



CAMP SVIVA 2022 STAFF APPLICATION

2022 CAMP DATES: July 26 – August 18 STAFF DATES: July 25 – August 18

Required for ALL Applicants:

**PLEASE ATTACH A
CURRENT PICTURE OF
YOURSELF, AS THIS
APPLICATION WILL NOT BE
CONSIDERED WITHOUT
ONE.**

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Grade: _____

Father's Name: _____ Mother's Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Summer Phone: (____) _____

Date of Birth: _____ Age: (as of June 30) _____ Social Security: ____-____-____

Parents' Marital Status: ☐ Married ☐ Divorced ☐ Separated ☐ Widowed

Father's Occupation: _____ Firm Name: _____

Father's Email: _____ Father's Cell Phone: (____) _____

Mother's Occupation: _____ Firm Name: _____

Mother's Email: _____ Mother's Cell Phone: (____) _____

Email: (personal) _____ Cell Phone: (personal): (____) _____

Mother's Maiden Name: _____ School Presently Attending: _____

REQUIRED: Please list any daily prescription medication(s): _____

Where will you be the first half of the summer? _____

Do you have a sister coming to Camp Sviva? ☐ Yes ☐ No

Emergency Contact: _____ Relationship to You: _____

Home Phone: (____) _____ Cell Phone: (____) _____

List 3 friends you would like to spend your camp experience with:

REFERENCES

Give one **camp** and one **school** reference, who besides knowing you well, are in the field of *Chinuch* and have seen you work with children:

Name: _____ Affiliation: _____ Phone: (____) _____

Name: _____ Affiliation: _____ Phone: (____) _____

POSITION APPLYING FOR:			
Junior Staff GRADE 10 Positions:	Junior Staff GRADE 11 Positions*:	Staff GRADE 12 Positions**:	Staff POST H.S. Positions**:
Mothers Helper	Junior Counselor (very limited) Art Day Camp Counselor HCA- H.C. Assistant Lifeguard Sports Counselor Technical Waitress/ Workshops Ropes Course	Counselor Canteen Technical Lifeguard Photography/Video Ropes Course	Canteen Head of Night Activity Head of Singing/D.R. Head of Sports Head Waitress Office Photography/Video Technical Lifeguard
*There is a \$550 mandatory camp fee for Junior staff (finishing 11 th grade). **Camp pays a salary (finishing 12 th grade & Post H.S.)			

I am applying for the following three positions: (Please list in order of preference.)

1. _____ 2. _____ 3. _____

Please check off the following talents you have to contribute to Camp Sviva (minimum 2 required).

- | | | |
|--|--------------------------------------|--|
| <input type="checkbox"/> Art | <input type="checkbox"/> Gymnastics | <input type="checkbox"/> Shabbos Decor |
| <input type="checkbox"/> Baking | <input type="checkbox"/> Hair | <input type="checkbox"/> Tech |
| <input type="checkbox"/> Choir | <input type="checkbox"/> Newspaper | <input type="checkbox"/> Video |
| <input type="checkbox"/> Cookie Decorating | <input type="checkbox"/> Photography | <input type="checkbox"/> Workshops |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Sewing | <input type="checkbox"/> Other: _____ |

- Are you a certified lifeguard? Yes _____ No _____
- Would you like to give shiur (for 12th grade and post HS only)? Yes _____ No _____

CAMPING EXPERIENCE

Indicate where you have spent your last four summers:

	<u>July</u>	<u>August</u>
2021		
2020		
2019		
2018		

Experience

Describe your experiences working with children. Give ages, length of time and activities:

What do you feel you can contribute most to camp? Please list any talents you may have: (Now is not the time for modesty.)

What extra-curricular activities do you participate in at school? (Explain)

To ensure your status as a role model for our campers, your application and acceptance will be based upon your understanding and compliance of these dress code standards.

Our dress code requires that:

- All clothing (tops and skirts, Shabbos and weekday) be loose-fitting
- Only collared shirts may be worn
- Skirts cover knees at all times
- There be no slits in skirts or dresses
- No t-shirts or sweatshirts have wording or lettering across the front
- Necklines and sleeves be proper by all accepted standards
- All socks be at least knee length, even with a long skirt
- Only appropriate nightwear, suitable for a Bais Yaakov girl, should be worn (no sleeveless shirts...)
- Skirts with back pockets are not worn

I have read the terms of this application, as well as the accompanying cover letter and will abide by its conditions. I understand that there is a \$550 fee for Junior Staff (finishing grades 10 and 11) due upon acceptance.

Applicant's Signature: _____ **Date:** _____

Trip/Activity Authorization/Hold Harmless Agreement:

By completing/signing this application, I hereby authorize Camp Sviva (hereinafter Camp) to take my child(ren) off Camp Grounds to go on trips organized as part of the camping program. This may include swimming and/or boating sites. In addition, my child(ren) may participate in any activity organized by Camp, including but not limited to, land sports, waterfront activities, ropes course, indoor activities, bicycling, hiking, cookouts, etc., and I assume the inherent risk of such activities and camp programs. I will hold Camp harmless in the event of injury or property damage or loss as a result of such activities. I also agree to abide by all rules and regulations as set forth in the camp applications, in the director of information and by the camp administration.

Medical Care Authorization

I the undersigned, parent/guardian of the above noted minor, do hereby authorize the administration of Camp Sviva as my agent to consent to any diagnostic procedure or medical care which is deemed advisable by, and is rendered under the general or special supervision of any licensed physician and/or surgeon at a hospital or doctor's office. I give permission to the physician selected by the camp to order x-rays, routine tests, and treatment related to the health of my child for both the routine health care and in medical situations. If I cannot be reached in an emergency, I give my permission to the physician selected by the Camp Sviva administration to hospitalize, secure proper treatment for, order injections, order anesthesia, or order surgery for my child. I understand the information on this form will be shared on a "need to know" basis with camp staff. I give permission to reproduce this form. In addition, the camp has permission to obtain a copy of my child's health record from providers who treat my child and these providers may talk with the program's staff about my child's health status. This authorization shall be in effect until the of the summer camp session until it is revoked in writing and such revocation is delivered to the Camp Sviva office via certified mail.

Parent's Signature: _____ **Date:** _____

Sign and return application to:
Email: svivasleepaway@gmail.com