

SOUTHERN YORK COUNTY (SYC) JUNIOR FIRE CAMP APPLICATION 2022

FIRE CAMP DATES: 25-29 July 2022

Ages: 12 - 17

CAMP HOURS: 0900 – 1500

Camp Location: 21 W. Forrest Ave Shrewsbury PA 17361

Please email your completed application to: SYCFireCamp@Shrewsburyfire.com

Applicant's Name: _____ Age: _____ <input type="checkbox"/> Boy <input type="checkbox"/> Girl
Home Address: _____ City: _____ State: ____ Zip: _____
Home Phone: _____ Email Address: _____
Grade Entering August 2022 School: _____

Parent/Guardian Name: _____

Address: _____ Apt: _____ City: _____ State: ____ Zip: _____

Home Phone: _____ Work phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact Name: _____ Emergency Contact Phone: _____

Emergency Contact Relationship to Camper: _____

Only the following people may pick my child up from the Fire Camp: _____

Please list all health concerns, limitation or restrictions, and medications for your child:

Will you be attending the entire week program? If No, please circle the dates you will attend:

Yes No Mon: 7/25; Tues: 7/26; Wed: 7/27; Thurs: 7/28; Fri: 7/29

Fee for the full week per child: **\$100.00 and \$90.00 for each additional sibling**, to be paid at time of application. You must pay for the full week, even if you are not attending all days. This camp will not be prorated.

Select T-Shirt Size: (T-shirt is included in application fee. If registering more than one child, indicate number of shirts if necessary.)

- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Youth Small | <input type="checkbox"/> Youth Medium |
| <input type="checkbox"/> Youth Large | <input type="checkbox"/> Youth X-Large |
| <input type="checkbox"/> Adult Small | <input type="checkbox"/> Adult Medium |
| <input type="checkbox"/> Adult Large | <input type="checkbox"/> Adult X-Large |

EMERGENCY MEDICAL AUTHORIZATION:

As parent or legal guardian of _____ I further more give permission to ***Shrewsbury Volunteer Fire Company Inc., Glen Rock Hose & Ladder Co., and Rose Fire Company No. 1*** and its employees and volunteers to obtain emergency medical treatment for my child(ren) or the child(ren) over whom I have legal custody, each of whom is listed above.

I understand that all reasonable effort will be made to contact me prior to seeking medical care for the child(ren) listed above. If I cannot be reached, the county will exercise reasonable judgment in seeking medical treatment for my child.

Printed Name & Signature: _____ Date: _____

TRANSPORTAION AUTHORIZATION:

As parent or legal guardian of _____ I further more give permission to ***Shrewsbury Volunteer Fire Company Inc., Glen Rock Hose & Ladder Co., and Rose Fire Company No. 1*** and its employees and volunteers to transport my child(ren) or the child(ren) over whom I have legal custody, each of whom is listed above; to and from event locations during the camp.

Printed Name & Signature: _____ Date: _____

PHOTOGRAPH RELEASE:

I, _____ the parent or legal guardian of, _____ permit ***Shrewsbury Volunteer Fire Company Inc., Glen Rock Hose & Ladder Co., and Rose Fire Company No. 1*** to take and use photographs of me and/or my child/children/ward(s) for the purpose of promoting youth programs and activities. This includes permission to publish photographs of me and/or my child/children/ward(s) for such purpose. I understand that such photographs of me and/or my child/children/ward(s) remain the property of ***Shrewsbury Volunteer Fire Company Inc., Glen Rock Hose & Ladder Co., and Rose Fire Company No. 1.***

Signature of parent or guardian

Date

MINOR CHILD RELEASE, LIABILITY WAIVER AND HOLD HARMLESS STATEMENT FOR PARTICIPATION IN THE SOUTHERN YORK COUNTY JUNIOR FIRE CAMP PROGRAM SPONSORED BY *Shrewsbury Volunteer Fire Company Inc., Glen Rock Hose & Ladder Co., and Rose Fire Company No. 1*

I understand that there are certain risks involved with participating in the activity identified above. On behalf of my minor child identified below, I hereby RELEASE, DISCHARGE AND AGREE TO HOLD HARMLESS ***Shrewsbury Volunteer Fire Company Inc., Glen Rock Hose & Ladder Co., and Rose Fire Company No. 1***, IT'S OFFICERS, AGENTS, VOLUNTEERS, ASSISTANTS, AND EMPLOYEES, from any and every claim, demand or action of any kind arising due to bodily injury, illness, death and/or property damage resulting from any incident which may occur to my minor child as a result of my minor child's participating in the County's activities. This RELEASE, LIABILITY WAIVER AND HOLD HARMLESS STATEMENT does not apply if such injury, death or damage is caused by the willful, reckless or gross negligence of ***Shrewsbury Volunteer Fire Company Inc., Glen Rock Hose & Ladder Co., and Rose Fire Company No. 1***, it's officers, agents, volunteers, assistants or employees.

Signature of parent or guardian

Date

Printed name of parent or guardian

Printed name of minor child

Health History Form
Junior Firefighter Camp

Please return this form with event registration and provide any changes to this form to event health personnel upon participant's arrival. Provide complete information so that the staff can be aware of your needs.

Name: _____

Home Address: _____ City: _____ State: ____ Zip: _____

Gender: Boy Girl Birth date: ____/____/____ Age at event: _____

Parent/Guardian Name: _____

Address: (If different from above) _____ Apt: _____ City: _____ State: ____ Zip: _____

Home Phone: _____ Work phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact Name: _____ Emergency Contact Phone: _____

Emergency Contact Relationship to Camper: _____

Only the following people may pick my child up from the Fire Camp: _____

Insurance information: Is the participant covered by family medical/hospital insurance? Yes No

If so, indicate carrier or plan name: _____ Group# _____

Insurance carrier address: _____ Phone: () _____

Allergies: List all known. Describe reaction and management of the reaction. *If more room is needed a supplemental page may be attached/added

Medication allergies (list):

Food allergies (list) peanuts, etc.:

Other allergies (list) include insect stings, hay fever, asthma, animal dander etc.:

Does NOT eat: Red Meat Pork Dairy Products Seafood Eggs Other _____

Use this space to provide any additional information about the participant's behavior and physical, emotional, or mental health about which the camp should know.

Name of family physician: _____ Phone: _____

SYC JUNIOR FIRE CAMP RULES

1. No one may leave camp without permission. If you leave, written permission is required.
2. No alcohol, firecrackers, weapons, tobacco or drugs are permitted in camp. Violators will be sent home without refund.
3. All campers will be at their assigned location at all times.
4. Campers are not permitted in others' belongings.
5. Campers will be charged for the cost of any physical facility and/or resource damage for which they are responsible.
6. Campers are not permitted to have cell phones in camp. A phone is available for necessary calls.
7. Campers shall follow all health and safety regulations.
8. *SYC Fire Camp (Shrewsbury Volunteer Fire Company Inc., Glen Rock Hose & Ladder Co., and Rose Fire Company No. 1)* is not responsible for loss, theft, or damage of personal items brought to camp. Please leave valuable items at home.
9. Programs and activities offered by the *SYC Fire Camp* are available to all persons without regard to race, color, sex, disability, religion, age, veteran status, political beliefs, sexual orientation, national origin, or family status.

SYC JUNIOR FIRE CAMP GOALS

LEADERSHIP - Campers develop leadership skills and receive encouragement from their parents, peers and professionals to become engaged members of their communities.

TRAINING - Campers acquire insight and interest in becoming long-term members of the emergency services field.

COMMITMENT - Campers gain an increased awareness for volunteering and supporting the fire/emergency services.

SUPPORT - Campers become trained junior firefighters who can aid departments in accomplishing non-emergency tasks.

CAMARADERIE - Campers make new friends and create peer groups with people from various states, interest areas and backgrounds.

FUN - Campers enjoy exciting activities.

Learn what it takes to be a firefighter!

Interested in learning more about firefighting and emergency medical services?

SYC Junior Firefighter Camp provides training from firefighters in the areas of:

- *CPR and First Aid*
- *Hoseline Operations*
- *Ground and Aerial Ladders*
- *Self-Contained Breathing Apparatus*
- *Aircraft Rescue Firefighting*
- *Wildland Firefighting*
- *Personal Protective Equipment*
- *Fireground Operations*
- *Leadership and Team-Building*
- *Vehicle Extrication and Vehicle Fires*
- *Wilderness Search and Rescue*
- *Rope Rescue*

Camp Requirements and Registration

Registration Deadline: Friday, July 8, 2022 **Ages: 12 - 17**

Price per participant for the week: **\$100.00 and \$90.00 for each additional sibling**

(Includes daily lunch, field trip to York Fire Museum, and one camp T-shirt.)

Necessary Equipment will be provided:

- Helmet, eye protection and gloves

Participants must wear:

- Provided Camp T-shirt
- Close-toed shoes
- Long pants