

2018 CAMP HINDS CIT (Counselor in Training) APPLICATION

Name _____

Address _____

City _____ State _____ Zip _____

Tel _____ E-Mail _____

Eagle Scout? _____ Leadership Position _____

Council _____ Unit _____ Rank _____

Will you be 14 by July 1, 2018 _____ Date of Birth _____

Reference:

Scoutmaster _____ SM Phone _____

Scoutmaster E-Mail _____

Camping Experience Boy Scout

Summer Camp as Camper # of years _____ Where _____

Winter Camp as Camper # of years _____ Where _____

NYLT # of years _____ Where _____

Counselor in Training # of years _____ Where _____

Summer Camp Staff # of years _____ Where _____

Winter Camp Staff # of years _____ Where _____

Jamboree/NOAC/High Adventure # of years _____ Where _____

Select session preference:

_____ Session 1(July 8nd- July 27th)

_____ Session 2 (July 29st- August 17th)

State why you would like to be in the CIT program:

List outdoor activity experience

List leadership experiences

Applicant Signature _____

Date _____

Parent Name _____

Parent Signature _____

Date _____

Return applications to:

Pine Tree Council,
C/O Jack Waite, Camp Hinds Director
146 Plains Road,
Raymond, ME 04071

Cell: 207-894-4011 Fax: 207-655-6282 Email: jackwaitejr@scouting.org