

SUMMER TRAILS STAFF POLICY CHECKLIST

Please review and check the statements below to indicate you understand these Summer Trails policies. If there is a policy you are unclear about and/or you were unaware of, please contact Summer Trails at once.

THIS FORM MUST BE RETURNED WITH YOUR CONTRACT

____I understand that Summer Trails is a wholesome child-centered environment and that my behavior both in and out of camp will be consistent with the expectations and policies of Summer Trails.

____I understand that Summer Trails will thoroughly check references, check the national and NY State sex offender registries, and has the right to conduct criminal background searches and I have disclosed any legal convictions against me. I will also disclose any future legal convictions.

____I understand the following Summer Trails Cell Phone Policy:

Campers are not permitted to bring cell phones, and therefore staff cell phones should not be seen or heard by campers. Cell phones can be used on periods off in our staff area only.

____I understand the following Summer Trails Appearance Policy:

- Changes: no dramatic changes to my appearance will take place throughout the summer
- Tattoos: depending upon size and content they may be required to be covered
- Piercings: only stud piercings are allowed and Summer Trails reserves the right to ask that all piercing jewelry be removed.
- Staff Shirts: Staff shirts are required to be worn at all times throughout the camp day. Staff shirts are not to be cut or altered in anyway.

____I understand the following Summer Trails Internet and Camper Contact Policy:

Camp employees are not permitted to identify themselves as a camp employee, use the camp logo or name, or camper related photographs in any internet based social networking sites including profiles, websites, group pages or weblogs. Camp employee hereby refrains from contacting campers in anyway (via internet, mail, phone etc) without permission from the camper's parent or approval from Summer Trails.

____I understand I am required to attend the staff training dates specified on my contract.

____I understand I am required to read the Staff Manual and participate in the Web Based Training Materials. I am responsible to know and understand the policies and procedures in that manual.

____I understand the following Summer Trails Payment System:

All staff will be paid one week in arrears in four biweekly installments. Your final paycheck will be available on August 17th which will be a half day of work culminating in an end of season luncheon.

____I understand that Summer Trails has a zero tolerance policy for the possession of Alcohol, Smoking, Pornography, Drugs and Weapons on campgrounds.

____I understand that I have signed up for the best summer of my life and will take full advantage of this wonderful opportunity.

_____ Print Name

_____ Signature _____ Date