred skills. At Rivers Edge we ask our Staff to be flexible and to work within the 1+ principle.

**The 1+ Principle:** Teamwork is a vital part of any camping program. Although all staff have a primary role at Rivers Edge Camp, when help is needed they will be required to assist in multiple areas of the camp. This means we all agree to remain flexible and provide assistance in more than one area of the camping ministry.

	understand the 1+ principle and am excited to work at Rivers Edge wherever I am most needed:
	Other information about your skills:
piritual Experie	nce
	Summarize what God has done in your life, since camp ended.
	Provide the names of three people who will be praying for you as you serve:
	<u>1.</u> <u>2.</u> <u>3.</u>

#### References

#### **MUST COMPLETE ALL 3 REFERENCES**

#### 1. Pastor/Mentor/Friend/Youth Leader

This person needs to be able to speak to your s	spiritual maturity. (Please include name and phone #)
Name:	
Phone Number:	
Relationship:	
2. Employer/Teacher/Supervisor	
Name:	
Phone Number:	E-mail:
Relationship:	
3. Employer/Teacher/Supervisor	
Name:	
Phone Number:	E-mail:
Relationshin:	

## Availability

AM AVAILABLE: (check all that apply)
□ Full Time Starting:
□ Spring (May-June)
□ Summer (July and August)
Please specify dates you will need off/additional information:

## Skills/Interests

Knowledge of your skills helps us utilize your talents at camp

PROGRAM RELATED POSTIONS ONLY.

Eg. Cabin leader, medic, programmer, equine, etc.

## Please mark the following camp program components as noted:

	Have accreditation in area	Interested and capable of teaching	Interested but need training	Capable but not interested	Please don't put me there!!
Admin					
Archery					
BMX					
Café/Store					
Ceramics					
Drama/Skits					
Food Services/Hospitality					
First Aid/CPR					
High Ropes					
Horses/Equine					
Housekeeping					
Maintenance					
Music (specify below)					
Paracord Bracelets					
Photography/Video					
Riflery					
Sling Shots					
Sports					
Swimming/Lifeguarding					
Survival/Outdoor Living					
Tie Dye T Shirts					
Video Editing					
Wall Climbing					
Wide-Games					

What instruments do you play?	
Other information about your skills:	

□ I hereby allow Rivers Edge Camping A communicating information with myse	Association to keep my information on a mailing list for the sole use of lf and other staff members.
<ul> <li>□ I also allow Rivers Edge Camping Asso purposes.</li> </ul>	ociation to use any photos of me taken during my time at camp for advertisement
•	n provided in this document is true to the best of my knowledge, and any false lication and is reason for dismissal as a staff member at Rivers Edge Camp.
Date	Signature
Date	Parent/Guardian Signature (if under 18)
Thank you for applying at River	rs Edge Camp. Please send completed application to:
E-mail:	info@riversedgecamp.org
Rivers E	Edge Camp
Box 39	
Cremon	na, AB TOM ORO
Phone:	(403) 637-2766
i none.	(403) 037 2700

Fax: (403) 637-2765

Declaration