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**AMHERST AND UMASS POLICE**

**YOUTH ADVENTURE ACADEMY**

The Amherst Police Department and the University of Massachusetts Police Department seek to provide innovative and effective programs for the young people in our community. The Youth Adventure Academy is such a program! It is designed to establish a positive relationship between the Amherst Police, UMASS Police, and the youth in our community. All Academy counselors are Amherst and UMASS Police Officers. Students **entering 6th, 7th or 8th grade are eligible to attend**. The cost is FREE and the academy size is limited to 20 participants, so preference will be given to **Amherst residents and those youth with an affiliation to UMASS** (ex. parents/guardians are employees or students at UMASS). The Amherst and UMASS Police Youth Adventure Academy will provide those participating in the program with lunch each day at the UMASS Dining Common.

The goals of the Adventure Academy are:

* To enhance responsible citizenship.
* To provide positive interaction with police officers and to educate young people about the challenges and responsibilities of police work.
* Provide team building activities at our Adventure Ropes Course located at the summit of the Norwottuck range.

The 2022 Amherst and UMASS Police Youth Adventure Academy is a ONE week program, being held **Monday, July 25, 2022 to Friday, July 29, 2022 from 8:30AM to 4:00 PM**. All students will need to have transportation to the UMASS Police Department each morning for an 8:30 AM start, and picked up each afternoon from the UMASS Police Department promptly at 4:00 PM. Students will attend morning classroom sessions with lectures, role-plays, and interactive demonstrations by police officers of the Amherst and UMASS Police Departments in the areas of law, crime scene, defensive tactics, patrol procedures, and internet safety to name just a few. These classes will be held at both the Amherst and UMASS Police Departments. Most afternoon sessions will be held at the Adventure Based Ropes Course at the Norwottuck Range where attendees will promote teamwork, communication skills development and strategy development with the students. A typical high ropes course element sees participants harnessing up and climbing 25-70 feet off the ground, where they may traverse across cables and logs, or swing and zip through the air. Our Low Challenge Courses are used to provide participants with a uniquely different series of mental and physical activities that will challenge individuals and groups. *For more information on our ropes course, see the Ropes link on our webpage:* [*www.amherstpd.org*](http://www.amherstpd.org)*.*

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To apply for this year’s Amherst and UMASS Police Youth Adventure Academy you must:

* Complete the application/liability form and mail it to the address below.
* In addition children must write a paragraph on why they wish to attend. This is to be submitted along with your application.

You will be contacted with a confirmation, as well as provided with additional information.

Forward any questions to Amherst Officer Yvonne Feliciano at 413-259-3311 or email felicianoy@amherstma.gov; or contact UMASS Officer Brian Kellogg at 413-545-2121or email bkellogg@admin.umass.edu.

Mail Application and Release of Liability as well as paragraph from attendee to: Amherst Police Department, Attn: Officer Yvonne Feliciano, 111 Main Street,

Amherst, MA 01002

**\*\*\*\*\*\*\*Applications and Release of Liability forms must be received by JULY 1, 2022\*\*\*\*\*\***



2022 Amherst and UMass Police

Youth Adventure Academy Application

July 25, 2022 to July 29, 2022, 8:30 AM to 4:00 PM

**Attention: Parents & Guardians**

**This form MUST be completed in full and signed in ink below in order for your child to participate. A paragraph from your child on why they wish to attend must also be attached. Incomplete applications will not be accepted.**

Child’s First and Last Name

Parent/Guardians *First and Last Name*

Address Apartment Number  City/Zip

Umass Affiliation (if applicable)

Home Telephone Number: Daytime Emergency Telephone Number

Child’s Date of Birth  Age Gender Female/Male School

Shirt Size youth S / M / L or adult S / M / L / XL

Food or other Allergies Yes No If yes, please list all allergies**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Medical Concerns Yes No If yes, please explain

**Permission of the Parent or Guardian is Mandatory for Applicants**

(Please Print) I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am the Parent/Guardian of: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**(Print Child’s Full Name) (hereinafter referred to as the CHILD), I am over eighteen (18) years of age and reside at (Print Your Address)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**. In consideration of and for the permission and authority of my CHILD to participate in the Amherst Police Adventure Academy, which includes classroom instruction, field trips, and physical activities, I hereby release and forever discharge, and shall hold harmless and indemnify the Town of Amherst, MA Police Department, the Town of Amherst, MA, University of Massachusetts at Amherst Police Department, the Trustees of the University of Massachusetts and its agents, servants and employees (collectivity hereinafter referred to as the HOST) from all actions, causes of action, suits, debts, sums of money, accounts, damages, judgments, claims and demands whatsoever which I or my CHILD, or our heirs, executors, administrators, successors and assigns may have now or in the future against the HOST arising out of my Child’s participation in the Amherst and UMASS Police Youth Adventure Academy including, but not limited to the aforementioned activities and any acts related thereto. This release may not be changed orally.

**Parent / Guardian – You MUST Sign Your Name in Ink on the Line Below**

(Application will not be accepted if not accompanied by Parent/Guardian signature)

􀀢Please Sign in Ink:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mail Application AND Release of Liability form, as well as paragraph from child to:**

**Amherst Police Department, Attn: Officer Yvonne Feliciano**

**111 Main Street, Amherst, MA 01002**

# Applicant Information and Participant Release of Liability

The Amherst Police Department training workshops use a variety of activities including warm-ups, games, team building initiatives and high and low Rope Course activities. Some of these can be physically demanding, but are designed to be within the capability of anyone who is in reasonably good health. All activities are presented on a “Challenge By Choice” basis. This means that participants choose their own level of participation. Although safety is a very high priority of all The Amherst Police Departments training, there is a risk which must be assumed by each participant that he or she may suffer an emotional or physical injury.

Each participant in an Amherst Police Department workshop is required to have health/accident insurance coverage. The information requested on this form is intended to help inform The Amherst Police Department staff of any pre-existing medical conditions and to help determine if consultation with a physician is recommended prior to participating in a workshop. This information will be kept in strict confidence by The Amherst Police Department and only shared with your permission.

**APPROPRIATE CLOTHING FOR OUTDOOR ACTIVITY MUST BE WORN. NO OPEN TOE SHOES (SANDALS/FLIP FLOPS) WILL BE ALLOWED. BRING A WATER BOTTLE!!!!!**

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sex M\_\_ F\_\_ Date of Birth\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_ Height\_\_\_\_\_\_ Weight\_\_\_\_\_\_\_

Residential Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have Health/Accident Insurance………………………………………………………….no yes

If so, please indicate the name and address of the company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any limiting physical or health disabilities or handicaps (temporary or permanent) that you or your doctor feel would limit your participation in the Amherst Police Adventure workshop? Please circle one…………………………………………………………………………………………..no yes

If you circled yes, please explain.

Are you currently on any medication?…………………………………………………… no yes

If so, please list the medication and what condition it is for.

Do you have any allergies, reactions to medications or any other medical

limitations? no yes

If yes, please explain.

 Have you had surgery in the past year for any condition which may limit your participation?…..no yes

## In the event of an emergency or illness, please indicate who should be contacted.

NAME

RELATIONSHIP: ADDRESS:

HOME PHONE # WORK PHONE #\_\_\_\_\_\_\_\_\_\_\_CELL#

I affirm that the confidential medical information which has been provided is accurate and complete. I understand that failure to disclose this information could affect my own safety and those around me and I agree to hold the **Town of Amherst and the Amherst Police Department, the University of Massachusetts, the Trustees of the University of Massachusetts, and the University of Massachusetts at Amherst Police Department harmless** if full disclosure of pre-existing medical condition has not been provided. In the event of illness or injury, consent is hereby given to provide emergency medical care, hospitalization or other treatment which may become necessary.

I understand that parts of the adventure challenge course offered by The Amherst Police Department may be physically and emotionally demanding. I agree to follow all safety instructions given by the Amherst Police Department Staff/or other staff member during the training workshop. I recognize the inherent risk of injury or disability in the adventure course offered by the Amherst Police Department activities. I understand that each participant must assume the risk of injury or disability that could result from these activities**. I release the Town of Amherst, the Amherst Police Department, and any trained facilitator that is working in conjunction with The Amherst Police Department, the University of Massachusetts, the Trustees of the University of Massachusetts, and the University of Massachusetts at Amherst Police Department from all liabilities for any injury to me from participation in the adventure activities offered by the Amherst Police Department.**
Participant Signature (if 18 years of age or older)

 Date

Parent/Guardian Signature (if participant is under 18 years of age)

 Date

**Name of workshop**: *YOUTH ADVENTURE ACADEMY* **Date of Workshop**: *07/25/2022-7/29/2022*