#### **CIT Parent Agreement and Waiver**

## Participation and Arrival to Camp on Time

I hereby grant permission to my child to participate in the Day Camp Sunshine CIT Program. I will make sure he/she arrives to Camp on time (8am each morning). I understand that my child is required to attend at least one Pool Party during the time of his/her training, and that his/her participation in the Tuesday Staff Devotions is strongly recommended. I understand that the CIT Program is 4, 8 or 10 continuous weeks. Junior CITs (15 years old) work only 4 weeks. 17 years old CITs are required to work a minimum of 8 weeks (since they will be paid).

Choosing 4 weeks:	Choosing 8 weeks:
Choosing intechs.	Choosing o weeks.

Option 1: Weeks 1-4 1-8
Option 2: Weeks 5-8 3-10

Option 3: Weeks 7-10

## Compensation

I understand that 15 years old CITs are on a volunteer basis, which means they do not receive financial compensation. 16 years old CITs will receive a small pocket money. CITs who started working at Day Camp Sunshine in 2013 or earlier, will continue receiving payment at the 2013 rate (this includes CITs under 17 who have worked here before).

## Evaluation and Future Employment

I understand that being a camper at Day Camp Sunshine does not automatically qualify for acceptance in the CIT Program. Also, participating in the CIT Program does not automatically qualify for a position on our staff in the future. Participants (like every other staff member) will be evaluated, and future acceptance is based partially on these evaluations.

#### **Disciplinary Action**

I understand that if my child does not abide by the Day Camp Sunshine rules and policies, or does not carry out his/her responsibilities will be a cause for disciplinary action. After discussing it and trying to find other solutions, he/she may be suspended (without pay) or terminated, if no resolution is found.

# **Cell Phones**

Campers, counselors and CITs are NOT allowed to carry around their cell phones or other electronic devices during the camp day, unless they have a special agreement with the Camp Director. Campers and staff members may be reached by the camp phone during the day. In case of violation of the cell phone policy, the phone may be taken away by any member of the leadership team, and it will be given back to the parents at the end of the day. (Please see our Cell Phone Policy document.)

# Photographs and Videos

I grant permission to Day Camp Sunshine and the Fellowship Deaconry Ministries to use my child's photograph in its promotional materials and publicity efforts, including videos and other media, without any reimbursement or fee of any kind due me or my child.

# Liability

I hereby give consent for my child to attend and participate in all programs and activities of Day Camp Sunshine. I understand that my child will participate in an outdoor recreation program which may encompass activities including, but not limited to, ropes course, archery, trips and water sports, and I understand and acknowledge that while the agents, servants, employees and/or volunteers may have received training on safety techniques, there are nevertheless risks associated with, and inherent in, my child's participation in the Camp's outdoor recreation program and other Camp programs and activities. I voluntarily choose to assume these risks and allow my child to attend camp and participate in all Camp programs and activities.

I hereby agree to waive any claim for liability against Day Camp Sunshine due to any injury associated with any camp activities. I understand and am aware of potential risks and agree that this waiver applies to: traveling to and from camp, attending the camp, and participating in any camp programs and events, including field trips.

In the event of an emergency, where the Emergency Contact or Parent/Guardian cannot be reached, I give permission to the physician selected by the Camp Leadership to hospitalize, secure proper treatment and order injection, anesthesia or surgery for my child as deemed necessary for the emergency at hand.

CIT`s name:		
Parent`s name (printed):		
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Parent`s signature:		
Date:		