



SAM Leadership Application 2017

*All potential SAM Leaders must be 14 years of age for Phase I and 15 years of age for Phase 2, attend 5 full weeks of camp, and submit the proper paperwork by May 1st.

Applicant's name: _____

Address: _____ City _____ State _____ Zip _____

Home Phone: _____ Age as of June: _____

Summer Camp Experience

Camp Name/Location/Years Attended

Extracurricular Activities

Clubs: _____

Sports: _____

Other: _____

Please list three reasons why you would like to become a SAM Leader:

1. _____

2. _____

3. _____

Please list four skills you would like to develop as a SAM Leader:

1. _____

2. _____

3. _____

4. _____

What three qualities best describe you? :

1. _____

2. _____

3. _____

Please list any licenses or certifications that you hold (CPR, First Aid, Lifeguard, Babysitting):

_____ Expiration Date _____

_____ Expiration Date _____

_____ Expiration Date _____

Please indicate which weeks of camp you are attending (must be at least 5 weeks):

Week 1

Week 5

Week 9

Week 2

Week 6

Week 10

Week 3

Week 7

Week 11

Week 4

Week 8

Week 12

Ages you would prefer working with:

Camp SAM: ___Freshman (5-6) ___Sophomores (7-9)

Camp Glam: ___Princess (5-6) ___Diva (7-9)

Camp Spirit: ___Shout (5-6) ___Jump (7-9)

SAM Playcare: ___Pandas (2 ½ -3) ___Bears (4)

Applicant's Statement:

I certify that the information made herein and on the enclosed resume and/or attachments are true to the best of my knowledge. I authorize investigation of all statements contained in this application, including a thorough background investigation, and understand that false or misleading information given in all my applications or interview(s) may result in discharge. I release from liability all persons and organizations reporting information required by the application.

Signature of Applicant: _____ Date: _____

Signature of Parent/ Guardian: _____ Date: _____

Please turn this application into the Camp Office no later than May 1st, along with 1 letter of recommendation (from someone other than a family member).

Camp SAM
1855 Hurffville Road Sewell, NJ 08080

(856) 401-8111