

Camp Clear Lake CIT Program Application

Name: _____ DOB: _____

Address: _____

Telephone Number: _____

Email Address: _____

Previous employment/volunteer experience:

Organization: _____

Dates: _____

Responsibilities:

Organization: _____

Dates: _____

Responsibilities:

Hobbies/Interests:

Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____