

Camp Calvin 2022
Counselor Application

Greetings in the Lord! Thank you for considering how you could be an influence for Christ at camp this year. Please complete this questionnaire and return to Stephen Jansons, Camp Director.

Name: _____ Age: _____ Male/Female

Address: _____ Phone: _____

City/State/ZIP _____ Email: _____

Church you attend: _____

1. Are you leading a youth group? YES NO if so, name of youth group? _____

2. How many kiddos do you hope to bring with you? _____

3. Are you interested in sharing any musical talents at camp? Please specify (singing, guitar, etc.)

4. Have you been a camp counselor (here or elsewhere) before? YES NO

5. Why do you want to be a counselor?

6. Are you life guard certified? YES NO

(If so, please provide a copy of your Lifeguard Certificate)

Statement of Commitment: I promise to abide by all rules and regulations set by the board, Camp Director, and Cedar Springs. I promise to support the Camp Director in any way possible.

Signed: _____ Date: _____

Personal Reference: _____ Date: _____

(Please list phone, email & address on reverse side for contacting)

May God richly bless you in your decision. Please return to: Stephen Jansons

+1 604.368.2352

stephenjansons@gmail.com