

2010 C.I.T. APPLICATION

Thank you for your interest in the CIT program at Mountain Camp!

This form **must** be returned along with a 2010 Online Camper Application

(CIT campers will not be enrolled in camp until this application is received and accepted)

1. If you have attended a camp (day or resident):
What is your best memory as a camper? Why was this significant?

2. List **three** accomplishments that you are most proud of and describe why.

3. The CIT program involves learning to work with younger campers and what it means to be a good role model.
How do you want younger campers to remember you?

4. What is your main reason for wanting to participate in the Mountain Camp CIT program?

Please list 2 references who know you well for us to contact. Please include their name, phone number and how you know them. Please choose references who are not family members.

Applicant's Signature _____ **Date** _____

After submitting this form you will be contacted by Mountain Camp to advise you of acceptance into the CIT program.

Please fax this form to 415-351-3939, or mail to our office:

Mountain Camp
3717 Buchanan Street, Suite 300
San Francisco, CA 94123

Thank you for your application.