

References

Instructions: List the name, complete address and home or work phone number of three individuals who can provide testimony regarding your character. Coaches, teachers, people you have baby-sat for, supervisors of you when you volunteered for a project, etc. are all good sources. Please do not list relatives. Enclosed are three reference forms. You must give one to each reference and request that they complete the form and mail it to Camp Mohawk. It is appropriate for you to provide them with a stamped envelope that you have addressed to Camp Mohawk.

Mohawk staff completes random verification of references.

1. Name of Reference _____ Phone Number _____
Address _____

2. Name of Reference _____ Phone Number _____
Address _____

3. Name of Reference _____ Phone Number _____
Address _____

Camp Activity Skills Inventory

CIT's assist in teaching a variety of activities. Put a "1" next to those activities in which you are accomplished; a "2" next to those activities in which you have some experience; a "3" next to those activities in which you may not have experience, but have interest in learning more about.

___ Basketball	___ Group Games	___ Kayaking	___ Farm
___ Soccer	___ Animal Life	___ Ropes	___ Dramatics
___ Softball	___ Ecology	___ Painting	___ Chorus
___ Volleyball	___ Gardening	___ Ceramics	___ Journalism
___ Aerobics	___ Swimming	___ Crafts	___ Campcraft
___ Tennis	___ Rowing	___ Archery	___ Yoga
___ Field Hockey	___ Canoeing	___ Photography	___ Dance
___ Lacrosse	___ Sailing	___ Photo Developing	___ Cheerleading
___ Floor Exercise	___ Windsurfing	___ Horseback Riding	___ Badminton

List other camp related skills: _____

Other skills and knowledge which you can share with our campers: _____

I have read and understand the explanation of the CIT Program and would like to apply for a CIT position at YMCA Camp Mohawk. I agree to observe the rules of behavior for CIT's and am willing to accept leadership responsibilities as assigned in consideration of the special rates granted me. Enclosed is my \$200.00 deposit, which I understand is fully refundable if I am not accepted into the CIT program.

Applicant Signature

date

Parent/Guardian Signature

date

Please return your application to: YMCA Camp Mohawk
PO Box 1209
Litchfield, CT 06759

or FAX to: 860-482-3878