



## Volunteen/Counselor in Training Application

Fill out completely. Print, using blue or black ink.

Do not leave any line blank. If the information requested does not apply, write "N/A."

Full Name:	E-Mail:		
Address:	City:	State:	Zip:
School:	Grade:	Age:	D.O.B.:

### **Parent's Information**

Parent Name #1:		Parent Name #2:	
Cell:	Work:	Cell:	Work:
E-Mail:		E-Mail:	

## Please list any volunteer or employment experience (babysitting, etc.)

Agency/ Employer:	City:	
Duties:		
Agency/ Employer:	City:	
Duties:		

### Please list your school and/ or extra-curricular activities:

## Reason for Volunteering:

### Please list any skills that may be relevant to working at a day camp (other languages, etc.):

Are you volunteering for school credit?	YES NO
If yes: How many hours do you need?	
For which class and/or teacher?	
When do the hours need to be completed?	

### **CERTIFICATION OF APPLICANT:**

I certify that all statements in this application are true and complete to the best of my knowledge. I understand that any false statements will subject me to disqualification or dismissal. I further understand that by completing and signing this application, I agree to volunteer a <u>minimum of 10 hours</u> within six months of the date signed below.

#### APPLICANTS INITIALS:

### LIABILITY AND PUBLICITY RELEASE:

My child has my permission to participate in the Volunteen Program sponsored by the Glendora Community Services Department. I hereby waive, release and discharge any and all claims or rights to claims for damages for death, personal injury or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activity. This Release is intended to discharge in advance the City of Glendora, (and their respective agents, volunteers and employees), from and against any and all liability arising out of or connected in anyway with my participation in said activity. I further understand that accidents may occur during said activity, and that participants in such activity may sustain personal injuries, and/or property damage, as a consequence thereof. Knowing the risks of said activity, nevertheless, I hereby agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assigns. If the participant is a minor, I also give permission for his/her participation in the above activities, and for any necessary emergency medical treatment. I understand that the City of Glendora has no obligation to supervise my children at the close of the above activities and I release the City of Glendora, its officers, employees and agents from any liability resulting from the lack of supervision of my children at the close of the above activities. I understand and agree that participants involved in recreation programs are subject to being photographed and such photographs may be used to publicize city programs.

Signature of Applicant:Date:Signature of Parent/Guardian:Date:

# Volunteen/Counselor in Training Contract

Please go over this contract with your parent or guardian and place your initials next to each requirement indicating that you have read and agree to adhere to our policies.

I, (Name)

Will be on time for all programs, events, and meetings.
Will show respect toward staff, my peers, and the participants with whom I work.
Will be dependable by working at all the events for which I am Scheduled and will give 24-hour notice to the Community Services Department if a problem arises which would prevent me from performing my duties.
Will complete the tasks assigned to me to the best of my ability.
Will make efficient use of my time by seeking out ways in which I may help others after completion of my own responsibilities.
Will dress appropriately (Volunteer T-shirt) follow other dress codes as outlined and maintain a well-groomed appearance.
Will refrain from using foul language, making any obscene gestures, or otherwise behaving inappropriately while at camp.
Will refrain from any arguing, fighting, harassment, bullying, or horseplay with campers and fellow CITs.
Will not allow personal problems or conflicts to interfere with my job performance and interaction with participants.
Will maintain a positive attitude and remain flexible to change.
WILL HAVE A GREAT EXPERIENCE!!!

When you become a CIT, you are not only representing Camp Cahuilla, but also the entire City of Glendora. Your behavior and actions will be constantly observed by the campers and their families, so it is expected that you conduct yourself appropriately and are mindful of your words and actions. You will serve as an authority figure and are expected to serve as an example of good behavior and responsibility to all the campers as well as your fellow CITs. Failure to consistently uphold these standards and expectations may result in removal from additional weeks of volunteering or dismissal from the Counselor in Training program altogether at the discretion of the Director and Recreation Supervisor.

Failure to comply with this contract will result in the following consequences:

1st Offense: Verbal warning and review of contract.

2<sup>nd</sup> Offense: Written warning and phone call to parents.

3<sup>rd</sup> Offense: Dismissal of Volunteer

<u>Important Note</u>: The Glendora Community Services Department reserves the right to handle extreme violations at its own discretion. In situations where the Volunteen's actions jeopardize the integrity of Camp Cahuilla or the safety of anyone involved in our programs, the department may immediately dismiss the Volunteen.

I have read and initialed each item in this contract and agree to adhere to this policy.

Signature of Applicant:	Date:	
Signature of Parent/Guardian:	Date:	
Signature of Supervisor:	Date:	