

# Camp Ignite 2022

## Participant Application



### Applicant Information

Full Name: \_\_\_\_\_  
*Last* \_\_\_\_\_ *First* \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_ *City* \_\_\_\_\_ *Province* \_\_\_\_\_ *Postal Code*

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

Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_  
*yyyy-mm-dd:* \_\_\_\_\_ *Fall 2022*

### Parent/Guardian Contact Information

Parent/Guardian Full Name: \_\_\_\_\_  
*Last* \_\_\_\_\_ *First* \_\_\_\_\_

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

### General Information

How did you hear about Camp Ignite?

Have you applied to Camp Ignite previously?

Yes No

If yes, when?

Do you have any previous firefighting experience?  
*\*Not required to participate*

Yes No

If yes, please provide details

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?

**Additional information**

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?

*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**

*\*Please consider using a digital signature to aid in the processing of this form*

Applicant's  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Legal  
Guardian  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

THE DEADLINE FOR APPLICATION:  
TO BE SUBMITTED BY **JUNE 1, 2022**

PLEASE EMAIL APPLICATION TO:

[info@campignite.com](mailto:info@campignite.com)

