

Counsellor-In-Training (CIT) Application Form



Name: _____
Address: _____ City: _____
Postal Code: _____ DOB (mm/dd/yy): _____
Preferred Contact Number: _____ (please circle) Home Cell
Alternate Contact Number: _____ (please circle) Home Cell
Email (**required**): _____
Current School: _____ Grade: _____

Why do you want to be a CIT with our camps?

List any volunteer or work experience (please indicate where and type of work):

What experience do you have working with children or animals?

What are your skills or hobbies?

List any past camp experiences (which camps and for how many years):

Which dates are you available to volunteer? Please look on our websites for all PD Day and other camp dates

****Please send filled-out application by email to kathleen.mccaughey@awasco.ca***