

SHADY CREEK CABIN COUNSELOR RESPONSIBILITY CONTRACT

NAME _____ AGE _____

HIGH SCHOOL _____ YEAR JR SR OTHER _____

My primary responsibility as a Shady Creek Cabin Counselor is the emotional well being and safety of the children in my care. As a positive role model for the fifth and sixth grade students, I will exhibit good manners, attention to instruction, enthusiasm for activities and consideration of others and my environment.

Please initial the following statements and sign the document in the appropriate place.

_____ I must insure as a Counselor, that I guide the children in my care fairly and consistently. I will take care to treat them with respect.

_____ I will remain with the children unless it is my specified time off. I will report all injuries, illnesses, and potentially dangerous or volatile situations.

_____ Understanding that the children are easily influenced, I will protect them from foul language and unwholesome or frightening stories and activities. No uncomplimentary remarks about race, religion, sex or sexual orientation will be tolerated in my student groups.

_____ I agree that while at Shady Creek I will not use tobacco products, alcohol, or illegal drugs.

_____ I understand for my protection, I should not touch children of the opposite sex and that I must never hit or mishandle a child.

_____ If I have any difficulties, I understand the Shady Creek staff are available to help me.

_____ I understand that any infraction of the above statements can result in my immediate dismissal.

_____ I have read the Shady Creek Cabin Counselor Responsibility Contract and understand everything.

By signing this agreement, I am consenting to be a counselor at Shady Creek Outdoor School for one week (five days). If I feel I am not able to commit myself for one week, I will not sign this contract.

I agree to fulfill, to the best of my ability, the obligation of counselor for elementary students at Shady Creek Outdoor School. I understand that by signing this agreement, I am saying I will read the Counselor Handbook and that I understand all the rules. If by some instance I cannot follow the rules, I understand I will be dismissed immediately with a note going back to my high school principal and counselor.

Date _____ Sign Your Full Name _____
(Cabin Counselor)

PARENTAL PERMISSION TO BE A COUNSELOR

I authorize _____ to participate in the Shady Creek Outdoor School Program in the capacity of a counselor, as I am his/her parent or legal guardian. I understand if my child violates any of the above statements, he/she is subject to immediate dismissal and I will be notified to bring them home.

Date _____ Signature _____
(Parent or Guardian)