	nese Cultural Youth Sur 中華文化青少年夏令營 Sat. 07/01/17 to Sat. 07/08/17 YMCA Camp Oakes	(8 days 7 nig	hts)
Counselor/Report	rter Application (application)	ation deadline	<u>3/15/17)</u>
I AM applying for the  Counse	elor position 輔導員 🛛 🛛 🛛	Reporter position	on 記者
Applicant LEGAL Name Address:		申	請人姓名:
Sex/性別: M(男) F(女) e-mail: cell phone:		ireless Cell Ph	
Currently attending	School, Grade	Level	GPA
I have attended SCCCS summer camp in I have served as a Counselor in summer			
— Comprehension of Chinese 中文 Comprehension of English 英文			
Priority consideration will be given to th 1) served as Counselors in prior years 2) age 16+, currently is senior in High So 3) attended past SCCCS summer camps. 須為品行優良,身心健康之高中應居	chool or in college	日本會舉辦之房	夏令營

## **Emergency Contact:**

Father 父親 /Guardian	中文姓名	Cell 手機 e-mail	(	)	-
Mother 母親 / Guardian		Cell 手機 e-mail	(	)	-

Please attach a B/W or Color photo for our program book; this photo will not be returned
 Please attach two recommendation letters from your current school year Teachers and/or School Counselor

推薦人中文 姓名	推薦人所屬團體-	推薦人職稱	推薦人聯絡電話
Recommendation Letter from:	Organization	Title	Telephone:

參加社團與擔任職務經歷,社團名稱, 職稱 Valuable Extra- curricular Activities & Position: include Club names & positions served (please use additional sheet if necessary) (complete either in Chinese or English for our program book)

我將如何做個稱職的輔導員/小記者? (complete either in Chinese or English) What would I do to contribute to this summer camp as a counselor/reporter? What are your hobbies, etc. (Please write a 2-3 sentences. This information will be published in our program book.)

Authorization for Emergency / Medical Care and Claim Waiver

YMCA Camp Oakes does not provide health care or medical assistance. SCCCS will have an on-site nurse to handle minor injuries or high altitude nose bleeds, vomiting, fevers....

I/We \_\_\_\_\_\_\_(Print Parent Name) request that \_\_\_\_\_\_\_\_(applicant name) be permitted to participate in the **Chinese Cultural Summer Camp** sponsored by the **Southern California Council of Chinese Schools** (SCCCS). He/She is in excellent physical condition. Should he/she become ill or injured at the camp and may receive necessary first aid or medical attention by a licensed physician or nurse, or be admitted to a hospital in case of an emergency. This authorization is given pursuant to Section 25.8 of Civil Code of California and remains effective only for the event and time period specified above.

I/We will not hold YMCA Camp Oakes, YMCA organization, SCCCS or its officers, teachers, counselors, guardians and helpers liable for the above activity and medical aid rendered. I understand this activity is voluntary and he/she has my permission to participate in it. I also understand that there are certain risks involved in this activity, including, but not limited to, accidents, injuries, illness or death while traveling to and from said activity, and/or in the course of the activity, and/or the potential for property damage and/or loss. I will reimburse SCCCS for medical or other expenses incurred for his/her care.

Family Health/Accident Insurance Co	Insurance Co. Phone#	
Policy Holder Name	Policy #:	
My child is restricted from the following activities:		NONE
My child is allergic to the following:		NONE
I will provide the following medication(s) & WRITT	EN INSTRUCTIONS for m	y child to the
nurse :		□ NONE
Applicant	Parent/Guardian	
Signature: X Date:	Signature: X	<b>D</b> ate:

Office use: A photo copy of this Form must be given to Nurse by 7/1/2017.

Counselor for Team #\_\_\_\_

# ATTACH COPY OF INSURANCE CARD SCCCS Counselor Application 11-9-16

#### PHOTOGRAPHY RELEASE

(Print Parent/Guardian Name)hereby authorize SCCCS Chinese Youth I/We Summer Camp officials, hereafter referred to as "SCCCS" to the right to take photographs of me and my family in connection with SCCCS activities. I authorize SCCCS, its assigns and transferees to copyright, use and publish the same in print and/or electronically for any lawful purpose. I hereby release and hold harmless SCCCS from any reasonable expectation of privacy or confidentiality for myself and for the minor child and children listed below associated with the images specified above. Further, I attest that I am the parent or legal guardian of the child or children listed below and that I have full authority to consent and authorize SCCCS to use their likenesses and names including social medias.

We further acknowledge that participation is voluntary and that neither I, the minor child, or minor children will receive financial compensation of any type associated with the taking or the publishing of these photographs. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever. I hereby release SCCCS, its contractors, its volunteers and any third parties involved in taking or publishing photographs, from liability for any claims by me or any third party in connection with my participation or the participation of the minor children listed below.

Sign here ONLY if you DO NOT authorize the Photography Release

I attest that the information is true and accurate, and my parents/guardians have agreed to allow me to apply for this Counselor/Reporter position. If I am approved, I will attend an 8-hour leadership training and orientation. I agree to be respectful and act responsibly and in good faith to all campers, guardians, teachers and to abide by all rules to ensure a safe and pleasant week.

茲聲明本表所填各項屬實,我身心健康,我的父母/監護人也同意我申請擔任貴會夏令營輔導員/小記 者,如獲聘任,將準時參加**訓練** 9am-4pm(另安排日期)的營前講習及領導才能講習,按受訓其間表現決 定錄取順序。活動期間將以認真負責、公平合理與親切和藹的態度照顧學員,並與貴會工作人員合作, 遵守相關規定,讓學員有個快樂安全的夏令營

I will not hold SCCCS or its officers, teachers, and helpers liable for the above activity and medical aid rendered. I understand this activity is voluntary and he/she has my permission to participate in it. I also understand that there are certain risks involved in these activities, including, but not limited to, accidents, injuries, illness or death while traveling to and from said activity, and/or in the course of these activities, and/or the potential for property damage and/or loss. I will reimburse SCCCS for medical or other expenses incurred in his/her care.

Applicant Name:	Signature	_Date:
Parent Name:	Signature	Date:

### Mail Application (P1 ~ P3) & Photo to:

21159 Via Lugo, Yorba Linda, CA 92887

Please contact summercamp.scccs@gmail.com if you have any questions.

Thank you for your interest in the position. If you are selected, at the end of camp, we will issue a Certificate of Completion for 8 hours Leadership Training and 120 hours Counselor Service for your community service credit.

SCCCS c/o Nina Yu

In the event we have more qualified Counselor, Assistant Counselor, or Reporter applications than we need, and you are not chosen for the position applied, do you still wish to attend the summer camp as a Camper? NO

YES

For office use only: Notes:

Recommended for Teams:

Assigned to Team:

# **Duties for Counselors**

- Attend 8-hr training for Counselors one week before camp date in El Monte.
- Date to be announced

# **During Meals:**

- 1. You must bring campers 15 minutes earlier to get cafeteria ready
- 2. Direct and line up your campers to get their meal.
- 3. Maintain a low noise level and proper manner of conduct.
- 4. After meals, help and direct campers to clean tables and floors.

## For Classes:

- 1. Bring campers to class 5 minutes early to the assigned area
- 2. Help instructor maintain order in the class.
- 3. Assist teacher in using teaching material.
- 4. Help campers to clean up classroom when class ends.

# **During Outdoor and Indoor Activities:**

- 1. Be cautious of camper's state of health, report to guardian immediately or report to nurse if first aid needed. (in health cottage)
- 2. Always be aware of safety precautions.
- 3. Always make sure all campers stay together.

# **During Break Time:**

- 1. Campers may not go anywhere alone.
- 2. Use time wisely for preparation of skit/play or team flag or team song.
- 3. All campers must wake up and sleep at specified times.
- 4. After specified sleep time, campers and counselor may not talk or wander about.

# **General Rules of Conduct:**

- 1. All activities must report to the guardian ahead of time.
- 2. When Campers behave inappropriately, report to guardians immediately.
- 3. Treat Campers with reason, firmness and strictness yet with amiability.
- 4. If any emergency occurs, report to the Guardian or Nurse or Camp Director immediately.
- 5. The purpose of a counselor is to help people and acquire leadership skills.
- 6. Camper and/or Counselors are not allowed to be together alone in a room with a Nonteammate in the dorms at all times

# 輔導員職責

#### 一、用餐時

- 1. 带領全組同學按規定時間前15分鐘到達餐廳
- 2. 带領及協助全組同學領取食物
- 3. 維持全組同學用餐時的秩序,不可大聲喧嘩
- 4. 用餐後指揮並協助全組同學清潔餐桌上、下及四周,桌椅歸回原位並將餐具放在回收處

#### 二、上課時

- 1. 带領全組同學於上課前五分鐘準時到達上課地點
- 2. 幫助同學了解課程內容,並維持上課秩序
- 3. 下課後應將教室桌、椅歸回原位

#### 三、營外或室外活動時

- 1. 隨時瞭解每位同學身體狀況,如有哪位同學身體不適立即報告監護人或護士
- 2. 隨時注意同學之動向與安全,嚴禁接近危險地區
- 3. 營外活動時,一定要跟本組同學一起行動,注意安全

#### 四、休閒時

- 1. 不可讓本組同學單獨活動,應全組一起行動
- 2. 利用時間編練晚會節目、製作隊旗隊歌
- 3. 確實掌握時間,不可遲到、遲睡或遲起,就寢後不可講話及走動
- 4. 晚間就寢時,絕不可再有個人私自活動的行為

#### 五、一般原則

- 1. 全組活動要向監護人報告,如有同學不守規則應主動向監護人報告
- 2. 對同學之要求要合情合理,規定時語氣要堅定,要嚴格也要有獎勵
- 3. 隨時隨地跟同學一起,並與監護人分工合作
- 4. 如有緊急情況隨時報告監護人或營主任
- 5. 配合監護人帶領並輔導同學參加各項活動
- 6. 不得與非室友在房間內獨處

# <u>WHAT TO PACK -- 物品攜帶單</u>

學員只能攜帶一個睡袋及一件小行李或背包上山(大小不超過22"x14"x9",重量不超過7公斤),並確認行李或背包中攜有下列日需用品:

**Check List**: The camper shall bring ONLY TWO items: <u>one sleeping bag</u> and <u>one carry-on baggage OR</u> <u>back pack</u>. The carry-on baggage or back pack shall not exceed 22"x14"x9<sup>"</sup> in dimension and 7kg in weight.

## The carry-on baggage OR back pack should have the following camp essentials:

□ 背包 backpack □ 枕頭 pillow(optional) □ 盥洗用具 toiletries & face towel □ 浴巾 Bath Towel □ 手電筒 flash light □ 水壺 water bottle for drinking water □ 內衣褲及襪子(男生二天份,女生三天份) underwear and socks (2 days use for boys or 3 days use for girls) □ 防晒帽 hat or cap □ 長褲 2 件 2 pairs of pants □ 夏令營將分發給每位學員 T 恤 制服兩件。Two summer camp uniform T-shirt will be provided □ 游泳衣,褲 Swim wear □ 夾克或外套 1 件 one jacket or coat □ 拖鞋 1 雙 one pair of slipper □ 個人藥物 (家長必須在報到時提供<u>書面用藥指示</u>給隨隊護士) Medication (Parent must provide <u>written medication instruction</u> to the nurse during check-in. )

The camper must learn how to hand wash his or her own clothes every day. 學員每天必須練習手洗自己的衣服。

For safety concerns during outdoor activities, all campers must wear uniform T-shirt, long pants and sports shoes at all time. Skirt and sandals are not allowed for indoor or outdoor classes.

為野外活動安全考量,所有學員必須穿制服、長褲及球鞋,女生不可以穿裙子,也不可穿 涼鞋。

Cellular phone, computer, Ipad, video games, radio or electronic entertainment device, laser flash light, weapon or toys are not allowed in the camp.

所有學員在營區內禁止攜帶或使用下列物品:手機、電腦、Ipad、電動遊樂器、各型收 音機或 CD、雷射電筒、各式刀槍、其他玩具。

