



Pocono Family YMCA  
Counselor in Training (CIT) Program  
Summer 2011

Dear Prospective CIT,

We invite you to consider becoming a Counselor in Training (CIT) at the Pocono Family YMCA for the summer of 2011. The CIT Program is for students in 7<sup>th</sup> through 10<sup>th</sup> grade who are looking for a fun filled summer learning to be a leader. This program runs in 2 week sessions throughout our camp season. CITs will work closely with the camp staff to learn the skills necessary to grow as young leaders, they train and help plan and implement age specific camp activities.

The CIT Program provides you with leadership opportunities as you assist the counselors at our Hidden Lake Camp. As a CIT you are neither a Hidden Lake camper nor a staff member, but someplace in between. Sometimes it's tiring and frustrating and sometimes it seems you have no time for yourself. However, there is nothing to compare with the feeling you get from knowing you helped generate a special camp spirit. You will be a part of what makes Camp a great place to be.

This program demands a commitment from you. You will be under the guidance of the camp staff and will be assigned to a staff counselor for a period of two weeks. You will be there to help with different activities each week. You will participate in our outdoor activities, our trips, and all parts of camp. There will also be special activities just for our CITs. CIT's will participate in meetings and discussions with camp staff.

CIT's are still campers, but will be allowed certain privileges, along with their responsibilities, that will be determined by the camp director. CIT's are expected to regulate their personal behavior by the common sense rules of good health, CIT rules, and camp rules.

If you want to be considered for the CIT Program please fill out the enclosed application. Give three adults who know you well the reference forms and return the application as soon as possible. They will be processed on a first come, first serve basis.

We hope to see you at Camp!

Sue Scarborough  
Senior Program Director



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

Pocono Family YMCA  
Counselor in Training (CIT) Program  
Summer 2011

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Age: \_\_\_\_\_ Grade complete 6/11 \_\_\_\_\_ Sex: M F

Parent/Guardian Information

Last name \_\_\_\_\_ First Name \_\_\_\_\_

Relationship to Camper \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Occupation \_\_\_\_\_

Last name \_\_\_\_\_ First Name \_\_\_\_\_

Relationship to Camper \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Occupation \_\_\_\_\_

**Emergency Contact (If the Parent/Guardian cannot be reached, we will contact the person listed below. This person must be at least 18 years of age and available to come when called.)**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

Cell phone \_\_\_\_\_



**Pocono Family YMCA**  
**CIT Reference Questionnaire**  
**Summer 2011**

[www.poconoymca.org](http://www.poconoymca.org)

Applicant \_\_\_\_\_

This person has given your name as a reference who could evaluate his/past performance as well as potential for succeeding as a CIT (counselor in training). Please give careful consideration to the questions below. Your prompt attention to this questionnaire is much appreciated since we are unable to consider this applicant until we have received the required references. Should you prefer to contact us directly, please feel free to do so.

The Pocono Family YMCA is seeking the most committed, and capable of applicants. The CIT applicant will be working with camp staff and children in grades kindergarten through 6<sup>th</sup> at our summer camp. Many of the activities will be outdoors. Please provide an accurate description of the applicant's character and skills. Thank you for your time.

1. Is the applicant able to direct and influence others along definitive lines of action? Yes\_\_\_\_ No\_\_\_\_

Comments:

2. Does the applicant work well as a member of a group? Yes\_\_\_\_ No\_\_\_\_

Comments:

3. Does the applicant accept suggestions or criticisms by others well? Yes\_\_\_\_ No\_\_\_\_

Comments:

4. Is the applicant able to competently complete projects on their own? Yes\_\_\_\_ No\_\_\_\_

Comments:

5. Is the applicant able to control his/her emotions? Yes\_\_\_\_ No\_\_\_\_

Comments:

6. In what capacity have you know this individual and for how long?

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7. Would you be willing to have your children under this individual's leadership during a camp session?

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8. Do you have any reservations about this person's character or ability to work successfully with children and fellow staff?

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May we call you for further information if necessary? Yes\_\_\_\_\_ No\_\_\_\_\_

The Pocono Family YMCA and Hidden Lake Camp staffs greatly appreciate your time and assistance.

Name\_\_\_\_\_ Date\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_ State\_\_\_\_\_ Zip\_\_\_\_\_

Phone number\_\_\_\_\_

Please return form to : Hidden Lake Camp- CIT Program  
Pocono Family YMCA  
809 Main Street  
Stroudsburg, PA 18360  
(570) 421-2525

**Pocono Family YMCA  
CIT Registration Form  
Summer 2011**

www.poconoymca.org

**CIT Camper Information** (please print)

Last Name \_\_\_\_\_ First Name \_\_\_\_\_  male  female

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Age at Camp \_\_\_\_\_ Grade completed in June 2011 \_\_\_\_\_

Camper's Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home phone \_\_\_\_\_

Family email \_\_\_\_\_ Tshirt size Youth: small, medium, large  
Adult: small, medium, large, XL

**CIT SESSION DATES AND RATES FOR SUMMER 2011  
PLEASE CHECK ALL SESSIONS CHILD WILL BE ATTENDING**

Session	DATES	CAMP	TOTAL DUE
___ 1	6/13-6/24	\$200.00	\$ _____
___ 2	6/27 -7/8	\$200.00	\$ _____
___ 3	7/11-7/22	\$200.00	\$ _____
___ 4	7/25-8/5	\$200.00	\$ _____
___ 5	8/8-8/19	\$200.00	\$ _____

\_\_\_ Teen Summer Camp Membership (June 1-August 31, 2011) \$45.00 \$ \_\_\_\_\_ \*\*

Individual Registration Fee \$30.00 \$ \_\_\_\_\_ \*\*

**\*\*Must be paid at time of registration**

**Deposit and Tuition**

- Registration and membership fees must be paid at time of registration.
- Session payments are due the Monday of the week before your child will be a CIT. If payment is not made by this date the CIT's spot will be given to the next person on the waiting list.
- Methods of payment accepted: cash, check, MasterCard, Visa, American Express, or Discover.

**Cancellation and Refund Policy**

- Registration and membership fees are NON REFUNDABLE unless written request is accompanied by a doctor's note.
- No refunds will be given for days missed or early departures.
- No refunds will be given for voluntary withdrawal or disciplinary dismissals.

**Parental Consent**

I, the parent/guardian of the above stated, hereby give my approval to participate in any camp activities, including transportation to and from activities. I hereby waive, release, absolve, indemnify and agree to hold harmless the Pocono Family YMCA and employees from any claim rising out of injury to my child. I have read, understood and agree with this in its entirety. **I authorize the use of the above name child's photographic or video image in YMCA materials.**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_