

Operation Snowflake

Calling All Youth Ages 11—18

The Town of Cortlandt is seeking youth to shovel the driveways, pathways and sidewalks for the Town's Senior Citizens this winter season.

Download the application at:
www.townofcortlandt.com/yc



**Youth will be paid
\$8.00 per hour.**

Application Deadline is Tuesday, October 18th.

For more information contact Offutt at
914-736-0498 or offuttp@townofcortlandt.com.

Calling All Senior Citizens

If you are in need of this service or you know a Senior in need of this service have them call Becky Ferguson at the Muriel H. Morabito Senior Center 914-528-8377 for eligibility requirements.

Town of Cortlandt

OPERATION SNOWFLAKE



Student Snow Removal Application
Deadline: Tuesday, October 18, 2016

Ages 11 - 18

Student's Name: _____

House #: _____ Cell #: _____

Street Address: _____

Town: _____ State: NY Zip Code: _____

Date of Birth: ____/____/____ Age: _____ School Attending: _____

Do you have any health conditions which could hinder you from doing this task? Yes [] No []

Do you consider yourself physically fit and able to shovel snow? Yes [] No []

Please list one checkable reference (Adult, non-relative):

Name Phone #

Please check-off ALL the areas in the Town of Cortlandt you can travel to for shoveling:

- Blue Mountain MS Area, Buchanan, Copper Beach MS Area, Cortlandt Manor, Cortlandt Town Center Area, Cortlandt Town Hall Area, Crompond, Croton-Harmon HS Area, Croton-on-Hudson, Crugers, Forno's Pizzeria Area, Hen-Hud HS Area, Hudson Valley Hospital Area, Montrose, M.H.M. Community Center Area, Pierre Van Cortlandt MS Area, Verplanck, Walter Panas HS Area

If the areas above are too general and you are only able to shovel on specific streets please neatly list those streets below:

Operation Snowflake Student Snow Removal Application

I _____ agree to allow my name to appear on the list given to
(Print Student's Full Name)
the Senior Citizens who are participating in the Operation Snowflake program for snow shoveling purposes only. I will abide by the safety guidelines of the program.

Student's Signature: _____ Date: _____

Parent or Legal Guardian's Signature: _____ Date: _____

Print Parent or Legal Guardian Name: _____

Parent or Legal Guardian Cell #: _____

Parent or Legal Guardian Email: _____

Operation Snowflake (O.S.) Application Procedures:

1. Complete this application in its entirety with your parent(s)
2. Mail-in or drop-off this Application **by Tuesday, October 18th (to the addresses below)**
3. Await the O.S. Packet via the mail (guidelines, contract, voucher, etc.)
4. Complete all paperwork in the O.S. Packet in its entirety with your parent(s)
5. Mail-in or drop-off all paperwork from the O.S. Packet **by Friday, November 18th**

I understand completing this application is only step # 1 of a 5 step process. I also understand should I not complete all 5 steps by the deadlines listed above I will not be able to participate in the 2016-2017 Operation Snowflake Program.

Student's Signature: _____ Date: _____

Parent or Legal Guardian's Signature: _____ Date: _____

Mail-In or Drop-Off at:
Attention Operation Snowflake
Town of Cortlandt Recreation
1 Heady Street
Cortlandt Manor, NY10567

Drop-Off ONLY at:
Town of Cortlandt
Youth & Recreation Center
3 Memorial Drive
Croton-on-Hudson, NY 10520

For more information please contact Offutt Porter,
At 914-736-0498 or email at offuttp@townofcortlandt.com
or log on to www.townofcortlandt.com/yc