



SportsCamp 2010

SportsCamp - Counselor in Training Application

NAME _____
(LAST) (FIRST) (M.I.)

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

SSN: _____ Date of birth: _____ E-Mail: _____
Month/day/year Print Clearly

Name of School: _____ Name of Parish: _____

Requirements:

The candidate for the Counselor in Training Program must:

He/she must at least 16 years of age.

He/she must have at least 2 seasons of prior experience as a camper.

Date(s) Previously Attended **SportsCamp**: _____

Preferred Week: Basketball (July 5-9) _____ Soccer (July 11-15) _____ Both (July 5-15) _____

References (3)...Please include the names and addresses of people who are familiar with your ability to work with other teens and adults (other than your pastor).

| NAME | ADDRESS | PHONE | POSITION |
|------|---------|-------|----------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |

SIGNATURE: _____ DATE: _____

Applicants are required to submit the following with this application:

1. Letter of recommendation from their pastor stating the applicant's participation in Church.
2. A letter of intent stating why the candidate wishes to be a Counselor in Training. Please include in this letter your hopes and expectations as well as how you can contribute to the camp experience as a whole.

Please return completed application, letter of intent and recommendation letter from your pastor by June 1, 2010 to:

Deacon Brian T. Dwyer
Office of Youth Ministry
PO Box 369
Ogdensburg, NY 13669