

# Offense-Defense Football Camps

## 2008 Father Counselor Application

Offense-Defense is constantly looking to assemble the most highly qualified staff it can. Opportunities are available in each of the following areas listed below and contracts can be awarded on a weekly or seasonal basis.

### **Father Counselor Description:**

Father Counselors are responsible for all supervision and security of the campers while off the field. Camp Counselors are required to stay in the dormitories with the campers and are responsible for supervision of the camper during all non practice time. Counselors are required to attend a staff orientation the day prior to camp starting. All lodging and meals along with a camp store credit are given in exchange for service.

Name: \_\_\_\_\_

### Home Address:

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### Work/School Address:

Employer/School Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Personal:

Age: \_\_\_\_\_ Birth date: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ T-shirt size: \_\_\_\_\_

SS#: \_\_\_\_\_ Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_

### Experience working with children:

Organization: \_\_\_\_\_ Position: \_\_\_\_\_ Dates: \_\_\_\_\_

Organization: \_\_\_\_\_ Position: \_\_\_\_\_ Dates: \_\_\_\_\_

Organization: \_\_\_\_\_ Position: \_\_\_\_\_ Dates: \_\_\_\_\_

**Please list all camp locations that you are available to attend:**

**References:** Please provide 3 personal references, complete with address & phone numbers:

**#1**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_  
How many years have you know this person? \_\_\_\_\_  
What is your relationship? \_\_\_\_\_

**#2**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_  
How many years have you know this person? \_\_\_\_\_  
What is your relationship? \_\_\_\_\_

**#3**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Office Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_  
How many years have you know this person? \_\_\_\_\_  
What is your relationship? \_\_\_\_\_

**The above information must be fully completed. Each reference will be contacted.**

**Release:**

I have read the description for the Father Counselor position. I understand the terms and conditions of this responsibility. I understand I will receive two Official OD Staff Shirts, my lodging and meals plus a stipend for my efforts. I authorize Offense-Defense to check my background for any criminal offenses. If I am selected by Offense-Defense as a Father Counselor, I will provide supervision for all my assigned campers. I will also assist camp staff with any duties assigned by the Camp Director. I further understand that if my performance falls below acceptable expectations, I may be discharged from my duties and released from camp without compensation.

**Signed:** \_\_\_\_\_ **Date of Application:** \_\_\_\_\_

**309 Bush Drive, Myrtle Beach, SC 20579-7315 Phone: 843-903-1888 Fax 843-903-2749**