

REGISTRATION

# Counselor In Training (CIT)



ROLLING HILLS CLUB

2023 Weekly Sessions: June 12 - August 18

Ages 12-14

PARTICIPANT INFORMATION: PLEASE FILL OUT A SEPARATE FORM FOR EACH PARTICIPANT ENROLLED. PLEASE PRINT CLEARLY.

PARTICIPANT NAME (LAST) \_\_\_\_\_ (FIRST) \_\_\_\_\_ PARTICIPANT RHC MEMBER: \_\_\_\_\_ GUEST: \_\_\_\_\_

HOW DID YOU HEAR ABOUT COUNSELOR IN TRAINING CAMP AT RHC? \_\_\_\_\_ **IS PARTICIPANT A SWIMMER** \_\_\_\_\_

\_\_\_\_\_ **ALLERGIES** \_\_\_\_\_

**STOP! PLEASE SIGN THE MEDICAL CONSENT AND RELEASE OF LIABILITY ON REVERSE SIDE.**

ENROLLMENT: PLEASE INDICATE THE CAMP(S) INWHICH THE PARTICIPANT WILL BE ENROLLED.

### COUNSELOR IN TRAINING CAMP

8:30am-4:00pm

\$235 per week (\$310Guest)

CIT must possess a genuine interest in the camping/youth development field and in working with younger campers, be willing to commit the required energy, enthusiasm, and cooperation in all aspects of the training and hands-on portions of the program, and have a positive, cooperative attitude and pleasant disposition for the role. **Each CIT will be interviewed with parent and must attend a 1 1/2-hour training prior to the start of Camp.**

June 12 - 16	• "SEAS" THE DAY	<input type="checkbox"/>	Week	\$ _____
June 19 - 23	• MYSTICAL MAGIC	<input type="checkbox"/>	Week	\$ _____
July 26 - 30	• TEST TUBES + TERRESTRIALS	<input type="checkbox"/>	Week	\$ _____
July 3, 5, 6, 7 *	• ALL ABOUT SPORTS	<input type="checkbox"/>	Week	\$ _____
July 10- 14	• HAPPY CAMPER	<input type="checkbox"/>	Week	\$ _____
July 17-21	• SCREEN TIME COMES ALIVE	<input type="checkbox"/>	Week	\$ _____
July 24 - 28	• SPA-TACULAR / MESSY MAYHEM	<input type="checkbox"/>	Week	\$ _____
July 31- August 4	• ARTFUL ANTICS	<input type="checkbox"/>	Week	\$ _____
August 7-11	• UNDER THE BIG TOP	<input type="checkbox"/>	Week	\$ _____
August 14-18	CAMPTASTIC 2023	LI	Week	\$ _____

SNACK & LUNCH ARE NOT INCLUDED.

\* \$188 Member / \$248 Guests for July 4<sup>th</sup> week

PAYMENT: PLEASE INDICATE TOTAL PAYMENT DUE AND METHOD OF PAYMENT BELOW.

**NO REFUNDS.**

TOTAL PAYMENT DUE: \$ \_\_\_\_\_

CASH  CHECK # \_\_\_\_\_

CHARGE CREDIT CARD # \_\_\_\_\_

Exp Date \_\_\_\_\_ CW2 Code \_\_\_\_\_

Name ( As it appears on card ) \_\_\_\_\_

SIGNATURE \_\_\_\_\_



For more information, contact our Camp Director at 415.897.2185 or email [Katie@rollinghillsclub.com](mailto:Katie@rollinghillsclub.com)!

# Medical Emergency & Waiver of Liability Form

ROLLING HILLS CLUB

Please submit this form to Membership Services for processing.

RECEIVED BY:

DATE:

PARTICIPANT NAME (Last, First)			BIRTHDATE (MM/DD/YYYY)		MEMBER #
PARENT/GUARDIAN NAME* ( Last, First ) ***REQUIRED if participant under 18 years old**			RELATION		
EMAIL ( Parent/Guardian Email if under 18 )					
HOME PHONE ( Parent/Guardian Phone if under 18 )			CELL/WORK/DAYTIME PHONE ( Parent/Guardian Phone if under 18 )		
STREET ADDRESS ( Parent/Guardian Address if under 18 )			CITY	STATE	ZIP
SPECIAL HEALTH CONSIDERATIONS, DISABILITIES, MEDICATIONS, FOOD or DRUG ALLERGIES					
<hr/>					
EMERGENCY CONTACT (Other than parent, if listed above):			RELATION		EMERGENCY PHONE

**WAIVER:** In consideration of permission to use, today and on all future dates, the property, facilities, staff, equipment and services of Rolling Hills Club, I, for myself, my heirs, personal representatives or assigns, do hereby release, waive, discharge, and covenant not to sue Rolling Hills Club, its directors, officers, employees, and agents from liability from any and all claims including the negligence of Rolling Hills Club resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in activities, classes, observation, and use of facilities, premises, or equipment.

**ASSUMPTION OF RISKS:** I understand that there are risks associated with the participation in activities, classes, observation, and use of facilities, premises, or equipment of Rolling Hills Club such as personal injury, accidents or illnesses (including death), and property loss. I understand these injuries or outcomes may arise from my own or other's actions, inactions, or negligence, or the condition of property, facilities, or equipment at Rolling Hills Club. I have read this paragraph and I know, understand, and appreciate these and other risks that are inherent in my participation in activities, classes, observation, and use of facilities, premises, or equipment of Rolling Hills Club. I hereby assert that my participation is voluntary and that I knowingly assume all such risks.

**PHOTOGRAPH RELEASE:** I give Rolling Hills Club the absolute right and permission to use my photograph in its promotional materials and publicity efforts. I understand that the photographs may be used in a publication, print ad, direct-mail piece, electronic media (e.g., video, CD-ROM, Internet/WWW), or other form of promotion. I release Rolling Hills Club, the photographer, their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection with such use.

**INDEMNIFICATION AND HOLD HARMLESS:** I agree to INDEMNIFY AND HOLD the Rolling Hills Club HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of my involvement at Rolling Hills Club and to reimburse them for any such expenses incurred.

**SEVERABILITY:** I further expressly agree that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**ACKNOWLEDGEMENT OF UNDERSTANDING:** I have read this waiver of liability, assumption of risk, photograph release, and indemnity agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I acknowledge that I am signing the agreement freely and voluntarily, assuming all risks of use, and intend by my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

NAME (FIRST & LAST, PLEASE PRINT CLEARLY)

SIGNATURE (PARENT/GUARDIAN SIGNATURE, IF A MINOR)

DATE

ENTERED BY:

DATE:

351 San Andreas Drive, Novato, CA 94945

415.897.2185

ROLLING HILLS CLUB

REV .3..2023

www.ROLLINGHILLSCLUB.com