

Flourtown Summer Day Camp Application

Name: _____
Last First MI

Address: _____

_____ Town/City State Zip

Phone: _____
Home Work

_____ Cell Email

Township in which you reside: _____

Social Security #: _____ Date Of Birth: _____

Position applying for (Note: **Senior Counselors** and **Special Instructors** must be 18 yrs of age and/or HS Graduate this year.)

____ Junior Counselor ____ Senior Counselor ____ Lifeguard ____ Special Instructor

If Jr. Counselor: ____ Age ____ Grade completed this school year

Please check off the weeks that you are committing to work. If partial weeks due to school ending late, please write down the exact dates that you can work that particular week. A minimum seven week commitment is recommended.

Week of:

6/23-6/27 6/30-7/4 7/7-7/11 7/14-7/18 7/21-7/25 7/28-8/1 8/4-8/8 8/11-8/15

Note: We are closed on Friday, July 4th.

Your completion of these forms helps us to adequately staff the Flourtown Summer Day Camp. It does not guarantee nor constitute a contract of employment.

Mail completed forms to:

Flourtown Summer Day Camp
P.O. Box 155
Flourtown, PA 19031

Contact Danny Collins, Camp Director at 215-836-4627 or email at dcollins@flourtownswimclub.net

For Office Use Only (Do not write in this box)

Date of Hire: _____ Pay Rate: _____ Employee #: _____