
CAMP - of - the - WOODS

Parental Authorization to Work

For staff members under 18 as of date of hire.

I approve of my son or daughter _____'s employment at CAMP-of-the-WOODS as a Staff Member and I commit to be supportive of all management decisions pertaining directly or indirectly to my child. I will endeavor to see that my child fulfills their responsibilities as a staff member in every respect, and **I guarantee that they will fulfill the length of commitment as designated on the signed contract.**

I understand that CAMP-of-the-WOODS is a Christian Camping entity and that if I have any questions, I ought to review the application and website at <http://www.camp-of-the-woods.org> or contact the Personnel Office.

Parent/Guardian Signature: _____

Print Name: _____

Email: _____

Cell #: _____

Date: _____

Questions: Contact the Personnel Office at: dessaa@cotw.org or call 518-548-4311 EXT. 4864