

2016 CIT APPLICATION

(Counselor In Training Program)

This program is designed for the full 7 week camp season.

An interview with the CIT Director will be arranged before enrollment can be finalized. Interviews will be held through the end of May.

Space is limited.

RETURN TO:

JCC Day Camps
360 Amity Road
Woodbridge, CT 06525
Or E-mail to summercamp@jccnh.org









jccnh.org

Phone: 203-387-2522 Fax: 203-387-1818

ABOUT THE CIT PROGRAM...

Teens must be at least 14* years of age; the program is limited to 15 campers per season. This program gives teens the opportunity to work with young children, and in all areas of camp as a counselor and staff assistant, learning responsibility while they broaden their interpersonal skills and knowledge.

In addition, CITs receive JCC transportation, have one or two optional overnight programs designed especially for them (and their peers) and receive hands-on leadership training from camping professionals. Participating in this program will help teens build character and responsibility.

When the CIT application is completed and returned an interview will be arranged with the CIT Director. All candidates will be notified of CIT status by the middle of May. Any questions regarding this program or any JCC Day Camp programs please call our Camp Director, Debra Kirschner, at 387-2522, extension 253.

*Please note: 14 year old CITs cannot be hired by the JCC as a camp counselor until they reach their 16th birthday.

Camper Name □Male □ Female					
Address					
City		_ State	Zip		Phone
Campers Email Address (if a	vailable)				
Birth Date	Ag	e as of 6/16	<i>G</i> r	rade as of	9/16
T-Shirt Size - Adult 🚨 S	□M		XL		
Camper Lives With: Both F	arents	Mother	Father	Other	
Parent/Guardian			Workp	olace	
Phone		Email Add	lress		
Parent/Guardian			Work	place	
Phone	_	Email Add	lress		
Emergency Contact Name (C	Other the	an Parent)			
Relationship			Phone	2	
Full Season (7 weeks) June *Exceptions may be consider Non-JCC members will be ch membership (includes use of the JCC year-round.	: 27-Aug red; call narged ar	gust 12, 20 Debra 203- n additional :	16: \$795 . 387-2522 x \$250 or the	.00 253. ey may take	
7 Weeks @ \$795	\$				
Nonmember Fee \$250	\$				
networking sites (Facebook, Flicker number to be distributed to camp f or for children sent home due to di	transporta trips or exitaken during ty YouTube amilies. I sciplinary of rom any cloprogram.	tion policies. I cursions away fing the camp day and/or publica understand the or adjustment paims, loss and l	will give my per from the facility, to be used by ations. I give p at there will be problems. I her iability relating	rmission for n y under prope y the JCC for ermission for a no fee reduc reby release c g to injury, illi	ny child to take part in all camp er supervision. I will give my publicity and web advertising, socia my child's address and phone ction or reimbursement for absences and hold harmless the JCC, its ness and death to my child which ma
Parent/Guardian Signature				D	Date

Camp Experiences:	
Camp Name	Years <u>Attended</u>
What are your interests and hobbies?	
Why do you want to be a CIT?	
What experience do you have working with children?	
What experience do you have working with children's	
What age group/gender would you like to work with?	
List three references (not related)	
<u>Name</u>	<u>Phone</u>
Applicant's Signature	Date