

Camp LuWiSoMo 2024 CIT Application

First Name	Last			GenderMF
Preferred Name	Birth Date		_ Current Grade	
		(MM / DD / YYYY)		(2023-2024 School Year)
Address				
City	State	Zip Code		
Phone	(Home Mobile)	Email		
School You Attend	· · · · · · · · · · · · · · · · · · ·		City / State	
Church Where You Are A Mem	iber			····
City / State	Denomina	ation		
Have you been a camper at Lu	WiSoMo? ☐ Yes ☐ No	If so, which summ	iers?	
Have you been a camper at an	other camp? ☐ Yes ☐ N	o If so, where? _		
What's the story or your relation	nship with Jesus Christ? H	low has God been v	working in your life?	
	_			
List and describe any experience	ces you've had working wi	th children / youth		

List and describe any experiences you've had leading / helping with ministry				
What 5 words best describe you?				
Desired Service (Indicate your first choice with "1" and second choice with "2") Youth Camp Joyful Hearts Camp				
Check each in which you have experience. Circle those in which you have a strong interest. Cross our any in which you are unwilling to participate				
□ Leading Singing □ Leading Devotions □ Leading Skits □ Arts & Crafts □ Story Telling □ Leading Games				
 □ Puppetry □ Archery □ Swimming □ Canoeing □ Field Sports □ Starting a Campfire □ Nature Hikes □ Playing Guitar □ Playing Piano □ Playing Other Instruments 				
□ Flaying Guitar □ Flaying Flano □ Flaying Other Instruments				
Are you certified (current through this summer) for: ☐ Lifeguard ☐ CPR ☐ First Aid				
Why do you hope to be Camp LuWiSoMo CIT?				

What goals do you have	e for your experience as a CIT at Cam	np LuWiSoMo?	
Availability April 26-28 (Training) June 16-21 June 23-28 July 14-19 July 19-21 July 21-26 July 28-August 2 August 4-9	 □ Available □ Available □ Available □ Unavailable □ Unavailable □ Unavailable 		
Additional Informa	ation leted application form, we also need t	he following:	
Your deSomeonSome onAnythin	least a few paragraphs, but no longer finition of a servant leader ne in your life you would consider a set your your strengths that you feel wo g else you want us to know about you want want want want want want want want	ervant leader and why old make you a good fit serving a sum of the serving and	at Camp LuWiSoMo
Your signature verifies weekend April 26-28, 2	hat you have completed this applicati 024. Your parent or guardian's signat	ion, all information is true, and yo ture indicates their permission fo	ou are able to attend CIT Training r you to participate in this program.
Signature of Applicant		Date	
Signature of Parent or	☐ Guardian for Participant	 Date	
Printed Name of ☐ Parent	or ☐ Guardian for Participant		