



CIT Camp Fish and Game Application



Please complete this application. *One application PER CIT.*

* **Please sign** in the **THREE** locations where it asks for your signature. You will see this sign wherever a signature is required:



*Please **staple together** and **MAIL** completed application, to:

Chatham Fish and Game Protective Association

ATTN: SLOANE LIPSON

RE: CAMP FISH & GAME CIT

41 Fairmount Avenue | Chatham, NJ. 07928

*Please include your **\$30 application Fee with your application**. Your check should be made out to Chatham Fish & Game Protective Association. Please write "CIT" in the Memo Line.

General Information (PLEASE PRINT)

CIT's Name:

CIT's Gender:

CIT's Age as of June 1, 2018:

CIT's Grade in Fall 2018:

CIT's T-shirt Size:

Member of Fish & Game (y/n):

Sessions you would ideally like to volunteer for:

Have you been a CIT before? If YES, for how many summers?

Parents'/Legal Guardians' Names:

Home Address:

Home Phone Number:

Cell Phone Number(s) (both parent's & CIT's)

Parent's E-mail(s) & CIT's Email:
(for all important camp communication)

Emergency Contact Name(s) & Number(s) if parents cannot be reached:

CONTINUED CIT Application
Medical Information (PLEASE PRINT)

CIT's Name:

Does your child have allergies?
If YES, please list them here:
(attach extra documents if necessary) .

Does your child have a labeled
EPI-PEN that you will be
bringing to the camp? For what
allergy is the EPI-PEN used for?

Does your child have asthma? If
YES, does your child have a
labeled INHALER that you will
be bringing to the camp?

Please list any other pertinent
medical/health information we
need to know about your child.

Parent's/Legal Guardian's
signature



Parent's/Legal Guardian's name
(please print)

Date

CONTINUED CIT Application

Release Forms

CIT'S NAME:

I agree that neither Chatham Fish and Game Protective Association, nor any of the employees, independent contractors, directors, counselors, and/or Board Members of Chatham Fish and Game Protective Association will be held liable for any injury which may occur to my child (Write Child's name)

_____ while attending Camp Fish and Game at the Chatham Fish and Game Protective Association Club. This includes, but is not limited to, any injury as a result of the activities in which he/she may participate in, sports, swimming, tennis, arts & crafts, cooking, baking, water balloons, science experiments, dancing, etc. I hereby release Chatham Fish and Game Protective Association together with their respective interns, independent contractors, directors, counselors and/or Board Members from any and all legal or financial claims.

Parent's/Legal Guardian's
signature



Parent's/Legal Guardian's name
(please print)

Date

I agree to release images of my child, at camp, for future marketing purposes only: including, but not limited to advertisements, Facebook, Twitter, Instagram, website, flyers, posters. (Last names of campers and/or CITs are never used) _____ Yes _____ No

Parent's/Legal Guardian's
signature



Parent's/Legal Guardian's name
(please print)

Date

Please make sure your \$30 application fee is included with your application.

For more information about Camp Fish & Game, or Chatham Fish & Game Swim and Racquet Club,
visit: www.fishngame.org

Like us on FACEBOOK! @campfishandgame

Follow us on Instagram! @campfishngame

Questions?? E-mail SUMMERCAMP@FISHNGAME.ORG

WE CAN'T WAIT TO SEE YOU AT CAMP FISH AND GAME THIS SUMMER!