

**Application Form – Summer Camp Assistant 2026**

Name: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

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

Telephone: (please provide 2) \_\_\_\_\_ Email: \_\_\_\_\_

Name of school attending: \_\_\_\_\_ Year level: \_\_\_\_\_

Are you a Bermudian or BOTC?    **YES**    **NO**

Please indicate the weeks for which you are requesting employment:

Week 1    29<sup>th</sup> June – 3<sup>rd</sup> July

Week 2    6<sup>th</sup> July – 10<sup>th</sup> July

Week 3    13<sup>th</sup> July – 17<sup>th</sup> July

Week 4    20<sup>th</sup> July – 24<sup>th</sup> July

Week 5    3<sup>rd</sup> August – 7<sup>th</sup> August

Week 6    10<sup>th</sup> August – 14<sup>th</sup> August

Week 7    17<sup>th</sup> August – 21<sup>st</sup> August

Week 8    24<sup>th</sup> August – 28<sup>th</sup> August

\*Preference will be given to applicants who can work a minimum of 3 weeks

If you have already been an Aqua Camp assistant, **you may omit the next 3 questions**.

Why are you interested in participating in Aqua Camp? \_\_\_\_\_

Science/Social Studies courses taken at school: \_\_\_\_\_

Previous experience of teaching or working with children: \_\_\_\_\_

Health Information (allergies etc.): \_\_\_\_\_

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Please provide details of two people that we may contact for references regarding character and work experience:

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

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

Position: \_\_\_\_\_

Position: \_\_\_\_\_

Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

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

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

Please check the following if you have:

Participated in the BZS Junior Volunteer Programme

Dates: \_\_\_\_\_

Attended Lecture Series (one or more)

Dates: \_\_\_\_\_

Participated in BAMZ/BZS Internship Programme

Dates: \_\_\_\_\_

Worked/volunteered at BUEI

Dates: \_\_\_\_\_

Worked/volunteered at the BIOS

Dates: \_\_\_\_\_

Participated in Aqua Camp as a child

Dates: \_\_\_\_\_

Do you have a preference for the age group that you teach? YES      NO

If yes, please circle which age group(s) you would prefer to teach: **Angelfish** (going into P1); **Squirlfish** (completed P1 or P2); **Snappers** (completed P3 or P4); **Jacks** (completed P5 or P6); **Explorers** (completed M1 or M2), **Freediving** (both Primary and Middle School aged); **Conservationist** (Middle School 3 and Senior School 1)

Are you a strong swimmer and snorkeler? YES      NO

SCUBA qualification(s)? YES      NO

Details: \_\_\_\_\_ Date: \_\_\_\_\_

Details: \_\_\_\_\_ Date: \_\_\_\_\_

Life-saving? YES      NO

Details: \_\_\_\_\_ Date: \_\_\_\_\_

First Aid Certification? YES      NO



Details: \_\_\_\_\_ Date: \_\_\_\_\_

SCARS Training? YES    NO

Details: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this form to:**

**Education Administrator, Bermuda Zoological Society, P.O. Box FL 145, Flatts FL BX**  
**Telephone: 293-2727 ext. 2181 – email: [edadmin@bzs.bm](mailto:edadmin@bzs.bm)**