



# The Colony Aquatic Park

## 2016 Volunteer Application

*Please return by June 2*

(Assistant Swim Instructor Program)

Thanks for your interest in our summer program. This is a great activity for kids, ages 12 and older. You will make new friends, learn fantastic skills, and be part of a team.

We want to know about your availability, please fill out this form and return it to the Aquatic Park or Rec Center.

Parents--Please -check you calendar for doc/dentist appointments, vacations, camps, and other plans before committing to a schedule.

NAME \_\_\_\_\_ AGE \_\_\_\_\_

PARENTS' NAMES \_\_\_\_\_

PARENTS' PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

### **ALL Volunteers must attend Orientation.**

We have powered up this program to imitate its Big Brother - Lifeguard Training. So, **wear your swim suit** and be ready for a tough workout and a LOT of fun!

-----Plan to attend **ONE** of these orientation dates before your first day of work.-----

Eager to work? .....Training is **FRIDAY June 3 10:00AM-11:30AM**

**Your choice of any of the 5 sessions**

Joining our program late? .....Help with **Session 3, 4 & 5** by attending **July 1, 9:30AM**

Starting **REALLY** Late? .....Help with **Session 4 & 5** by attending **July 16, 9:30AM**

Circle the sessions you can volunteer and indicate AM "Morning" or PM "Evening"

**Please add these dates to your family calendar or take a picture with your phone.**

AM 10 - Noon **OR** PM 6:30 - 8:15

Session 1 June 6 - June 16 AM PM

Session 2 June 20 - June 30 AM PM

Session 3 July 5\*- July 14 AM PM

Session 4 July 18 - July 28 AM PM

Session 5 Aug 1 - Aug 11 AM PM

*\*Each Volunteer must have  
Current Rec Trac Family Registration Form on file.  
Friends of The Colony Volunteer Application Form*

Classes will be held Mondays through Thursdays

Rain Make-Up Days on Fridays

\* Week of July 4 No Class Monday Makeup day Friday 8

**Program fee \$5**  
**-non-refundable/non-transferrable-**  
**Please attach to this application.**

it is **important** and mandatory that you can work the **entire** eight days of the session that you select.

Please **sign here** stating that **you understand and are committed** to your eight day schedule

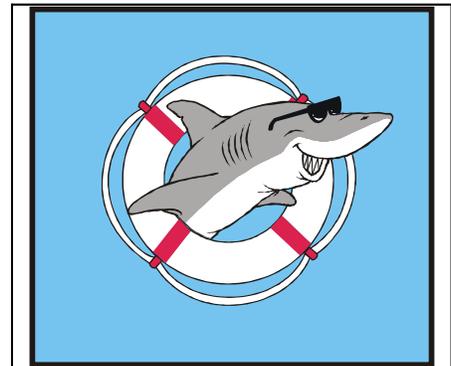
X \_\_\_\_\_  
Volunteer Signature

X \_\_\_\_\_  
Parent Signature

## What is the Volunteen Program?

Our program is open to all youth (ages 12-14) who are able to pass the swim skills in the American Red Cross Level 4.

We ask for at least a two-week (one-session) commitment, with dedication to a specific time period each day. A “contract” is established between the coordinator and Volunteen so that everyone understands the nature of the relationship.



Volunteens play an important roll bridging the gap between students and instructors.

Activities a Volunteen may provide include:

- Clerical duties (taking roll, marking skill sheets)
- Area preparation (equipment set-up, skimming pool)
- Leading stretches (before class)
- Helping with songs & games
- Safety guidance (leading kids from one deck site to another)
- Demonstrating strokes & diving
- Assisting with swim skills (supporting and guiding students)
- Supporting the instructor’s control of class
- A role in facility’s Emergency Action Plan
- Assisting with safety in the water (extra “eyes” on the swimmers)
- Clean-up (storing equipment after class)

Volunteens learn detailed swim, instructional, clerical, safety, and supervisory skills through a combination of the American Red Cross Water Safety Aide Course and our own Aquatic Park Volunteen Training Program. Each student will learn about the different levels of the ARC Learn to Swim program.



As a vital part of our facility’s Emergency Action Plan, Volunteens practice drills alongside the Lifeguard staff. Although they are not allowed to make “contact” rescues, Volunteens will learn basic equipment rescues, spinal boarding, crowd control and directions for contacting EMS.

## Your Benefits

The participants will:

- Learn various skills taught in the ARC Learn to Swim Program.
- Learn how to properly supervise children before, during and after class.
- Learn availability of equipment, the proper use, storage and handling
- Learn different instructional methods used to teach swimming.
- Accumulate community service hours for National Honor Society.
- Gain leadership skills by helping and teaching.
- Be rewarded for their participation with special Public Swim status.
- Learn about careers in the field of aquatics.
- Learn how to prepare the site for class.
- Learn time management skills.
- Learn how to handle certain emergency situations.
- Improve and maintain their fitness level.
- Improve and maintain their skills level.
- Learn different Spanish phrases used in swimming
- Learn new water games
- Teach water games to classes
- Make new friends, have fun, and be part of a team!



## Our Facility's Nine Program Goals

1. Recruit and train fifty (50) kids for program.
2. Keep training ongoing throughout summer.
3. Retain 50 % of Voluteens from past year.
4. Involve swim instructors in training and orientation sessions.
5. Involve the facility lifeguards during training.
6. Assign each instructor four (4) Volunteens to help with every class.
7. Maintain Volunteens' fitness and skill levels.
8. Maintain accurate account of Volunteer hours.
9. Encourage advancement to Lifeguard & Instructor (at age 16)



# Household Registration Form

It is mandatory that this form be filled out completely before participation in any PARD activity.

(PLEASE PRINT NEATLY)

Head of Household: \_\_\_\_\_ M/F DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Head of Household Cell Phone: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ M / F DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

Secondary Contact Cell Phone: \_\_\_\_\_

Email Address for correspondence: \_\_\_\_\_

Additional Household Members:

1. \_\_\_\_\_ M / F DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

2. \_\_\_\_\_ M / F DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

3. \_\_\_\_\_ M / F DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

4. \_\_\_\_\_ M / F DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

5. \_\_\_\_\_ M / F DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_

<b>For Office Use Only</b>
RecTrac Household #:
<input type="text"/>
<b>Entered By:</b>
<b>Date:</b> /        /

**Release:** The undersigned "Participant(s)", individually and as next friend for my/our minor child/children (if applicable), desires to participate in activities of the City of The Colony, Texas (the "City"), relating to the City's Parks and Recreation Department, and have made application to participate in such activities. For and in consideration of that participation, I/We do hereby release, acquit and forever discharge the City, its officers, agents and employees from and against any and all liability, claims, actions, causes of action, lawsuits, cost, fees or expenses relating to or arising out of any and all injuries or damage which may result or arise from or out of my/our participation in such activities. I/We hereby assume the responsibility for any and all risk of participating in such activities. Also, I hereby consent to use of photos or videos of my participation in Parks and Recreation Dept. activities to be used for promotional purposes.

The terms of this Release are contractual and not merely recitals. I/We further state that I/We have read this Release, know and understand its contents, and sign the same as my own free act and deed.

Head of Household Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Secondary Contact Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_



# Friends of The Colony Volunteer Application Form

Event: \_\_\_\_\_

First Name	Last Name	Middle Initial
Address		
City	State	Zip
Home Phone	Cell Phone	Date of Birth
Email Address		
Emergency Contact Person	Emergency Phone Number(s)	
<input type="radio"/> Yes, I am 18 years of age or older. <input type="radio"/> No, I am not yet 18 years of age. I am _____ years old as of today.		

### PLEASE READ BEFORE SIGNING:

As a volunteer for the City of The Colony, I agree:

- To follow the City of The Colony volunteer policies, rules and procedures.
- To represent the City of The Colony in a professional manner and portray a positive image to the community.
- Not to engage in sexual or inappropriate behavior with patrons.
- Not to consume alcohol or illegal drugs before or during my volunteer scheduled time.
- To avoid the use of profanity while on site.
- To allow the City of The Colony to use my likeness, voice, photograph and words in any form for promoting activities without compensation.

### WAIVER OF LIABILITY:

**In consideration of the City of The Colony allowing me / my child to participate in the Friends of The Colony Volunteer Program, and being aware of the possible injuries that could occur as a result of this participation, I, on behalf of myself or my minor child, release the City of The Colony officials, employees, agents, instructors, from any and all injuries and damages whatsoever arising from participation in any City of The Colony event.**

**I, my heirs and representatives, agree to indemnify, save and hold harmless the City of The Colony, its officials, employees and agents from any and all claims made by me/my child or my insurer for injuries or damages related to any City of The Colony event.**

**I affirm I have read the above and the information I have given is true and complete.**

\_\_\_\_\_  
Signature of Volunteer and Date

\_\_\_\_\_  
Signature of Parent, if applicant is under the age of 18, and Date

Please return this signed application to the FOTC Volunteer Coordinator prior to participating in any volunteer activities.