

**Lakewood Cultural Center
Summer Art Camp 2019
Counselor-in-Training Application**



Lakewood
Heritage, Culture & the Arts

Applicants must be at least 15 years of age (by May 31st) to apply. When our application is received, you will be notified for an interview within 3 business days. If selected after the interview, schedule will then be confirmed. This a non-paid volunteer position.

Applications will be accepted no later than May 10th by, email, mail or drop off to:

Attn: Nathalie Renfroe – Cultural Programs Coordinator
Lakewood Cultural Center
470 S. Allison Pkwy., Lakewood, CO 80226
natren@lakewood.org

PART 1: STUDENT INFORMATION

Name _____

Address _____

City _____ State _____ Zip _____

Birth date: _____

Student cell phone _____ Home phone _____

Student email _____

Emergency contact and relationship _____

Emergency contact phone # _____

EDUCATION HISTORY:

High School Name _____

Graduation date or expected graduation date _____

Extracurricular Activities _____

EXPERIENCE OR TRAINING:

(Please provide detailed information of any experience you have working with children, CPR certification, etc.):

PART 2: PERSONAL RESPONSE

Please help us get to know you a little bit more about you by responding to the following question. Responses should be typed on a separate piece of paper.

Please explain why you would like to be a Counselor-in-Training (CIT), keep personal response to under one page. Include any specific leadership experience you have, any experience in the arts/performing arts and also how you might choose to pursue the arts in the future (i.e., your studies at college or as a career).

PART 3: AVAILABILITY

CITs must be available for a training session on Saturday, May 18th between 11 AM-1 PM and work at least **two** or more weeks of camp to be considered. We will do our best to give you your chosen weeks. You can find more detailed information on our camp offerings at https://issuu.com/cityoflakewood/docs/lakewood_summer_camps_2019.

Please indicate the dates and times you are available to work below:

Summer Arts & History Camp

Lakewood Cultural Center (LCC) - Located at 470 South Allison Parkway behind Lakewood Commons on the corner of South Alameda Ave and West Wadsworth Blvd.

Lakewood Heritage Center (LHC) – Located at 801 South Yarrow Street, Corner of Wadsworth Blvd. and W. Ohio Ave.

Washington Heights Arts Center (WH) - Located at 6375 W. First Ave., East of O’Kane Park

Please select from the following weeks which shift(s) you are available to volunteer for, you may choose a morning, afternoon or both, and location of where you would like to be assigned to, A minimum selection of 4 must be chosen.

May 28-31 (4 days)

Tuesday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

June 3-7

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

June 10-14

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

June 17-21

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

June 24-28

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

July 1-5 [no camp Thursday, July 4th]

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

July 8-12

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

July 15-19

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

July 22-26

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

July 29-August 1

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

August 5-9

Monday-Friday

- 8:45 am–12:30 pm
- 12:30–4:15 pm
- LCC LHC WH

PART 4: LIABILITY WAIVER FORM



Lakewood

Heritage, Culture & the Arts

FOR HERITAGE, CULTURE & ARTS PROGRAMS:

ATTENTION: This liability waiver shall apply to all HCA programs for the named participant for a year from the date of acknowledgement.

RELEASE OF CLAIMS OF RELEASOR:

By acknowledging this Release, the Releasor accepts and understands that, in consideration of the City allowing the Releasor and/or the Releasor's minor child to participate in any HCA programs, the Releasor waives any and all claims against the City of Lakewood, whether based on contract, negligence or otherwise, which may arise as any damages the Releasor and/or the Releasor's minor child may suffer as a result of his or her participation in any HCA programs. Releasor releases the City, its officers, employees, agents and assigns regarding any claims, costs and expenses which arise out of any HCA program. Nothing in this form shall be construed to waive, limit, or otherwise modify any governmental immunity that may be available under the Colorado Governmental Immunity Act, C.R.S. 24-10-101, et seq., to the City, its officials, employees, agents or other persons acting on behalf of the City. Should any provision of this Agreement be held invalid, illegal or unenforceable, it shall not affect or impair the validity, legality or enforceability of any other provision of this Agreement. THE RELEASOR UNDERSTANDS THAT HCA PROGRAMS CAN BE INHERENTLY DANGEROUS RESULTING IN SEVERE INJURIES OR DEATH.

I hereby grant full permission that photographs and/or video recordings taken of the Releasor and/or the Releasor's minor child during the programs can be used for City of Lakewood advertising and promotional purposes.

I hereby represent that I have read, understand and agree to the contents of this Release and acknowledge the same voluntarily.

Applicant Signature: _____ Date: _____

Applicant Printed Name: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Printed Name: _____

Questions? Call

Nathalie Renfroe at 303-987-7877 or email natren@lakewood.org or

Karla Grahn at 303-987-7868 or email kargra@lakewood.org

THANK YOU!

END OF APPLICATION.