

Town of Chester  
203 Middlesex Avenue  
Chester Connecticut 06412-1200



telephone: 860-526-0013  
facsimile: 860-526-0028  
web page: chesterct.org

**2019 Counselor in Training Program**  
at the Chester Town Hall

**Mail this completed form with payment payable to "Chester Parks and Recreation" to:  
Chester Parks and Recreation, 203 Middlesex Avenue, Chester, CT 06412**

**Wednesdays and Fridays, 2:45-5:00pm on January 9, 11, 16  
and 12:45-5:30pm on January 18**  
**Open to former Chester Parks and Recreation Campers in Grades 7 or 8  
and  
Open to 2018 Chester Parks and Recreation CITs in Grade 8  
on January 9 and 16**

**The \$95 (\$25 for 2018 returning CITs) fee includes  
2 weeks during the summer camp program, Monday through Thursday, 8:15am-3:45pm.**

**This program DOES NOT certify the student as a Lifeguard, but does include  
First Aid/CPR/AED certification for new candidates.**  
**This program does not imply future employment.**

Leadership, January 9: The Job of a Lifeguard, January 11:  
The Job of a Camp Counselor, January 16: First Aid and CPR/AED Training, January 18

***ACCORDING TO CONNECTICUT GENERAL STATUTE 19a-77 WE ARE REQUIRED TO  
DISCLOSE THAT TOWN OF CHESTER PROGRAMS ARE NOT LICENSED BY THE  
STATE OFFICE OF EARLY CHILDHOOD.***

The undersigned does release, acquit, discharge, and hold harmless the Town of Chester, the Chester Parks and Recreation Department, and any of its officers and employees from any actions, claims, damages, costs or expenses growing out of my participation in the said activity, due to the negligence of the Town of Chester, the Chester Parks and Recreation Department or its officers or employees. This release and agreement is binding upon myself, my heirs, executors, administrators or assigns. I agree to adhere to the program policies of the Chester Park and Recreation Commission.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 2018

\_\_\_\_\_  
Printed Name of Participant

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Town

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
e-mail Address