



Staff Application Form

(For a specific week)

Please use BLOCK CAPITALS

Minimum age at camp for leaders is 18 for Junior & Inters Weeks - 21 for Sen 2 - 23 for Sen 1 & Sen +
You cannot attend consecutive weeks at camp in any capacity

PERMANENT ADDRESS:
Surname (Mr, Mrs, Miss, Ms)

Forenames:

Address:

.....Postcode:

Tel No:(day) (eve)

E-mail:

Date of birth:

CONTACT ADDRESS: (if different from permanent address)
Surname (Mr, Mrs, Miss, Ms)

Forenames:

Address:

.....Postcode:

Tel No:(day) (eve)

E-mail:

WEEK ATTENDING:
I apply to attend

week of camp which takes place from
..... to

The position I apply for is as a group leader* / caterer*
Please delete as applicable

The church I currently attend is
.....

EMERGENCY CONTACT DETAILS:
Please give a contact name in case of an accident or emergency

Name:

Address:

.....Postcode:

Tel No:(day) (eve)

Please complete the relevant sections of this form marking any section 'N/A' if not relevant

Please state in what way your circumstances have changed since last attending camp

.....

What experience have you had in the past year in children's/youth work

.....

Please state any qualifications/abilities you have which would be of benefit at camp (e.g. play guitar, first aider etc.)
.....

Please state any special dietary requirements (e.g. vegetarian, gluten free)

If you wish to discuss any aspect of your application further, please contact
the General Secretary, Claire Whitcher on 01925 655339

