

KinderCamp Counsellor Application Form: 2026

83 Green Lane Thornhill L3T 6K6

*****ATTACH A COPY OF YOUR RESUME WITH THIS APPLICATION*****

First Name: _____ Last Name: _____

Address: _____

City: _____ Postal Code: _____

Email Address: _____

Phone Number: (____) _____ Cell Phone: (____) _____

Age: _____ Birthday: (dd/mm/yy) _____

School Attending (if applicable): _____ Grade/Year Completing (if applicable): _____

Social Insurance Number: _____

Employment History:

1. _____
2. _____
3. _____

Previous experience with children:

1. _____
2. _____
3. _____

Skills: _____

Interests: _____

Why would you like to work at KinderCamp? _____

Preferences:

Age: Please check off one box in each column:

- | | |
|--|---|
| <input type="checkbox"/> 18 months | <input type="checkbox"/> 8:40 – 3:40 (Full Day) |
| <input type="checkbox"/> 2 year olds | <input type="checkbox"/> 8:40 – 4:30 (Extended Program) |
| <input type="checkbox"/> 3 year olds | |
| <input type="checkbox"/> 4/5 year olds | |

Sessions: Priority will be given to those who intend to stay for the entire summer

- 1st Session: July 2 – July 31
- 2nd Session: Aug 4 – August 26
- Full summer: July 2 – August 26

Job Titles: Number according to preference

- Camp Counselor
- ECE Teacher
- Junior Counselor (14-18)
- Head Counselor

Please attach a copy of your updated Immunization records!

For all new applicants, please include 2 references below: (Name, Phone #, relationship)

Please email completed form together with resume to ariel@chabadmarkham.org