



SEATON HACKNEY STABLES SUMMER 2026 EQUESTRIAN CAMP

Counselor in Training (CIT) & Counselor Application Form

Seaton Hackney Stables / Equishare USA, LLC

440 South Street, Morristown, NJ 07960

Phone: 973.644.3355 Website: www.seatonhackney.com Email: Seatonhackneyinfo@gmail.com

Applications can be submitted in person in the office or emailed.

Applicant First & Last Name: _____ **Age on 6/1/2026:** _____

Phone #: _____ **Email Address:** _____

Physical Address: _____ **City:** _____ **State** _____ **Zip** _____

Current Riding Level: _____

Please give a few details regarding your riding discipline(s), show experience, badge knowledge, etc.:

Parent / Guardian Contact Information

Parent / Guardian Name: _____ **Cell #:** _____

Parent / Guardian Name: _____ **Cell #:** _____

Emergency Contact Name: _____ **Cell #:** _____

Health Insurance Carrier & Policy #: _____

How did you hear about *Seaton Hackney Equestrian Camp*?

What would you like us to know about you? Why would you make a good addition to our team?

BEFORE APPLICATION CAN BE ACCEPTED, IT MUST BE SIGNED BY PARENT AND/OR GUARDIAN OR BY UNDERSIGNED IF OVER 18 YEARS OLD

I hereby give my permission to my minor child - or myself if at least 18 years old - to Seaton Hackney Camp / Equishare USA, their staff and position holders, to transport the person named above off property for the purpose of medical care or program activities as deemed appropriate by the Camp Director. In the event I cannot be reached in an emergency, I give permission to the physician selected by the Camp Director to hospitalize, secure proper treatment, and to order injection, anesthetic or surgery for the person named above. I understand that Seaton Hackney Stables does not provide accident/medical insurance for the person named above. Medical bills, including prescription drugs, will be the responsibility of the parent or guardian or self - named below. Rules for campers, CITs, and Counselors are the same for everyone without regard to race, color, national origin, gender or disability. I understand that all persons will be treated as individuals and respect will be shown for a range of abilities and behaviors. I agree that Seaton Hackney Stables reserves the right to dismiss any CIT or Counselor from camp whose special needs they are not able to provide for or whose conduct is not in the best interest of the camp community, I will notify the Camp Director if I, or my child/ward, has any serious restrictions related to his/her participation in the camp program. **I am aware of the following policies regarding camp: In case of inclement weather, Seaton Hackney will substitute indoor activities of our choice for the Campers. Seaton Hackney Stables has my permission to use photographs taken of myself or my child while at camp for promotional purposes. I also understand that hiring preference is usually given to Seaton Hackney's regular riders, employees, and volunteers as a means of allowing them to help finance their own riding expenses. In case of a field trip or any outside work-related activity, I give my consent for my child/the applicant to be transported in Seaton Hackney vehicles by Seaton Hackney staff or associates. We or I (Parent/Guardian/self) have read, understood and agreed to all the conditions of this Application / Declaration of Intent.**

Signature of Parent/Guardian/Self

Print Name

_____/_____/_____
Date:

SEATON HACKNEY STABLES SUMMER 2026 EQUESTRIAN CAMP

Counselor/CIT Application Form / Declaration of Intent

Circle all that apply with a minimum of 2 consecutive weeks.

1. I am applying to work* for Summer Camp 2026 during the following week(s):

Week #	Dates	Select	Week #	Dates	Select	Week #	Dates	Select
1	June 15 - 19		5	July 13 - 17		9	August 10 - 14	
2	June 22 - 26		6	July 20 - 24		10	August 17 - 21	
3	June 29 - July 3		7	July 27 - 31		11	August 24 - 28	
4	July 6 - 10		8	August 3 - 7		12	August 31 - September 4	

2. I prefer to work with / at:

(Transportation to/from these Camps available. Above camps are within 20-25 minutes from SHS)

Level:	PEP		Regular		Intermediate		Advanced	
Location:	SHS		Jockey Hollow		Lake Rickabear		Harbor Hills	

3. I am planning to be a camper myself, during the following weeks:

June 15 - 19		July 6 - 10		July 27 - 31		August 17 - 21	
June 22 - 26		July 13 - 17		August 3 - 7		August 24 - 28	
June 29 - July 3		July 20 - 24		August 10 - 14		August 31 - September 4	

4. I worked an earlier summer camp in 20____ at _____ as a: _____ and was paid \$_____ per week

SALARY INFORMATION

Type	Age	Salary		Type	Age	Salary	
Counselor in Training	13-15yo	\$100 cash per week + \$H\$ Barn Bucks		Team Leader	21yo+	\$400 per week	
Junior Counselor	16-19yo	\$280 per week		Riding Instructor	21yo+	\$450 per week	
Senior Counselor	20yo+	\$375 per week		Site Director	21yo+	\$500 per week	

***Salaries are based on age as of 6/1/26, working a full day of camp (8:30am - 5:30pm), five days per week, Monday through Friday. **Shorter weeks are pro-rated accordingly.**

PLEASE MAKE OUR CAMP DIRECTOR AWARE OF ANY MEDICAL CONDITION

ONCE HIRED, A HEALTH FORM MUST BE COMPLETED AND FORWARDED TO SEATON HACKNEY STABLES AT LEAST TWO MONTHS PRIOR TO THE START OF EMPLOYMENT. NOTE THAT WE BACKGROUND CHECK OUR APPLICANTS.