

**CAMP MOE**  
**2020 LETTER TO COUNSELOR**  
*Due by June 1, 2020*

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

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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 \_\_\_\_\_

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I hope to be able to do the following things at camp \_\_\_\_\_

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The #1 thing you should know about me is \_\_\_\_\_

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I hope to be with a counselor who is \_\_\_\_\_

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I am afraid of \_\_\_\_\_

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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 \_\_\_\_\_