

C.I.T. (COUNSELOR IN TRAINING) 2010 APPLICATION

NAME _____ HOME TEL# _____

ADDRESS _____ CITY/STATE _____

AGE _____ DATE OF BIRTH _____ GRADE NEXT FALL _____

ANY PREVIOUS CAMP EXPERIENCE? _____

ARE YOU A MEMBER OF CEDARDALE? _____

As Cedardale is begins our 21st summer at the Cedardale facility, we are continuing to work to improve our C.I.T. program. This year all C.I.T.'s will have the opportunity to assist with the campers as will as participate in some of the instructional activities. In order to have a very positive experience for the campers and the C.I.T.'s there is a FOUR WEEK commitment to the C.I.T. program. New C.I.T.'s will have a tuition fee which is half the price of the four week full day campers. Those C.I.T.'s wishing to return would be invited back by the camp director, and would not pay any tuition.

SESSIONS:

PLEASE CHECK THE FOUR WEEK SESSION THAT YOU WISH TO BE A C.I.T.

_____ FIRST FOUR WEEKS JUNE 28-JULY 23

_____ SECOND FOUR WEEKS JULY 26 -AUG 20

PRICE:

TUITION FOR PRE-SCHOOL C.I.T. (AGES 13-15) \$340.00

TUITION FOR FULL-DAY C.I.T. (AGES 14-15) \$595.00

GENERAL INFORMATION:

All C.I.T.'s are hired at the director's discretion. Selected candidates will be contacted by phone, and interviews may be arranged. All C.I.T.'s, campers and staff are required by the Board of Health Department to complete a Health examination form prior to their first day of camp. Health Forms will be distributed to the C.I.T. applicants once tuition is paid.

AGE GROUP PREFERENCE: _____ 4-5 _____ 6-7 _____ 8 and over

PLEASE LIST AREAS OF INTEREST/EXPERIENCE:

_____ swimming _____ arts 'n crafts _____ tennis _____ raquetball _____ softball/baseball

_____ music/drama _____ nature _____ dance _____ soccer _____ other

Please list any extracurricular activities you participate in: _____

Please list any experience you may have with babysitting children: _____
