



Ardsley Day Camp
700 Ashford Avenue
Ardsley, NY 10502
Andy Beames, Director

Day Camp Application for Employment

Applicant Information:

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Cell Phone: _____

Email: _____ Home Phone: _____

Date of Birth: _____ Current Grade: _____ SS#: _____

Health Insurance Carrier: _____ ID#: _____

RELEASE (must be completed by parent if you are under 21 years old): I give my permission, in case of injury, to take my child to a hospital for treatment, to include evaluations of injuries, x-rays and needed care.

Parent/Guardian Signature: _____ Date: _____

Emergency Contact Information:

Name of Contact: _____

Relationship of contact: _____ Contact Number: _____

Qualifications:

EXPERIENCE WITH CHILDREN

Position	Place	Date	Supervisor Name and Contact Info
1			
2			
3			

LIST ANY CERTIFICATIONS (Red Cross, CPR, Lifeguard Training, WSI, etc.)

(914) 295-5706
camp@ardsleyschools.org
www.ardsleydaycamp.org



@ArdsleyDayCamp



ardsleydaycamp

Can you swim?

yes

no

Are you able to work from 6/29/20-8/7/20

yes

no

Position Desired:

What position are you applying for?

What age group are you most interested in?
(Check as many as you like)

- Counselor
- Lifeguard
- Camp Concierge

- | | | | |
|-------|-----|---------------|-----|
| Pre-K | K | 1st | 2nd |
| 3rd | 4th | Middle School | |

List any skills you have that will be helpful at Ardsley Day Camp.

1. _____
2. _____
3. _____

List any activities (sports/hobbies) that you enjoy and that you feel you could lead at ADC.

1. _____
2. _____
3. _____

Do you have any previous camp experience? _____ If so, where? _____

References: (If you are an Ardsley student, these should be three TEACHERS you have had.)

1. _____
2. _____
3. _____

Please note the following:

- All personnel under the age of 18 must submit working papers.
- Copies of any certifications should be included with this application.
- You must be able to work for ALL 6 weeks of camp. The only allowable absences are college orientation, a doctor's appointment or family emergency.
- Jobs are not guaranteed. The number of employees camp employs is determined by camp enrollment.
- Immunization records must be submitted before the camp season begins.

Applicant's Signature: _____ Date: _____

This application should be returned to: Andrew Beames, Director of Summer Recreation-Ardsley Middle School
700 Ashford Avenue, Ardsley, NY 10502