



2121 Second St. Ste 101A
 Davis, CA 95618
 www.swimamericadavis.com
 (530)759-1214

2020 SUMMER JR. CAMP COUNSELOR APPLICATION & REGISTRATION

Requirements: Ages 11-14 AND attend *Camp Leadership Training*

TELL US ABOUT YOURSELF (PLEASE PRINT CLEARLY!)

| | | |
|--|--|-------------|
| Jr. Camp Counselor: | Birthdate: | Age: |
| Date of Leadership Class: | <input type="checkbox"/> May 9 1:30PM-5:30PM <input type="checkbox"/> May 16 1:30PM-5:30PM | |
| Adult T-Shirt Size: | | |
| Parent(s): | Cell Phone: | Email: |
| Street Address: | City: | Zip Code: |
| Emergency Contact: | Relationship: | Cell Phone: |
| SwimAmerica Family: <input type="checkbox"/> Returning <input type="checkbox"/> New Allergies? Y/N: | | |

CHOOSE CAMPS/ Availability

| CAMP SESSIONS | <u>Request Session Dates and Shifts (2 week min)</u> Note: Max of 2 Jr Camp Counselors per shift. Selected weeks are not guaranteed | |
|----------------|--|--|
| Weeks: | Morning - 8:30 am to 12:00 pm | Afternoon – 12:00 pm to 3:30 pm |
| June 15–19: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| June 22–26: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| June 29–July3: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| July 6–10: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| July 13–17: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| July 20–24: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| July 27–31: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| Aug 3–7: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| Aug 10–14: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |
| Aug 17–21: | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri | <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri |

EXPECTATIONS

1. Successfully complete *Camp Leadership Training*
2. Volunteer for at least 4 half days or 2 whole days during least 2 sessions (doesn't have to be consecutive)
3. Desire to work with children
4. Be willing to learn
5. Model good manners, good behavior and general politeness
6. Be able and willing to help in the water with the campers
7. Follow through with commitments
8. Be SILLY and GOOFY if necessary
9. SMILE!

Applicant Signature: _____

Jr. Camp Counselor Signature

Date _____

| TELL US ABOUT YOURSELF | | | | |
|---|-------|-----------------|-----------------|-------------|
| Participant's Name: | | Date of birth: | | |
| Parent's Name: | | Email: | | |
| (For progress updates, e-newsletters & school news) | | | | |
| Street Address: | | | | |
| City | State | Zip Code | Home Telephone: | Cell Phone: |
| Emergency Contact: (in case parent can't be reached) | | Home Telephone: | | Cell Phone: |

Medical History:

Is there any medical history or learning disability that we should be aware of that would help us in teaching your child?

YES NO If yes, please explain. You may also request a Special Abilities form from the check-in staff.

Consent for Emergency Medical Treatment

In the event of a medical emergency, I, the undersigned Parent/Guardian of the above named participant, authorize SwimAmerica and its representatives to direct and/or order emergency medical treatment, and to employ any legally licensed physician or health care facility for the above named participant. I also agree that neither SwimAmerica, nor its representatives, is liable under any circumstances to anyone for exercising the foregoing authority in the event of an emergency.

Photos

I also understand that photos are occasionally taken at SwimAmerica and that any photo taken of my child may be used for SwimAmerica purposes, including, but not limited to social media, website, print brochures or newspaper advertising for SwimAmerica.

Solicitation of Outside Employment

SwimAmerica does not endorse, recommend or facilitate any type of outside work between our families and our staff. Outside work includes, but is not limited to, babysitting, house sitting, pet sitting and lifeguarding private parties. We are confident that our staff is hired, trained and supervised to safely provide excellent services at SwimAmerica. We have no control over what happens outside our facility. Any outside work is at the staff member and family's own discretion and risk, and may not be discussed or arranged during the staff member's work time at SwimAmerica.

Release of Liability

In consideration of participation in any program, related event or activity at SwimAmerica, my signature below certifies that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my minor child's participation, as well as my own; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself or minor child from participation and bring such to the attention of SwimAmerica Davis immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS SWIMAMERICA, its officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owner and lessors of premises used for the activity, WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, incident to my own or my minor child's involvement or participation at SwimAmerica, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

Parent/Guardian Print Name _____
 Signature _____

Date _____

