



2024 LEADERSHIP CAMP APPLICATION

TO ALL 2024 LEADERSHIP CAMP APPLICANTS:

**** This application is to be filled out in its entirety by the prospective camper. ****

Age of Campers at Leadership Camp:	14-17 Years Old
2024 Dates of Leadership Camp:	Tuesday, June 18 – Friday, June 28
2024 Tuition for Leadership Camp:	\$1,500
Mail your completed application to:	ATIS – Leadership Camp P.O. Box 565 Keene Valley, NY 12943
Application Deadline:	The initial deadline for applications is December 1, 2023.
Tuition Due:	April 1, 2024

We will notify all applicants of their status as soon as possible after December 1, 2023. If camp is full, subsequent applications received will be added to the waiting list in the order in which they are received.

Submission of an application is considered a good faith intention to attend the camp and we do not require a deposit. Once accepted, please advise us as soon as possible if your plans have changed so that we can notify people on the waiting list.

Please note that ATIS is committed to diversity, equity, and inclusion and works to make its programs accessible to all. If the cost of Leadership Camp is not within your family's budget, please indicate so by checking this box: . Your confidentiality will be ensured. If your child is selected for camp via the criteria outlined above, Ben Runyon will contact you to discuss tuition assistance.

If you have any questions, please contact Ben Runyon or Sam Hoar:

Ben Runyon, Executive Director
518-946-7322 / atis@atistrail.org

Sam Hoar, Junior Program Director

LEADERSHIP CAMP - APPLICANT INFORMATION

Camper's Full Name: _____

Camper's Preferred Name: _____

Camper's Gender: Male Female

Camper's Date of Birth: _____ / _____ / _____

Camper's Age as of June 20, 2024: _____

Grade/Year presently in school: _____

Address: Street: _____

City, State, Zip: _____

Phone: _____

Email: _____

Parent/Guardian 1 Name: _____

Phone: _____

Email: _____

Address: Street: _____

City, State, Zip: _____

Parent/Guardian 2 Name: _____

Phone: _____

Email: _____

Address: Check here if Parent/Guardian 2 address is the same as Parent/Guardian 1.

Street: _____

City, State, Zip: _____

Do you have any disabilities or restrictions? Yes No

If yes, please explain. Please include any psychological evaluations or medications regularly taken.

Please describe your extra-curricular interests and hobbies:

FIRST TIME APPLICANTS ONLY

How, or from whom, did you learn about Leadership Camp?

Please provide 2 references; these should be adults (and not your parents) who know you well and can speak to your character, abilities, and interests.

Reference 1 Name: _____

Relationship to You: _____

Phone: _____ Email: _____

Reference 1 Name: _____

Relationship to You: _____

Phone: _____ Email: _____
