

Apply for a spot in the 2020 Camp Fire Summer Youth Camp Camp Fire GIRLS August 3-7, 2020 Camp Fire BOYS August 17-21, 2020

Applications available on-line at www.cityofflint.com, by email at cedwardsclemons@cityofflint.com and at Fire Station #1 located 310 E. Fifth St. Flint, MI 48502 Call Deputy Chief Edwards-Clemons at 810.762-7336 ext. 5225 for information. Camp Fire will be held M-F- 8 a.m. - 4 p.m. * Younger applicants may be accepted.

Camp Fire will provide young girls and boys with a safe, dynamic, interactive and physically challenging environment to gain strength and knowledge while building confidence and leadership skills.













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Camp Fire Summer Youth Camp

At the City of Flint Fire Department, we have served members of the Flint Community for over 160 years. The Flint Fire Department will hold the second annual "Camp Fire" Summer Youth Camp for girls and boys ages ***12-17 years** old that reside in Flint and surrounding communities. *****Younger ages may be accepted.

Camp Fire was created in response to the specific priority outlined in the City's Imagine Flint Master Plan. It states, "Through partnership and coordinated effort and resources, Flint youth will thrive and have values and guidance to become productive, engaged adults.

Camp Fire will provide young girls and boys a safe, dynamic, interactive and physically challenging environment to gain strength and knowledge while building confidence and cultivating their leadership skills.

Our Mission

Camp Fire mission is to provide young girls and boys a safe, dynamic, interactive and physically challenging environment to gain strength and knowledge while building confidence and cultivating leadership skills. We will accomplish our mission by providing State Certified Fire Instructors and staff to provide training in firefighting and EMS and by continuously evaluating and updating the program to meet the needs of the cadets to reflect current NFPA safety and training standards.

Our Goal and Aim

Our goal is to provide girls and boys with a comprehensive, intensive overview of the firefighting profession. The program is very physical, hands-on and intense. Girls and boys will have the opportunity to do things that they may never have done before and overcome obstacles through strength, training and determination. Cadets will gain a confidence and inner strength that comes through accomplishment and success. Our aim is to provide this camp free of charge to participants within the Flint and surrounding areas.

Statement of Need

Research consistently proves the positive, long-term benefits of positive images and personal achievement. Studies point to increases in confidence and performance as well as decreases in risky behavior in students participate in youth programs.

Camp Fire will foster skills that are critical to success in college, career, and in everyday life in a safe, dynamic, interactive and physically challenging environment. Participants will gain strength and knowledge while building confidence and leadership skills.

It is our hope that the long-term effect of the program will improve academic performance, school attendance, graduation rates and attitudes. We believe that showing youth what they are capable of helps them recognize and unleash their potential, which can change the trajectory of their life.

Nationwide, according to the US Bureau of Labor Statistics (2017) 30.6% of EMTs, 13.6% of police and only 3.5% of fire professionals are women, leaving girls with few role models to inspire and guide. Camp

Fire is an effort to bridge that gap by helping girls to: discover their abilities and interests connect with a network of mentors and be inspired to take action in making the world a better place through public service.

Target Population

Camp Fire will benefit youth from families in Flint and the surrounding area that are at least 51% are low/moderate income persons as defined by the U. S. Department of Housing and Urban Development (HUD).

Program Components

Summer camp is one of the most powerful youth development experiences that a child can have. Camp Fire will foster skills that are critical to success in college, career, and in everyday life.

These skills include:

Monday - Communication Skills Tuesday - Critical Thinking Wednesday - Independence Thursday - Collaboration Friday - Leadership

A typical day at Camp Fire:

- 8:00 a.m. Check-In
- 8:30 a.m. Morning Group Session
- 9:00 a.m. Training & Education
- 10:45 a.m. Break
- 11:00 a.m. Team Building Activity
- 12:00 p.m. Lunch
- 1:30 p.m. Training & Education
- 2:40 p.m. Team Building / Practical Exercise
- 3:30 p.m. Physical Training (PT)
- 4:00 p.m. End of day session and Check-out

Anticipated accomplishments:

Camp Fire will serve 30 girls and 30 boys. Participants will be evaluated at the beginning and end of camp to measure knowledge in five key areas:

- 1. Leadership Skills
- 2. Physical Ability
- 3. Communication Skills
- 4. Critical Thinking
- 5. Collaboration

Evaluation plan and performance measurements:

Camp Fire will assess participants during a pre and post interview process. Performance measurements are based on:

- Personal safety
- Leadership skills
- Ability to work with others
- Physical Training/Growth
- Communication Skills
- Attitude

General Information

Camp Fire Youth Camp is open to girls and boys age *12-17 years old with a maximum limit of 30 participants per day. The ratio of firefighters-per-participant is approximately ten to one. Sessions are **gender** base. Participants are expected to complete the full week of training in order to receive their badge.

Program Dates

Week 1: August 3-7, 2020 GIRLS Week 2: August 17-21, 2020 BOYS

Registration Forms Available:

On line at the City of Flint website: <u>www.cityofflint.com</u> and at Fire Station #1 Fire Administration Office, 310 E. Fifth St. Flint, MI 48502 (8 a.m. – 4 p.m.). Please submit all completed forms to the City of Flint Fire Department at Fire Station #1 located 310 E. Fifth St. Flint, MI 48502 or on-line at <u>cedwards-</u> <u>clemons@cityofflint.com</u>.

Location and Times (Day Camp Hours)

Camp Fire Youth Camp is held at Fire Station #1 located 310 E. Fifth St. Flint, MI 48502. Camp Fire for girls will begin on Monday August 3, 2020 and Camp Fire for boys will begin August 17, 2020.

Hours:

Hours of activity are between 8:00 a.m. and 4:00 p.m. Staff is available from 7:30 a.m. to 5:00 p.m. Parents must provide transportation to and from camp.

Please call 810.762.7344 and leave a message if your child will be absent. NOTE: Half-day attendance is NOT permitted. Camp Fire contact number beginning August 2, 2020 is (810) 766.3995.

Cancellation Policy

• All cancellations must be received, in writing, or via e-mail, at least one week before the start of the session. This will enable staff tine to fill this position in the camp.

- Cancellations may be submitted via email at cedwards-clemons@cityofflint.com.
- Availability is based on a completion of the interview process and staff review.
- All registrations are handled through the Office of the Deputy Chief at 310 E. Fifth St. Flint, MI 48502.

*(Exceptions may be made)

Disciplinary Actions

To protect the safety of the other children and staff progressive disciplinary action may be taken by camp staff when campers consistently disregard camp rules and policies.

Disciplinary action occurs in the following order.

- 1. Verbal reminder
- 2. "Time-out", when child is asked to sit quietly for 10 minutes
- 3. Contact parent(s)-guardian(s) to reinforce rules
- 4. Contact parent(s)-guardian(s) to pick up child for remainder of the day or week.

A.D.A. (Americans with Disabilities Act)

It is our intent to provide reasonable accommodations to assist people with disabilities to participate in our programs, and use our facilities and services. Please let us know in advance if your child needs special accommodations by calling 810.762.7336, Extension 5225, Monday through Friday, 7 a.m. to 5 p.m.

Health and Waiver Forms

Health and waiver forms for each participant are included in this packet and MUST be fully completed and turned in before any child may attend day camp. Additionally, a health history review must take place with camp staff the first day a child attends camp.

Gratuities

Day camp counselors may not accept any gifts or gratuities.

Staffing Day camp

Camp Fire staff is composed of firefighters and adult volunteers. Students selected as staff usually are working on degrees in education, parks and recreation, or other related fields. Non-students are either retired firefighters or other individuals qualified to work with children. Staff is composed of both females and males.

Lunches

Lunch will be provided daily through the Food Bank of Eastern Michigan.

Clothing

Please send children in weather-appropriate clothing, with tennis shoes that may get wet and dirty. Play and activities extend to the back lawn of Flint City Hall so long or sweat pants are recommended. Please write your child's name on all items. No sandals or open-toed shoes permitted.

Off-site Activities

The day camp uses vans and busses for field trips beyond walking distance. Parents will be notified the day before about off-site activities. The final activity will be held Saturday August 22, 2020 (to be determined). Camp Fire Participants (boys & girls) will attend the final activity together. The final awards ceremony will be held at Fire Station #1 located 310 E. Fifth St. Flint, MI 48502. Family and friends are invited to attend and celebrate the participants' accomplishments.

CAMP FIRE YOUTH CAMP APPLICATION



Session I: Camp Fire Girls August 3-7, 2020 Session II: Camp Fire Boys August 17-21, 2020

CADET: First	Middle	Li	ast		Gender:
School Name		Grade	Birth	date/_	/ Age
Street Address					
Town/City	State	Zip code _		_ Child's Home	Phone
Circle T-Shirt Size	small	medium	large	x-large	xx-large
Parent/Guardian Parent/Guardian First	#1			Ms	. Mrs. Mr. Other
Street Address					
Town/City	State Zip Coo	de Hon	ne Phone	V	Nork Phone
Cell phone		E-n	nail		
Occupation		Employe	er		
<i>Parent/Guardian</i> First				Ms. Mrs.	. Mr. Other
Street Address					
Town/City	State Zip coo	le Home	Phone	Daytim	e phone
Cell phone			E-mail _		
Occupation		_ Employer			
Child lives with:		Н	ousehold Si	ize #:	
Household Incom	ne: (for research	purposes only)		

First Name	Last Name	Home Phone	e Wor	k Phone
Cell Phone	Email	Rel	ation to child	
Emergency Conto	act #2			
First Name	Last Name	Home Phone	Wor	k Phone
Cell Phone	Email	Rela	ation to child	
Please list individ	uals in addition to parents	/guardians who are permitte	d to nick un vou	ır child:
1:	2:	3:		
Medical Release	Information/ Insurance In	formation		
		_ Name of Health Insurance P		
Address		alPreference		
Address Phone	Hospit			
Address Phone Please list any me	Hospit edical problems, including a	alPreference	nedication (i.e. [<u>Should parame</u>	Diabetic, Asthi
Address Phone Please list any me Seizures).	Hospit edical problems, including a	alPreference any requiring maintenance m	nedication (i.e. [Diabetic, Asthi dic by called? No
Address Phone Please list any me Seizures). <u>Medical Problem</u>	Hospit edical problems, including a	alPreference any requiring maintenance m <u>uired treatment</u>	nedication (i.e. [<u>Should parame</u> Yes	Diabetic, Asthi dic by called? No
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Address Phone Please list any me Seizures). <u>Medical Problem</u> Is your child prese reason?	Hospit edical problems, including a <u>Req</u> 	alPreference any requiring maintenance m <u>uired treatment</u>	nedication (i.e. I <u>Should parame</u> Yes Yes Yes	Diabetic, Asthr dic by called? No No No
Address Phone Please list any me Seizures). <u>Medical Problem</u> Is your child prese reason? Yes No If yes Is your child allers	Hospit edical problems, including a <u>Req</u> ently being treated for an i s, explain: gic to any type of food or n	alPreference any requiring maintenance m <u>uired treatment</u> njury or sickness, or taking a	nedication (i.e. I <u>Should parame</u> Yes Yes Yes	Diabetic, Asthr dic by called? No No No
Address Phone Please list any me Seizures). <u>Medical Problem</u> Is your child prese reason? Yes No If yes Is your child allers Yes No If yes Does your child re	Hospit edical problems, including a <u>Req</u> ently being treated for an i s, explain: gic to any type of food or n , explain: equire a special diet or rest	alPreference any requiring maintenance m <u>uired treatment</u> njury or sickness, or taking a 	nedication (i.e. I <u>Should parame</u> Yes Yes Yes	Diabetic, Asthr dic by called? No No ication for any

In case of medical emergency contact:

	Name	Phone #	Relationship to Child
Contact #1			
Contact #2			
Contact #3			

I understand that I will be notified in the case of a medical emergency involving my child. In the event that I cannot be reached, I authorize the calling of a doctor and the providing of necessary medical services in the event my child is injured or becomes ill.

Parent's/Guardian's Initials _____

I understand that the City of Flint/City of Flint Fire Department/Camp Fire Flint Instructors will not be responsible for the medical expenses incurred, but that such expenses will be my responsibility as parent/guardian.

Parent's/Guardian's Initials _____

Please circle how you heard about Camp Fire Flint Summer Fire Camp

City of Flint website School (______) Word of Mouth Flyer Other_____

Terms of Agreement

Photo Release

I hereby give permission for my child to be photographed during **Camp Fire Flint Summer Fire Camp**. I understand the photos will be used to keep a journal of activities, to share during power point presentations and/or reports to our residents and for promotional purposes including flyers, brochures, newspaper and on the internet. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed, I do not expect compensation and that all photos are the property of Camp Fire Flint Summer Fire Camp.

Parent's/Guardian's Initials

Transportation Release

I hereby give permission for the transportation of my child to off-site training (i.e. YMCA, other fire stations, etc.) by modes of transportation agreed to by the camp organizers. Parents will be notified.

Parent's/Guardian's Initials _____

The Camp Fire Flint Summer Fire Camp, its organizers and the City of Flint are not responsible for lost or damaged personal property. All scheduled events are subject to change. Children's' photos and quotes may be used for publicity purposes. In case of an emergency, and if a family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e. EMT, Paramedic, First Responder, and/or Physician).

Guardian Signature:	Date:	
-		

Printed Name of Parent/Guardian_____



The success of Camp Fire Flint depends on the active participation and input of its cadets. Please answer the pre-questionnaire thoughtfully. Your ideas will help chart the future of Camp Fire Flint.

Camp Fire Summer Youth Camp Pre-Questionnaire (Cadet)

- 1. How would you describe yourself?
- 2. What do you like to do?
- 3. Why do you want to participate in Camp Fire Flint?
- 4. What excites you most about attending Camp Fire Flint?
- 5. Are you attending because of your parents?

I certify that the information contained in this application is correct to the best of my knowledge.

Signature of Applicant _____

Signature of Parent/Guardian:

* Camp Fire Flint does not and shall not discriminate on the basis of race, color, religion, gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status in any of its activities or operations. These activities include, but are not limited to, hiring and firing of staff, selection of volunteers and vendors, and provision of services. We are committed to providing an inclusive and welcoming environment for all camp cadets, members of our staff, volunteers, and vendors.

CAMP FIRE SUMMER DAY CAMP RELEASE AND WAIVER

As the parent/guardian of the applicant, I hereby grant permission for the below-mentioned child to participate in the Camp Fire Summer Day Camp and represent that she/he is physically able to participate in camp activities. I thereby release the City of Flintⁱ and Camp Fire, and its officials, employees, staff members, and volunteers from all claims resulting from illness, injuries, or other incidence that may be sustained by the child during attendance at the camp. In the event of illness or injury, I hereby authorize the employees, staff members, and volunteers of the camp to obtain medical assistance or any other appropriate treatment for the below-mentioned child.

In consideration of the City of Flint and Camp Fire services, property, and/or equipment I enable the below-named minor child to participate in activities and hands-on learning. I agree as follows:

I UNDERSTAND that camp activities involve Firefighter Evolutions, EMS training, and Physical training.

I AGREE that the camper's participation in camp activities is voluntary.

I AGREE to release the City of Flint and Camp Fire from all claims for money damages.

I AGREE to release the City of Flint and Camp Fire from all unintended harm to any child resulting from day camp activities.

I AGREE that the City of Flint and Camp Fire may document my child's participation in this event on video or by photograph. I grant the City of Flint and Camp Fire use of any such recordings for promotional materials ONLY. Such recordings are the sole property of the City of Flint and Camp Fire.

I **UNDERSTAND** that the City of Flint and Camp Fire encompasses all of their officials, employees, agents, personnel, volunteers, sponsors, and affiliated organizations.

I **DECLARE** that I am a parent or legal guardian of a minor and I consent to the child's participation and **AGREE** to all of the provisions and to assume all of the obligations on the child's behalf.

By **SIGNING BELOW**, I forever release and discharge the City of Flint and Camp Fire, all their officials, officers, directors, employees, agents, personnel, volunteers, sponsors and affiliated organizations for any liability that may occur during my child's participation in Camp Fire. For themselves and their family, the undersigned has read and voluntary signs the release and waiver of liability and indemnity agreement, and further agrees that no oral representations, statements, or inducements apart from the forgoing written agreement have been made.

Participant Information

Participant Name	
Parent(s)/Guardian(s) Name	
Home Phone	Alt/Cell Phone

Parent/Guardian Signature

Date

*The person signing this agreement must be 18 years of age or older and should present a driver's license or other proof of age. A copy of the child's birth certificate should also be provided.

ⁱⁱ The term "City of Flint" refers to the City of Flint, a Michigan Municipal Corporation, and its agents, employees, officers, divisions, departments, volunteers, boards, commissions, multiple member bodies, and their insurers.

Submit all correspondence and applications to: Camp Fire Flint Summer Youth Camp 310 E. Fifth St. Flint, MI 48502 or via email at cedwards-clemons@cityofflint.com. Please direct all questions to Deputy Chief Edwards-Clemons via email or by calling (810) 762-7344.