

2008 CAMP HAVE SOME FUN

APPLICATION FOR COUNSELOR

Name: _____

Address: _____

Phone number: _____

Email: _____

School you now attend: _____

Date of Birth: _____ Age _____

Social Security number: _____

Previous work or camp experience, baby sitting experience or certification, etc.

Special interests or hobbies: _____

Return application to: Ms. Joanne Foy
Township of River Vale
406 Rivervale Road
River Vale, N.J. 07675

You will be notified of the time, place and date of your interview by email.

