



EAST WINDSOR PARKS  
AND  
RECREATION DEPARTMENT

**2015 Counselor-In-Training Application**

*Application is due Tuesday, May 26<sup>th</sup>, 2015*

*This C.I.T. Application/Registration Form must be submitted to the Parks and Recreation Office.  
The Application can be mailed, faxed, or delivered to the Parks and Recreation Office.*

Town of East Windsor  
Parks and Recreation Department  
76 South Main Street  
(East Windsor High School)  
East Windsor, CT 06088  
Phone: (860) 627-6662  
Fax: (860) 623-4798  
Email: [mmaltese@eastwindsorct.com](mailto:mmaltese@eastwindsorct.com)

**East Windsor Parks and Recreation Summer Camp  
2015 C.I.T. Program Application/Registration Form**

**Date of Application:** \_\_\_\_\_ **Parent's Email Address:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_  
(Last) (First) (Middle)

**Address:** \_\_\_\_\_  
(Street) (P.O. Box or Apt. Number)  
(City) (State) (Zip Code)

**School Name:** \_\_\_\_\_ **Present Grade:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**In case of accident or emergency, please notify:**

\_\_\_\_\_  
(Name) (Phone)

\_\_\_\_\_  
(Address)

**PLEASE NOTE:** Cost of the C. I. T. Program is \$100 per week per child for Residents and Non-Residents, price includes 1 t-shirt. Additional t-shirts can be ordered for \$8 each. Hours of camp are 9:00a.m.–3:00p.m. Monday thru Friday. Upon registration, a non-refundable \$10 per child/per week deposit is required for each session/week your child attends, as well as the first weeks balance. If payment of the weekly balance is not made prior to the beginning of each week, your child will not be able to attend until payment is received. Once a registration form has been accepted and processed, parents are responsible for payment for all weeks chosen whether the child attends or not. If an extenuating circumstance prevents your child from attending, it will be at the discretion of the Director of P& R to issue a refund.

**Primary Guardian Information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Work:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Emergency Contact Information:**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Work:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Please check the weeks you are registering for:**

\_\_\_\_ 1: 6/29-7/3    \_\_\_\_ 2: 7/6-7/10    \_\_\_\_ 3: 7/13-7/17    \_\_\_\_ 4: 7/20-7/24    \_\_\_\_ 5: 7/27-7/31

\_\_\_\_ 6: 8/03-8/07    \_\_\_\_ 7: 8/10-8/14    \_\_\_\_ 8: 8/17 – 8/21

**T-Shirt Size:** \_\_\_\_ Adult Small    \_\_\_\_ Adult Medium    \_\_\_\_ Adult Large    \_\_\_\_ Adult XL    **# of T-Shirts** \_\_\_\_\_

**Total Amount Due \$** \_\_\_\_\_

**Amt Pd:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Cash:** \_\_\_\_\_ **Check #:** \_\_\_\_\_

**PLEASE SIGN HERE:**

Participation in this program may involve risk of injury. As a parent, guardian, or participant, I am aware of these hazards and my ability to participate. In consideration for participation in the program(s) listed above, I hereby, for myself and my heirs, waive and release any and all claims of damage against the Town of East Windsor, its successors and assigns, employees, agents and representatives for any and all kinds of injury, including, but not limited to, personal injury and/or property damage suffered by my child, myself, or my ward while participating in this activity. In addition I give permission for the children to be treated by qualified medical personnel in the event that the above named guardian cannot be present.

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Name Printed:** \_\_\_\_\_

**East Windsor Parks and Recreation Summer Camp  
2015 C.I.T. Program Application/Registration Form**

**Have you attended the East Windsor Parks & Recreation Summer Day Camp in the past? \_\_\_\_\_**  
**If yes, how many years have you attended? \_\_\_\_\_**

**Please answer the questions below as completely as you can. (Please print neatly).**

1. What jobs have you held?
  - A. Employer \_\_\_\_\_ Phone: \_\_\_\_\_  
Address \_\_\_\_\_  
Duties \_\_\_\_\_
  - B. Employer \_\_\_\_\_ Phone: \_\_\_\_\_  
Address \_\_\_\_\_  
Duties \_\_\_\_\_
  
2. What volunteer experience do you have?
  
  
  
  
  
  
  
  
  
  
3. What positions of leadership have you held?
  
  
  
  
  
  
  
  
  
  
4. Why do you want to be a C.I. T. this Summer?
  
  
  
  
  
  
  
  
  
  
5. What do you consider to be your strengths and weaknesses?

**East Windsor Parks and Recreation Summer Camp  
2015 C.I.T. Program Application/Registration Form**

6. What is your definition of the word "fun"?

7. **References:** Please list the names, address, and phone numbers of two references not related to you.

A. \_\_\_\_\_

B. \_\_\_\_\_

Please also include two (2) **Letters of Recommendation** from teachers/coaches.

February 24, 2015

Dear Prospective Counselor-In-Training participant:

We are excited that you have made the decision to apply for one of our sought-after Counselor-In-Training positions for the upcoming 2015 Camp Season. The C.I.T. Program is essential to the Parks and Recreation Department, as we often find our best Summer Camp employees through this program. The ability for you to gain the real-life experiences and responsibilities this program offers can also help you in your schooling, and can assist you in obtaining other employment opportunities in the future.

Each C.I.T., once having registered for the program, must attend the mandatory training session in order to be fully qualified for the job. This session will give each C.I.T. valuable information regarding the Department's policies and the expected duties for the Summer Season. The C.I.T. Training date will be determined at a later time and will be held at East Windsor Park. **Please remember to indicate which week(s) you will be attending on the attached C.I.T. application, and return this application (with your registration form found in the 2015 Camp and C.I.T. Brochure) no later than Tuesday, May 26<sup>th</sup>, 2015.** We must strictly adhere to this deadline so we may be properly prepared and have enough materials for all the participants who will be attending our Training Sessions.

All C.I.T.'s are required to attend weekly field trips or will not be able to attend camp on the day of the trip.

Please fill out the attached application pages completely, leaving no information blank. The C.I.T. Program is highly competitive, and the more information you can provide us in your application, the more informed a decision we can make on choosing the right path for you within the Department. Please feel free to contact the Parks and Recreation Office at (860) 627-6662 if you should have any questions or difficulties with the application. Thank you for your time, and we look forward to receiving your application.

Sincerely,

Melissa Maltese  
Director – East Windsor Parks and Recreation Department

MM/It