

CAMP MOE
2019 LETTER TO COUNSELOR
Due by June 1, 2019

Return Completed Form To:
Camp MOE
314 Main Street
Torrington, CT 06790
860-618-2800
Fax: 860-489-2492

Dear Counselor,

My name is _____.

My friends call me _____.

I describe myself as:
(circle those that are most like you and add any others)

Quiet Noisy Shy Outgoing Athletic Artistic Other _____

I am going to camp because _____

I hope to be able to do the following things at camp _____

The #1 thing you should know about me is _____

I hope to be with a counselor who is _____

I am afraid of _____

I describe my swimming ability as:

_____ I do not know how to swim.

_____ I am a beginner (shallow-end) swimmer.

_____ I am an intermediate (shallow end, sometimes deep end) swimmer.

_____ I am an advanced (deep end) swimmer.

Camper Signature _____