



Will Wade Basketball Camps Employee Application



Contact Information

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____

Email: _____

Social Security #: _____

Date of Birth: _____

Note: We are required to run background checks. All information above is required to be considered for a position.

Employment Information

Previous Camps Worked (include dates):

Current / Most Recent Employment (include dates):

Please indicate which camps you are available to work

Note: Housing is not provided for Skill Development and Father Child

Skill Development Camp:
June 6th & 7th

Team Camp June 8th-10th

Father/Child Camp
June 20th

Overnight Camp Session I
June 22nd-25th

Overnight Camp Session II
June 27th-30th