



# Savannah Impact Program

## Beyond the Badge Girls & Boys Police Camp

### Youth Application Packet

#### Section 1: Applicant Information

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name (if under 18): \_\_\_\_\_

Primary Phone: \_\_\_\_\_

#### Section 2: Education & Interests

School Name: \_\_\_\_\_

Current Grade: \_\_\_\_\_



List any clubs, sports, or activities you participate in: \_\_\_\_\_

\_\_\_\_\_

What are your interests or hobbies?

\_\_\_\_\_

Why would you like to attend Beyond the Badge Camp?

\_\_\_\_\_

## Section 3: Medical Information

Primary Care Physician: \_\_\_\_\_

Physician Phone: \_\_\_\_\_

Emergency Contact (other than parent/guardian):

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

Does the applicant have any medical conditions?

- Yes
- No If yes, please explain:



**Allergies (food, medication, environmental):**

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**Medications currently taken:**

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**Any physical limitations or activity restrictions?**

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## **Section 4: Enrollment Release & Consent**

I understand that participation in the Beyond the Badge Girls & Boys Police Camp involves physical activity, outdoor events, and interactive learning experiences. I acknowledge that the Savannah Impact Program (SIP) staff and volunteers will take all reasonable precautions to ensure safety.

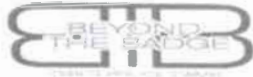
I give permission for my child/myself to participate in all camp activities unless otherwise noted.

**Signature of Parent/Guardian (if under 18):**

\_\_\_\_\_ Date: \_\_\_\_\_

**Signature of Applicant:** \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_



## Section 5: Parent/Guardian Consent (If Applicant Is Under 18)

I, the undersigned parent/guardian, give permission for my child to attend and participate in the Beyond the Badge Police Camp. I understand that:

- SIP staff and law enforcement personnel will supervise all activities.
- Transportation may be provided for certain activities.
- Photos or videos may be taken for program documentation and promotional purposes.

I consent to emergency medical treatment if necessary and authorize SIP staff to act in the best interest of my child.

**Parent/Guardian Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Section 6: Applicant Consent (Youth Signature)

I agree to participate fully in the Beyond the Badge Camp, follow all rules, respect staff and other participants, and represent myself and my community positively.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



## **Section 7: Savannah Impact Program Waiver, Release & Hold Harmless Agreement**

I, the undersigned participant or parent/guardian of the participant, acknowledge and agree to the following:

1. Participation in the Beyond the Badge Camp is voluntary.
2. I understand that activities may include physical exercise, outdoor recreation, team-building challenges, and demonstrations involving law enforcement equipment.
3. I release and hold harmless the City of Savannah, Savannah Police Department, Savannah Impact Program, its officers, employees, volunteers, and agents from any and all liability for injuries, damages, or losses that may occur during participation in camp activities.
4. I assume full responsibility for any risk of bodily injury or property damage arising from participation.
5. I understand that photos or videos may be taken and used for program promotion unless I provide written notice opting out.
6. I agree to comply with all rules, safety instructions, and staff guidance.

**Participant Name:** \_\_\_\_\_

**Parent/Guardian Name (if under 18):** \_\_\_\_\_

**Participant Signature:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



# **Beyond the Badge Girls & Boys Police Camp**

## **Camp Rules & Expectations Sheet**

The Beyond the Badge Camp is designed to be a safe, fun, and positive experience for all participants. To ensure a great week for everyone, all campers must follow the rules and expectations listed below.

### **1. Respect for Staff & Campers**

- Treat all staff, officers, volunteers, and fellow campers with respect at all times.
- Listen and follow directions the first time they are given.
- Use kind and appropriate language.
- Keep hands, feet, and objects to yourself.

### **2. Participation & Engagement**

- Campers are expected to participate in all scheduled activities unless excused for medical reasons.
- Stay with your assigned group at all times.
- Give your best effort and maintain a positive attitude.

### **3. Behavior Expectations**

- No bullying, teasing, or harassment of any kind.
- No fighting, rough play, or unsafe behavior.
- No possession of weapons, tobacco, vapes, alcohol, or illegal substances.
- No inappropriate physical contact.

### **4. Attendance & Punctuality**

- Campers must arrive on time and be picked up promptly at dismissal.
- If a camper must leave early, a parent/guardian must notify staff in advance.



## ★ 5. Dress Code

- Wear comfortable clothing appropriate for physical activity.
- Closed-toe shoes are required.
- Camp T-shirts (if provided) must be worn on designated days.
- No clothing with inappropriate language, images, or references.

## ★ 6. Electronics & Personal Items

- Cell phones must remain put away during activities unless staff gives permission.
- SIP is not responsible for lost, stolen, or damaged personal items.
- No toys, gaming devices, or valuables should be brought to camp.

## ★ 7. Safety Rules

- Follow all safety instructions from staff and officers.
- Stay within designated camp areas.
- Report any injury, unsafe behavior, or concern to staff immediately.
- Use equipment only as instructed.

## ★ 8. Transportation Expectations

- Campers must follow all rules while riding in SIP or City of Savannah vehicles.
- Seatbelts must be worn at all times.
- No loud, disruptive, or unsafe behavior during transport.

## ★ 9. Meals & Hydration

- Campers should bring a water bottle daily.
- Lunch and snacks must be eaten in designated areas.
- Clean up after yourself.

## ★ 10. Consequences for Rule Violations

Depending on the severity of the behavior, consequences may include:

- Verbal warning
- Loss of activity privileges
- Parent/guardian notification



- Behavior contract
- Removal from camp activities
- Dismissal from camp without refund

SIP staff and officers reserve the right to remove any camper whose behavior threatens the safety or well-being of others.

## **Camper Acknowledgment**

I have read and understand the Beyond the Badge Camp Rules & Expectations. I agree to follow these rules and participate respectfully.

**Camper Name:** \_\_\_\_\_

**Camper Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **Parent/Guardian Acknowledgment**

I have reviewed the camp rules with my child and understand that failure to follow expectations may result in removal from camp.

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



# **Beyond the Badge Girls & Boys Police Camp**

## **Youth Behavior Contract**

This Behavior Contract is designed to ensure a safe, respectful, and positive camp experience for all participants. All campers must read and agree to the expectations below.

### **1. Respect & Conduct**

I agree to:

- Treat all staff, officers, volunteers, and campers with respect.
- Use appropriate language at all times.
- Keep my hands, feet, and objects to myself.
- Follow directions the first time they are given.

### **2. Participation**

I agree to:

- Participate in all activities unless excused for medical reasons.
- Stay with my assigned group at all times.
- Maintain a positive attitude and try my best.

### **3. Safety**

I agree to:

- Follow all safety rules and instructions.
- Report unsafe behavior or injuries to staff immediately.
- Use equipment only as instructed.
- Avoid running, pushing, or rough play.



## **4. Prohibited Behaviors**

I understand that the following behaviors are not allowed:

- Bullying, teasing, or harassment
- Fighting or threatening behavior
- Possession of weapons, tobacco, vapes, alcohol, or illegal substances
- Inappropriate physical contact
- Leaving the group or camp area without permission

## **5. Electronics**

I agree to:

- Keep my phone and electronic devices put away unless staff gives permission.
- Understand that SIP is not responsible for lost or damaged items.

## **6. Transportation**

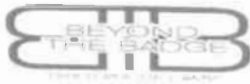
I agree to:

- Follow all rules while riding in SIP or City of Savannah vehicles.
- Wear a seatbelt at all times.
- Remain seated and quiet enough for the driver to operate safely.

## **7. Consequences**

I understand that if I break the rules, consequences may include:

- Verbal warning
- Loss of privileges
- Parent/guardian notification
- Written behavior plan
- Removal from activities
- Dismissal from camp



## Camper Agreement

I have read and understand the Behavior Contract. I agree to follow all rules and expectations during Beyond the Badge Camp.

**Camper Name:** \_\_\_\_\_

**Camper Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## Parent/Guardian Agreement

I have reviewed this contract with my child and understand that failure to follow expectations may result in removal from camp.

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_