



This form is to be filled out by the parent/guardian.

TCJPR Youth Enrichment Programs

2020 C.I.T. Camp Jackson—Request Form

Child's First Name _____		Last Name _____		
Birthdate _____	Age _____	Grade in School (Fall 2020) _____	Sex	M / F
Parent/s Name/s _____				
Mailing Address _____				
P.O. Box or Street		City	State	Zip
Best Phone # _____		Alternative Phone # _____		
E-Mail _____				

Applications

Applications will be accepted March 23-April 17, 2020. Applications and all other forms will be accepted in person at the Recreation Center, 155 E Gill St. or by mail to TCJPR, Attn: Camp Jackson, PO Box 811, Jackson, WY 83001.

Applications will NOT be accepted via fax.

Forms turned in after April 20th 2019 will not be accepted. Saturday, May 2nd CIT applicants will be interviewed at Teton County/Jackson Parks and Rec, 155 E. Gill.

Please remember this is a competitive program and is to be treated professionally.

Forms required for Camp Jacksons CIT program include the 2020 C.I.T. Application, *2020 C.I.T. Camp Jackson Request Form*, *2020 Child Information Form*, and a *reference letter from a TCSD teacher*; if applicable also submit the *Medication Authorization form*.

Fees—\$15 per day

You will be contacted for payment after May 15th if your child has been accepted. 50% of your payment is due at time of registration, remaining 50% due by May 22, 2020 . Remaining balances not paid by May 22, 2020 will be processed May 26, 2020 with credit card on this form or on file with the department.

Failure to pay remaining balance could result in loss of position in program.

Schedules

You are not guaranteed days. You will be emailed by May 15th if your child has been accepted into Camp Jackson's CIT program.

Cancellations

Cancellations made after May 22, 2020 are subject to the following policy: Cancellations will be refunded only if another CIT can fill the opening.

Training

If your child has been selected as a 2020 Camp Jackson CIT they will be required to attend a CIT training night.

I have read and understand the Camp Jackson Policies and Procedures and the Registration, Payments, Changes, and Cancellation Policies.

Signature: _____

Date: _____

Please "X" out on the calendar below, the dates that your child would be unavailable as a CIT at Camp Jackson.

June 2019

Mon	Tue	Wed	Thu	Fri
15	16	17	18	19
22	23	24	25	26
29	30			

July 2019

Mon	Tue	Wed	Thu	Fri
		1	2	3 No Camp
6	7	8	9	10
13	14	15	16	17
20	21	22	23	24
27	28	29	30	31 No Camp

August 2018

Mon	Tue	Wed	Thu	Fri
3	4	5	6	
10	11	12	13	14
17	18	19	20	21

Camp Jackson CIT Program operates from
9:00a.m. to 5:00p.m.

Participants are to show up between
9:00-9:30am.

Pick up is between 4:30-5:00pm

T Shirt Size YM YL AS AM

Acknowledgement

- ⇒ I have read and understand all of the registration information and agree to abide by the rules and regulations set forth in this document.
- ⇒ I understand this is a competitive program and nothing guarantees my child will be accepted.
- ⇒ I have turned in all appropriate forms (2020 request form; 2020 child info form; CIT application; a letter of reference; acknowledgement of CIT manual) and understand incomplete or missing forms will not be accepted or move forward in the selection process.
- ⇒ I have read and understand the payment agreement.

Name _____

Signature _____ Date _____