



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA CAMP LAKEWOOD
13528 State Highway AA, Potosi, MO 63664
Phone: 573-438-2155
Fax: 573-438-3913
www.camplakewood.org

2021 CIT APPLICATION

YMCA CAMP LAKEWOOD

Deadline: April 26, 2021

Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Home #: (_____) _____ Cell #: (_____) _____

Sex (*check one*): M F I have attended Camp Lakewood for _____ years.

School attending in 2020-2021 _____

Email: _____

PARENT/GUARDIAN INFORMATION

1st Parent/Guardian's Name: _____ Relationship: _____

Home #: (_____) _____ Work #: (_____) _____ Cell #: (_____) _____

Email: _____

2nd Parent/Guardian's Name: _____ Relationship: _____

Home #: (_____) _____ Work #: (_____) _____ Cell #: (_____) _____

Email: _____

With whom does this child reside: _____

SESSION DATES

CIT is a 4-week program.

___ June 6 - July 3 (*Camp sessions 2-5*)

ESSAY

Please type an essay expressing why you want to be a CIT, and why we should choose you. In your essay, make sure to answer the following questions in detail using correct grammar, punctuation, etc.:

- **Why do you want to be a CIT?**
- **What do you think it requires to be a CIT?**
- **What qualities do you have that would make you an asset to the CIT program?**
- **What talents, special interests or skills do you have to offer camp?** (Activity instruction, artistic, musical talents, etc.)
- **What skills do you hope to gain from our CIT program?**
- **Describe a time when you worked as part of a group/team and describe your role in that group/team.**
- **What will you find challenging as a CIT, and how will you handle those challenges?**

REFERENCES

Give out the attached Reference Form to two professional and one social contact. Employers, teachers, coaches, etc. are acceptable as professional references; and a parent, grandparent, aunt, uncle, longtime family friend are acceptable as your social contact. Your references must mail, e-mail or fax their form directly to camp. We CANNOT complete the interview process until ALL references have been turned in, as well as your essay and application.

UNDERAGE RELEASE FORM

(To be completed by a Parent or Guardian)

My child _____ (name) who is under 18 until _____ (date of birth) and under the guardianship of the Program Director while at camp, has my permission to:

(Check one)

Leave Camp with the CIT counselors to go to town

Can only leave camp with me

(Check one)

Without contacting me before they leave camp

Must contact me before they leave camp

Must contact me before they leave camp and I want to talk to the Program Director

Applicant's signature: _____ Date: _____

Parent's signature: _____ Date: _____

I, *(applicant's name)* _____, attest that the information provided in this application is accurate to the best of my knowledge and I have not willfully left out any information which could affect a decision to accept me. I want to be a part of the CIT program for no other reason(s) than described above. If accepted to the program, I will perform the duties assigned to me willingly, cheerfully and to the best of my ability, to protect and enhance the good reputation of YMCA Camp Lakewood and the Gateway Region YMCA. Please return this completed form with essay (deadline: April 26, 2021) to:

By Mail

YMCA Camp Lakewood
13528 State Highway AA
Potosi, MO 63664

By Fax

Attn: Camp Lakewood office
573-438-3913

By E-Mail

camplakewoodi@gwrymca.org

For questions please call 573-438-2155