

I _____
parent/guardian hereby register and give
permission for my child(ren):

(Names)
To participate in the Optimist Summer Day Camp
as per my registration. I have included payment
in full and understand that my rate is not
guaranteed until full payment is processed. I
am aware that it is my responsibility to ensure
that my child has with him/her a bagged lunch,
drinking water and snacks each day.
I am aware that the program begins at 9:00am
and concludes at 4:30pm and the Optimist Club
nor its representatives or employees are
responsible for my child prior to 9:00am or after
4:30pm unless specific arrangements have
been made in advance with the camp co-
ordinator.
I am aware that the camp is not responsible for
any lost or missing items while my child is
there.

Signature _____ Date _____

**MAKE CHEQUES PAYABLE TO
OPTIMIST CLUB OF BROOKLIN**

**COMPLETED FORMS SHOULD BE
DROPPED-OFF (in sealed envelope)
or MAILED TO:**

OPTIMIST CLUB OF BROOKLIN
c/o Brooklin Bulletin Signs,
1-105 Industrial Drive,
Whitby ON L1N 5Z9
FAX: (905) 430-8716
(Leave message with Mary: 905-924-1966)



Refund Policy
Full refund on a week by week basis if cancellation is due to certifiable medical condition such as communicable disease or mobility restrictions. Registrations paid prior to June 10th may request a full refund until June 30th only. No refunds after June 30th, 2012.



- Promise Yourself -**
- To be so strong that nothing can disturb your peace of mind.
 - To talk health, happiness and prosperity to every person you meet.
 - To make all your friends feel that there is something in them.
 - To look at the sunny side of everything and make your optimism come true.
 - To think only of the best, to work only for the best and to expect only the best.
 - To be just as enthusiastic about the success of others as you are about your own.
 - To forget the mistakes of the past and press on to the greater achievements of the future.
 - To wear a cheerful countenance at all times and give every living creature you meet a smile.
 - To give so much time to the improvement of yourself that you have no time to criticize others.
 - To be too large for worry, too noble for anger, too strong for fear, and too happy to permit the presence of trouble.

CONTACT US
OPTIMIST CLUB OF BROOKLIN
C/O Brooklin Bulletin Signs
1 - 105 Industrial Drive
Whitby ON L1N 5Z9
Phone (905) 924-1966 Fax (905) 430-8716
www.brooklinoptimist.org
mary.wick@hotmail.com


2012

Counsellor In Training Program

INFORMATION & REGISTRATION FORM ENCLOSED

YOUTH AGES 13 - 16

SPACES MAY BE LIMITED

A COMMUNITY PROJECT BY:
 **OPTIMIST CLUB OF BROOKLIN**

THE PROGRAM

The CIT Program offers training in the various aspects of becoming a counsellor. The purpose of the program is to introduce the ideals and duties of a camp counsellor. Daily, the CIT's will be involved in seminars outlining the various skills required. Integration into the camp community will also occur as CIT's shadow other staff members and program their own activities.

The program is ideal for youth ages 13 to 16 who will look forward to working at a camp in the future. This program is designed to encourage youth to learn the basic skills needed in order to become a positive leader within the community. This program could potentially be the foundation for a career in the Camp environment.

Our camp offers many exciting excursions once a week, which will allow the C.I.T's to join in these special events. As well we offer special programs, as this remains essential to the experience. Our C.I.T's are the future leaders of Optimist Summer Day Camp.

Additional Aspects of the Program:
Each participant will receive their own t-shirt, Training Binder, and a Certificate upon successful completion of the CIT Program.

BRING A BAGGED LUNCH, DRINKING WATER & HEALTHY SNACKS

DAILY JULY 9-27, 2012 9:00 AM - 4:30 PM at BROOKLIN MEMORIAL PARK

Rain Days in Brooklin Memorial Arena
or Brooklin United Church

*Note: The CIT Program is a great addition to any resume and opens up opportunities for future employment in various related fields.

Training Program Costs

**REGULAR
REGISTRATION
FEE**

**CIT PROGRAM
SESSION
\$325***

**FOR EACH
3 WEEK PERIOD**

*** UNIFORM, TRIPS AND
BBQ'S INCLUDED**

*Payment must be received in full to guarantee a place in the program.

REGISTRATION

COMPLETE BOTH SIDES OF THIS
FORM & SUBMIT WITH PAYMENT
IN SEALED ENVELOPE

PARENTAL CONTACT _____

ADDRESS _____

CITY _____

POSTAL CODE _____

PHONE _____

EMAIL _____

FIRST YOUTH

NAME	AGE
1 @ \$325 = \$ 325	
SESSION (CIRCLE)	TOTAL PRICE

ADDITIONAL YOUTH

NAME	AGE
1 @ \$325 = \$ 325	
SESSION (CIRCLE)	TOTAL PRICE

TOTAL YOUTH _____ TOTAL:\$ _____

SESSION DATES: JULY (SESSION 1)

M	T	W	T	F
9	10	11	12	13
17	18	19	20	21
23	24	25	26	27

~CONTINUED ON OTHER SIDE~