



STAFF APPLICATION

Lions Camp Horizon
7506 Gemini Road
Blaine, WA 98230-9274

Telephone: 360-371-0531
Email: campdirector@lionscamphorizon.org
Website: www.lionscamphorizon.com

PLEASE PRINT LEGIBLY

Name: _____
 First Middle Last Nickname/known as

Address: _____ Mailing Address if different: _____

City: _____ State: _____ Zip Code: _____ Telephone: _____

Email Address: _____ Are you over 18 years of age?: _____

Are you a U.S. citizen? If not, are you eligible for legal employment in the United States? Yes: _____ No: _____
(If employed by Lions Camp Horizon, proof of identify and legal right to work in the United States will be required.)

Education and Training

	School Name	Location	Graduation Date	Diploma/Degree
High School				
College				
Graduate School				
Other				

Please list any certificates, licenses, professional associations, specialized training:

Please describe any experience (if any), you have working with individuals with special needs:

Employment History

Company Name	Location	Dates of Employment	Position	Telephone No.

Have you ever been convicted of a crime or spent time in jail/prison? Yes: _____ No: _____ If yes, please explain:

(Note: Answering yes will not automatically disqualify you from employment)

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Please list any skills or talents you could share to enhance the camp experience:

Some positions require staff to be certified in CPR/First Aid or have a Food Handler’s Permit. Would you be able to obtain certification prior to the start of camp if necessary? Yes_____ No_____

Have you ever worked or volunteered at a summer camp? _____ Which one? _____

Some Essential Requirements for our Staff:

- Participate to the fullest extent in camper activities? Yes_____ No_____
- Dress up, sing, dance and act silly? Yes_____ No_____
- Be awake and ready on time to help with campers? Yes_____ No_____
- Help adapt activities to fit the needs of the campers? Yes_____ No_____
- Help campers with personal care? Yes_____ No_____
- Work as a team with staff to make camp the best experience possible for our campers? Yes_____ No_____
- Keep an upbeat, positive attitude even when you’re tired or having a hard day? Yes_____ No_____

References (No family members, please)

Name_____ Relationship_____

Address_____ City_____ Zip_____

Telephone_____

Name_____ Relationship:_____

Address_____ City_____ Zip_____

Telephone_____

Name_____ Relationship:_____

Address_____ City_____ Zip_____

Telephone_____

Please check our website for the camp dates and list the dates below you are available to work

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I certify that this application and other documents I submit relative to applying for employment by LCH contain no willful mis-representations or falsifications, that the information given by me is true to the best of my knowledge. I authorize LCH to complete a criminal background check, verify education and employment history and contact personal references listed.

Applicant’s Signature_____ Parent/Guardian Signature_____

Date_____ Date_____ (if applicant is under 18)