

NORTH TORONTO  **BASEBALL CAMP**
CIT Application :: 2010

Application Process

To apply for a 2010 position at our Main Camp or Elite Camp, please complete the following steps:

- 1) CIT Application
- 2) Response Letter: 300-Word Paragraph
- 3) Reference: One reference and contact information

Please write a brief 300-word response explaining why you want to be a CIT and what qualities you exhibit that will make you a successful counselor at NTBC in the future.

Selection of CITs will be based on a first-come, first-served basis plus evaluation by camp directors. Please submit the CIT Application and Response Letter to info@ntbaseballcamp.com or mail it to 28 Lower Links Rd. Toronto, ON M2P 1H6.

Criteria

Must be 15 as of December 31st, 2010 to apply.

Time and Dates

CITs will be selected for one or more two-week session at Main Camp (Memorial Park) or Elite Camp (Sentinel Park). Camp operates from 8:15 a.m. to 4:15 p.m. Monday to Friday. Employment dates will be finalized if accepted.

Fee

There is no fee to enroll in the CIT program. Please note CITs do not receive a salary. This is a volunteer role.

Expectations and Conduct

CITs are expected to exhibit high standards of personal conduct. CITs must understand that their responsibility is to serve the needs of the camp program and in addition to being models for the campers. NTBC will not tolerate any behaviour that will belittle, embarrass, or hurt a camper physically or emotionally. CITs not meeting camp standards will be disciplined accordingly and will not be hired as a counselor in the future.

Performance Evaluations

Performance evaluations will be used to provide feedback to CITs on how they are performing their duties. The goal is to make expectations clear, create opportunities to improve, and provide the camp with the tools necessary to evaluate CITs for future employment. The camp directors will carry out all performance evaluations.

Responsibilities

CIT's will be responsible for assisting counselors in carrying out various drills, instructing Skill Groups at certain stations, and setting up the facilities each morning and afternoon.

If you have any questions or concerns regarding the application process or becoming a CIT, please feel free to contact us directly at (416) 619-1224 or by email at info@ntbaseballcamp.com.

CIT APPLICATION 2010

Family Information

CIT Information: Girl Boy

Last Name: _____

First Name: _____

School: _____

Last Camp Attended: _____

Birthdate: Month: _____ Day: _____ Year: _____

Father:

Salutation: Mr. Dr. Other _____

Last Name: _____

First Name: _____

Home Telephone: () _____

Bus. # () _____

Cell # () _____

E-mail: _____

Occupation: _____

Mother:

Salutation: Ms. Mrs. Dr. Other _____

Last Name: _____

First Name: _____

Home Telephone: () _____

Bus. # () _____

Cell # () _____

E-Mail: _____

Occupation: _____

Mailing/Billing Address: Family Father Mother

Name: _____

Street: _____

City: _____

Province: _____ Postal Code: _____

Secondary/Emergency Contact:

Name: _____

Telephone: () _____

Cell Phone: () _____

Relationship: _____

Medical Information

Health Card Number: _____

Allergy Information:

Please note any allergies your child has, as well as if an epipen is required.

List any treatments or medications to be given at camp:

Medication Name	Dosage	Administration Times

All medications must be clearly labeled in their original container with written instructions.

Special Notes (general requests, dietary restrictions, medical/psychological concerns):

General Information

Main Camp:

Check Desired Week(s)	Session	Start	Finish	Location
	Session 1	June 28	July 9	<u>Memorial Park</u>
	Session 2	July 12	July 23	<u>Memorial Park</u>
	Session 3	July 26	August 6	<u>Memorial Park</u>
	Session 4	August 9	August 27	<u>Memorial Park</u>

Elite Camp:

Check Desired Week(s)	Session	Start	Finish	Location
	Session 1	July 26	Aug 6	<u>Sentinel Park</u>
	Session 2	Aug 9	Aug 20	<u>Sentinel Park</u>

Authorization, Release and Acknowledgement Agreement and Form

The undersigned:

Medical Treatment/Emergency

- (a) authorize(s) North Toronto Baseball Camp, in the event of an emergency to use its reasonable discretion, on behalf of the undersigned, the undersigned's child(ren) or any associated spectator(s) participating in or attending at one or more of North Toronto Baseball Camp's current or future programs, in rendering first aid treatment and/or arranging for emergency medical care (including hospitalization), at the expense of the undersigned; the undersigned understands that North Toronto Baseball Camp will take every reasonable step to ensure the health and safety of the athletes, and that baseball is a demanding physical sport in which injuries might reasonably occur.
- (b) acknowledge(s) that notification, in writing, of any medical changes for each registered athlete must be received by North Toronto Baseball Camp prior to the start of the athlete's first camp period.

Release

- (c) release(s) and indemnifies North Toronto Baseball Camp and its directors, officers, shareholders, partners, staff, employees, consultants and representatives from all claims and liabilities whatsoever arising from participation in or attendance at one or more of North Toronto Baseball Camp’s current or future programs by the undersigned, the undersigned’s child(ren) or any associated spectator(s); the undersigned acknowledges that participation in the demanding physical sport of North Toronto Baseball Camp’s program involves a voluntary assumption of all the risks associated with the game.

Acknowledgement of North Toronto Baseball Association, The Toronto District School Board, Toronto Parks, Forestry and Recreation, The City of Toronto, and Larry Grossman Forest Hill Memorial Arena

- (d) understand(s) that North Toronto Baseball Camp is in no way affiliated, associated or in any other way connected or related to the North Toronto Baseball Association, The Toronto District School Board, Toronto Parks, Forestry and Recreation, The City of Toronto, or Larry Grossman Forest Hill Memorial Arena (the “Unaffiliated Parties”); the undersigned therefore releases and indemnifies the Unaffiliated Parties from all claims and liabilities whatsoever arising from participation in or attendance at one or more of North Toronto Baseball Camp’s current or future programs by the undersigned, the undersigned’s child(ren) or any associated spectator(s).

Program Cancellation

- (e) understand(s) that if cancellation is by North Toronto Baseball Camp due to insufficient registration or any other reason, a full refund, without any deduction, will be issued unless another mutually acceptable alternative can be found. North Toronto Baseball Camp reserves the right to terminate the registration of any athlete when it is deemed by them to be in the best interests of the athlete or the camp.
- (f) acknowledge(s) that while North Toronto Baseball Camp tries to balance providing sufficient notice of cancellation and not canceling a program prematurely, North Toronto Baseball Camp reserves the right to cancel such program.

Publicity

- (g) consent(s) that any pictures taken by North Toronto Baseball Camp can be used in any promotion or advertisement for the camp.

Lunch, Snack and Medication

- (h) understand(s) and agree(s) to provide the athletes with daily lunch, drink, snacks (**that do not contain nuts of any kind**) and all prescription medications (including epi-pens) where necessary, as well as all relevant supplies that pertain to such medications (i.e. carrying pouch, etc.)

The undersigned(s) acknowledges that he/she have read and understood all North Toronto Baseball Camp policies and North Toronto Baseball Camp can rely on all representations, acknowledgements and agreements made and information given. If only one parent/guardian signs this form, he/she acknowledges that he/she is also acting as agent of the other parent/guardian with authority to enroll the athlete at camp and to execute this agreement on his/her behalf and that North Toronto Baseball Camp may fully rely on his/her authority in connection with all such matters.

Name of Parent/Guardian 1	Signature of Parent/Guardian 1	Date of Agreement
Name of Parent/Guardian 2	Signature of Parent/Guardian 2	Date of Agreement