



## Counselor in Training Application

Complete this form and Email it to: [Frank.Marion@scouting.org](mailto:Frank.Marion@scouting.org)

Or Mail to: Greater Tampa Bay Area Council, BSA ATTN: Camp Director,  
13228 North Central Ave, Tampa, FL 33612

**I will be 14 or 15 years old and wish to attend as a Counselor-in-Training for:**

**Webelos Resident Camp June 30- July 3**

**Summer Camp Express - July 5-8**

Scout's Name:

Date of birth:

Address:

City:

State:

Zip:

Parent's home number :{    }    -

Alternate phone number :{        }    -

Troop #                      Scoutmaster's name:

A participant in the Counselor-in-Training program **MUST** provide a current BSA Health and Medical Record and a "Permission to Leave Camp" form at check-in. On the back side of this form, please explain why you would like to be considered for the Counselor-in-Training program. List your short-term and long-term camping experience as well.

Applicant's Signature:

Scoutmaster's Signature:

Parent's Signature: