



# TCJPR Youth Enrichment Programs

## 2019 C.I.T. Camp Jackson—Request Form

Child's First Name _____		Last Name _____	
Birthdate _____	Age _____	Grade in School (Fall 2019) _____	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 April 17—May 5 2019.** 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 May 5th 2019 will not be accepted. CIT applicants will be contacted for an interview 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 2019 C.I.T. Application, *2019 C.I.T. Camp Jackson Request Form*, *2019 Child Information Form* and *2019 Teton Co/Jackson Parks and Recreation Waiver of Liability*; if applicable also submit the *Medication Authorization form*.

### Schedules

**You are not guaranteed days.** You will be emailed by May 20th if your child has been accepted in to Camp Jackson's CIT program. You will be contacted for payment after May 20th if your child has been accepted. 50% of your payment is due at time of registration, remaining 50% due by June 7, 2019 . Remaining balances not paid by June 7, 2019 will be processed June 8, 2019 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.

### Cancellations

Cancellations made after June 7, 2019 are subject to the following policy: Cancellations will be refunded only if another CIT can fill the opening.

**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
17	18	19	20	21
24	25	26	27	28

### July 2019

Mon	Tue	Wed	Thu	Fri
1	2	3	4 NO CAMP	5 NO CAMP
8	9	10	11	12
15	16	17	18	19
22	23	24	25	26
29	30	31		

Camp Jackson CIT Program operates from  
9:00a.m. to 5:30p.m.

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

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

### August 2018

Mon	Tue	Wed	Thu	Fri
			1	2 NO CAMP
5	6	7	8	9
12	13	14	15	16
19	20	21	22	23

T Shirt Size    YM    YL    AS    AM

\_\_\_\_\_

#### Payments

- Payment in Full**

Credit Card Type:    MC    Visa    AMEX    Discover    Check # \_\_\_\_\_  
 Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code: \_\_\_\_\_  
 Name as it appears on card \_\_\_\_\_

- Payment Plan** — Credit card must be on file if you are paying with a payment plan.

50% Due at registration and remaining balance is due by May 24, 2019

Amount to pay at Registration \$ \_\_\_\_\_ Date \_\_\_\_\_ Amount Due by May 24, 2019 \$ \_\_\_\_\_  
 Credit Card Type    MC    Visa    AMEX    Discover

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code: \_\_\_\_\_

Name as it appears on card \_\_\_\_\_

\_\_\_\_\_

#### 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.

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_