



TLC at Camp Keshet  
Application Supplement  
Summer 2019  
Young Israel of East Brunswick

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Camper's Cell Phone \_\_\_\_\_ Camper's E-mail Address: \_\_\_\_\_

Name of current School \_\_\_\_\_ Current Grade \_\_\_\_\_

Name of School Entering September 2019 \_\_\_\_\_ Grade Entering September 2019 \_\_\_\_\_

Are you receiving any special services? \_\_\_\_\_

Jewish education, if different from above \_\_\_\_\_

Please indicate your Hebrew language competency \_\_\_\_\_

Are you Bar or Bat Mitzvah?  Yes  No

Synagogue Affiliation \_\_\_\_\_ Rabbi \_\_\_\_\_

Prior Camp Experience

Name of Camp	Location	Camper or CIT
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other Related Experience

Work Experience \_\_\_\_\_

Leadership Experience (school, shul, etc.) \_\_\_\_\_

Chesed/Community Service Experience \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_