



Counselor-in-Training Program

*****If you submitted your CIT application online, mail this signed form in order for your application to be considered complete. Please return this form to:
Main IDEA, 9 Irving St, Worcester, MA 01609*****

It is the policy of Main IDEA to provide equal opportunities without regard to race, color religion, national origin, gender, sexual preference, age, or disability, and we reserve the right to refuse any applicants at our own discretion. By submitting this application, I affirm that I understand that the facts set forth are true and complete to the best of my knowledge. I understand that all applications are received on a first come, first serve basis, and that my child may or may not be accepted into the camp on this basis. I understand that if accepted, any false statements, omissions, or other misrepresentations made by me on this application may result in my child's immediate dismissal. **I understand and give consent that my child may be photographed or recorded on video for promotional purposes. I understand that my child can commit to ALL 5 DAYS OF THE PROGRAM, as well as the Staff Training.**

I desire for my child (named on page 1 of this application under "Child Information") to participate in the program provided by Main IDEA (the "Program"), including, if applicable, as passenger in a vehicle to and from the program area as described above under "Main IDEA Vans." As lawful consideration for my child's participation in the Program, I agree to all the terms and conditions set forth in this application.

I AM AWARE AND UNDERSTAND THAT MY CHILD'S PARTICIPATION IN THE PROGRAM INVOLVES ACTIVITIES THAT ARE DANGEROUS AND INVOLVES RISK OF SERIOUS INJURY AND/OR DEATH AND/OR PROPERTY DAMAGE. I ACKNOWLEDGE THAT ANY INJURIES THAT MY CHILD SUSTAINS MAY BE COMPOUNDED BY NEGLIGENT EMERGENCY RESPONSE OR RESCUE OPERATIONS OF MAIN IDEA. I ACKNOWLEDGE THAT MY CHILD IS VOLUNTARILY IN THE PROGRAM WITH KNOWLEDGE OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT AND ASSUME ANY AND ALL RISKS OF INJURY, DEATH, OR PROPERTY DAMAGE, WHETHER CAUSED BY THE NEGLIGENCE OF THE COMPANY OR OTHERWISE.

I hereby expressly waive and release any and all claims, now known or hereafter known in any jurisdiction throughout the world, against Main IDEA, and its officers, directors, employees, agents, affiliates, successors, and assigns (collectively, "Releasees"), arising out of or attributable to my child's participation in the Program, whether arising out of the negligence of Main IDEA or any Releasees or otherwise. I covenant not to make or bring any such claim against Main IDEA or any other Releasee, and forever release and discharge Main IDEA and all other Releasees from liability under such claims.

This application constitutes the entire agreement of Main IDEA, myself, and my child with respect to the subject matter contained herein and supersedes all prior and contemporaneous understandings, agreements, representations, and warranties, both written and oral, with respect to such subject matter. If any term or provision of the application is invalid, illegal, or unenforceable in any jurisdiction, such invalidity, illegality, or unenforceability shall not affect any other term or provision of this application or invalidate or render unenforceable such term or provision in any other jurisdiction. This application is binding on and shall inure to the benefit of Main IDEA and its respective successors and assigns. All matters arising out of or relating to this application and participation in the Program shall be governed by and construed in accordance with the internal laws of the Commonwealth of Massachusetts without giving effect to any choice or conflict of law provision or rule.

I am the parent or legal guardian of the minor named on page 1 of this application under "Child Information." I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this application. BY SIGNING, I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD ALL OF THE TERMS OF THIS AGREEMENT AND THAT I AM VOLUNTARILY GIVING UP SUBSTANTIAL LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE MAIN IDEA.

By signing below, I am submitting this application and I affirm that the facts set forth in it are true and complete. I have read, understood and consent to the policies and procedures listed above. I understand that I am responsible for listing on this application any medical needs my child may have in order to participate in the Program. I hereby release and hold harmless Main IDEA and Clark University.

Parent/Guardian (Print Name): _____

Parent/Guardian Signature: _____ **Date:** _____

Applicant Name: _____