

CAMP KE-MON-OYA

Camp Counsellor Application

(Summer 2026)

Name:

Address: City:

Prov./State: Postal Code:

Phone: Health Number:

SIN: Age: Birthday:

School:

Church:

e-mail address:

Indicate what age you prefer to work with:

- Age 7, 8, 9 Age 10, 11, 12 Age 13, 14, 15 No preference

Indicate what weeks you are available:

Junior Camp July 06 – July 10 July 13 - July 17

Teen Camp July 20–July 24 July 27 – Jul 31 Aug 03 – Aug 07

- You must be at least 15 years of age to apply to work at Junior Camp and at least 17 years old to apply to work at Teen Camp.

Please number three activities with 1, 2, and 3 to indicate the ones that you are most interested and willing to be involved in leading and organizing.

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|--|---|--------------------------------------|
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Canoeing | <input type="checkbox"/> Archery |
| <input type="checkbox"/> Rowing | <input type="checkbox"/> Indoor Games | <input type="checkbox"/> Crafts |
| <input type="checkbox"/> Field Games | <input type="checkbox"/> Indoor Sports | <input type="checkbox"/> Drama |
| <input type="checkbox"/> Field Sports | <input type="checkbox"/> Sailing | <input type="checkbox"/> Kayaking |
| <input type="checkbox"/> Music (Singing) | <input type="checkbox"/> Music (Instrument) | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Wilderness | <input type="checkbox"/> Windsurfing | <input type="checkbox"/> Fishing |

Please indicate which activities you are qualified to teach or have had experience leading in the past. Please mention any musical instruments that you play that could be used in worship times.

Please list your qualifications for any activities or sports, plus any first aid and CPR courses you may have taken. (Please include a copy of certifications with re-certification dates)

Why do you desire to work at Camp Ke-Mon-Oya this year?

What are your personal goals for the summer?

Write a short description of your testimony describing who Jesus Christ is to you. Explain when you accepted Christ, how you are currently growing as a Christian and how you share Christ with others.

State your Strengths and Weaknesses:

Strengths (areas of strong ability):

Weaknesses (where you would benefit from growth):

What previous experience do you have working at camp and /or with children?

How did you hear about this counsellor position?

Please provide the names, addresses and phone numbers of **two people** who know you well and could provide a reference. Also, please provide a reference letter from an adult who has observed you working with youth/children.

1. What is your relationship with this person?

Name Phone

Address email

2. What is your relationship with this person?

Name Phone

Address Email

Thank you for applying for a position as camp counsellor. We will be reviewing the applications and interviewing potential candidates. We will notify you about the status of your application. **Please save as 'your name' and email this application to gbrinkman@ntcs.on.ca**