## CAMP

## Camp Ignite 2023 Participant Application

Applicant Information						
Full Name:						
Address:	Last		First			
	Street Address					
Phone:	City	Province Email:	Postal Co	ode		
Birthdate:	date: Grade:		School:			
	yyyy-mm-dd	Fall 2023				
		ent / Guardian Conta	ct Information			
Parent / Gua	rdian Full Name:					
Phone:	Las	st	First Email:			
-						
		General Inform	ation			
How did you	hear about Camp Ignit	e?				
Have you applied to Camp Ignite Previously?		If yes, wher	?			
□Yes □No						
experience?	any previous firefightir	If yes, pleas	e provide details.			
□Yes □No						

What about Fire and Emergency Services interests you?				
Please tell us about your volunteer or work experience. Please include any relevant skills or experience.				
Please tell us about your interests, including any participation in sports or hobbies.				
What do you hope to take away from your experience at Camp Ignite?				

Have you ever had any health problems such as asthma, diabetes, heart trouble, seizures, bleeding disorder, fainting spells, or any other health condition that may restrict your ability to participate in the fire camp? If yes, please explain (be specific):
Do you have any dietary restrictions, food allergies or sensitivities we should know about?

Additional Information

Please write and attach a minimum 500-word essay describing a person in your community or the world that you admire. What are the qualities that made you choose this person? How do you hope to develop these qualities in yourself? Your essay will not be evaluated based on grammar or punctuation. It may be handwritten, typed, or a video submission. We want to understand more about who you are, therefore, it is important that this essay is in your own words.

Signatures				
Applicant's Signature:		Date:		
Parent / Guardian Signature:		Date:		

The deadline for application submissions is APRIL 1st, 2023.

Please email application to: <a href="mailto:info@campignite.com">info@campignite.com</a>