



Volunteer- Counselor in Training Applications

Spring 2020

Dear Counselor in Training Applicant:

Boardman Park Adventure Day Camp Program prides itself on its reputation for quality and service. This recognition relies on the diversity of activities offered and the talents and capabilities of the Staff.

The Counselor in Training program provides young adults who are too old to attend day camp the opportunity to develop the social, emotional and mental skills necessary for future success in the workplace.

In order to be considered for a Counselor in Training position, numerous criteria must be met. Applicants must complete all necessary paperwork and documentation, interview demonstrating enthusiasm and competency in addition to following the Job responsibilities.

I look forward to reviewing your application. Please feel free to contact me at 330-965-0482 with any question you may have.

Sincerely,

Karen McCallum

Karen McCallum,
Recreation Director Boardman Park
330-965-0482

Boardman Park Adventure Camp Counselor in Training General Information

Purpose

To provide young adults the opportunity to gain work experience, develop marketable skills, enjoy recreational activities and perform community service. The main function is to provide assistance in the organization and implementation of Summer Day Camp.

Participation

2020 Camp Season: Space is limited to

- Max of **2 Full-Time** (committing to volunteering all 10 weeks with a min of 3 days a week) Counselor in Training Positions.
- Max of **3 Part-time** (committing to volunteer 5 weeks with a min of 3 days per week) Counselor in Training Positions.
 - *The 5 weeks the part-time CTs picks are on a first come first serve basis and do not have to be in consecutive order and will be limited to 1 Part-time CTs per week.
 - We will have two sets of 3 part time positions this year are available

*Max 5 "CTs" during any given week

Responsibilities

Attend weekly training meetings during the camp session.

Assist in the planning and operation of camp activities, including the selection of materials, instruction of activities and other duties as requested by staff.

Assist in the maintenance of facilities and grounds, including, but not limited to picking up equipment, reporting broken equipment and taking care of the areas utilized by camp.

Serve as a positive role model for the children.

See attached responsibilities sheet.

Qualifications

1. Be **14** years of age by May 1, 2020 thru 16 years of age.
2. Complete the application process as described in this packet.

Dress Code

Counselor in Training students are suggested to wear a clean Boardman Park shirt (two are provided) or nice clean tee shirt with shorts, socks and tennis shoes. No cutoffs. Shorts must be fitted and come to waist level. Large shorts which are oversized, very baggy, and/or hanging low on the hips will not be allowed. Defacing the uniform shirts in any way is prohibited.

Boardman Park reserves the right to monitor the dress and determine its appropriateness for the program.

**Boardman Park Adventure Camp
Counselor in Training Application**

Name _____ Date _____

Address _____

City _____ Zip _____

Home phone _____ Grade _____

Just finished

Pager/Cell phone _____

E-mail address _____

Whom to notify in case of emergency _____

Relationship _____

Home Phone (____) _____ Work Phone (____) _____

MEDICAL AUTHORIZATION

Purpose: To enable parents and guardians to authorize the provision of emergency medical treatment for children who become ill or injured while under playground program authority,

WHEN PARENTS OR GUARDIANS CANNOT BE REACHED.

In the event reasonable attempts to contact the Parents, Step Parents or Emergency number listed have been unsuccessful, I hereby give consent for the administration of any treatment deemed necessary by

Preferred Physician - Dr. _____ phone number (____) _____

Preferred Dentist - Dr. _____ phone number (____) _____

2). the transfer of the child to _____ (preferred hospital) or any hospital accessible.

This authorization doesn't cover major surgery unless the medical opinions of two (2) other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

Is your child allergic to any medications? YES NO, If
YES, _____

Does your child have any allergies? YES NO, If
YES, _____

Is your child taking any medications? YES NO, If
YES, _____

Boardman Park Counselor in Training Responsibilities

1. Aid and assist Adventure Camp Staff.
2. Get involved in all activities of camp.
3. Inventory and organize all supplies (sports equipment, snacks and board games) at the end of every day.
4. Give input to the counselors about ideas.
5. Follow the Discipline action policy enforced for the campers as well as the CTs.
6. Be reviewed every two (2) weeks at camp by the Camp Director.
7. Camp hours are 9:00 am – 3:00 pm.
8. At no time shall you talk to any parent. If a parent approaches you, please ask them to wait a minute while you get a counselor.
9. Follow all camp rules, just like the campers and counselors.
10. Help Boardman Park Staff with daily grounds maintenance during slow periods or as needed.

Counselor in Training Application

Please answer the following questions completely and carefully.

Why do you want to be a Counselor in Training?

List the skills you feel you have to be an exceptional Counselor in Training.

What experiences have you had that would help you to be an exceptional Counselor in Training?

What do you hope to accomplish if you are chosen to be a Counselor in Training?

Counselor in Training AGREEMENT FORM

I, _____ agree to serve, if selected, as a **volunteer** Counselor in Training with the Boardman Park Adventure Camp during the summer of 2019. I will comply with all the following conditions and requirements:

1. I agree to conduct myself in a mature, responsible manner and to remember that I am a representative of Boardman Park.
2. I agree to attend camp punctually each day. In the event of illness or an emergency, I will call the Programs Coordinator as soon as possible to notify him/her of my absence.
3. It is understood that since I am not an employee, I am not entitled to Boardman Park health insurance, worker's compensation programs, or any other benefit given an employee of Boardman Park.
4. I have read and understand the Counselor in Training job description and agree to perform the duties therein to the best of my ability.
5. If my work performance or behavior is in any way deemed unacceptable by the Program's Coordinator, I understand that I may be terminated immediately.

I understand that completion of the application process for the Counselor-in-Training position does not guarantee acceptance in the program.

Counselor-in-Training Applicant's Signature & print name, _____ Date _____

Parent's Signature & print name, _____ Date _____

RELEASE/WAIVER IN CONSIDERATION of being given the opportunity to participate in the following Boardman Township Park District Activity/Program/Event: Adventure Day Camp Counselor in Training Program, I, for myself, my personal representatives, assigns, heirs, and next of kin: 1. ACKNOWLEDGE, agree and represent that I understand the nature of participating in the abovementioned Activity/Project, and that I am qualified, in good health, and in proper physical condition to participate in such Activity/Project. BOARDMAN TOWNSHIP PARK DISTRICT VOLUNTEER RELEASE AND WAIVER OF LIABILITY FORM 2. FULLY UNDERSTAND that: (a.) that participating involves risks and dangers of serious bodily injury, including permanent disability, paralysis and death ("Risks"); (b.) these Risks and dangers may be caused by my own actions, or inactions, the actions or inactions of others participating in the Activity/Project, the condition in which the Activity/Project takes place, or any acts or omissions by the Boardman Township Park District, its Board of Park Commissioners, employees, agents and volunteers; (c.) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in the Activity/Project. 3. AGREE AND WARRANT that I will examine and inspect each Activity/Project in which I take part as a Volunteer or Participant, and if I observe any condition which I consider to be unacceptably hazardous or dangerous, I will notify the proper authority in charge of the Activity/Project and will refuse to take part in the Activity/Project until the condition has been corrected to my satisfaction. 4. AGREE to defend, indemnify and hold harmless Boardman Township Park District, its Board of Park Commissioners, employees, officers and agents (herein referred to collectively as the "Indemnified Party"), from and against any and all losses, liabilities, claims, suits, actions, losses, damages, demands, judgments or causes of action, assessments, costs or expenses (including without limitation reasonable documented attorney's fees and court costs) ("Damages"), arising out of a claim related to this Agreement caused by negligence of the undersigned, which the Indemnified Party may hereafter incur, suffer and be required to pay as a result of the acts of the undersigned or undersigned's agents. 5. HEREBY RELEASE, discharge, and covenant not to sue Boardman Township Park District, its Board of Park Commissioners, agents, officers, volunteers and employees, any sponsors, advertisers, and if applicable, owners and lessors of premises, hereinafter known as the Parties, on which the Activity/Project takes place, from all liability, claims, demands, losses or damages on my account caused or allege to be caused in whole or in part by the negligence of the Parties or otherwise, and I further agree that if, despite this Release and Waiver of Liability, assumption of risk, and indemnity agreement, I, or anyone on my behalf, makes a claim against any of the aforementioned Parties, I WILL INDEMNIFY AND SAVE AND HOLD HARMLESS each of the aforementioned Parties, from any litigation's expenses, attorney fees, loss, liability, damage, or cost which any may incur as a result of such claim. I have read this agreement and I fully understand its terms and conditions. Furthermore, I understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law; and I agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

BOARDMAN TOWNSHIP PARK DISTRICT VOLUNTEER RELEASE AND WAIVER OF LIABILITY FORM

_____ Name of Participant if a Minor Date _____

_____ Signature of Parent/Guardian if Participant is a Minor

_____ Printed Name of Parent/Guardian