











Camp Journey

A partnership between the Shelby County Sheriff's Office, Shelby County Board of Education, Helena Police Department and COMPACT.

Mission Statement

The mission of Camp Journey is to:

- · Develop leadership, values, and knowledge in each camper through a highly structured educational and adventurous camp experience.
- · Provide training and messages centered on values and traits, including integrity, character, courage, discipline and teamwork.
- · Educate students on issues they will face through adolescence and equip them with skills to navigate these challenges.
- · Immerse students in an exciting Junior Police/Sheriff's Academy, allowing them to see and experience first-hand what School Resource Officers and Law Enforcement Officers do.
- · Have fun and forge strong relationships between the students and their School Resource Officers throughout the week that will benefit their academic careers and beyond.

Who, When and Where

The camp is designed for rising 6th grade students and will be hosted at the following locations:

- Helena Middle School: June 9th-13th 2025
- Oak Mountain Middle School: June 23rd 27th 2025
- Chelsea Middle School: July 7th-11th 2025

The camp will be held from 8:00am-3:00pm each day. It will be staffed by School Resource Officers from the Shelby County Sheriff's Office, Helena Police Department and COMPACT. Some topics covered will be: Crisis Negotiation, Vape Education, Gun Safety, Team Building, Etiquette, Bullying, Social Media, Crime Scene, Special Guest Speakers, Tactical Response Unit, Wildlife Trailer, and UAV/UAS (drone) and 911 information. Some topics may be adjusted due to speaker availability. The Camp is free of charge, and the only requirement is that the child be dropped off and picked up *ON TIME EACH DAY*. Slots are limited to 50 campers per location.

APPLICATION DEADLINE: MAY 1st 2025 OR UNTIL CAMP IS FULL

CAMP JOURNEY 2025 APPLICATION

Application Deadline: MAY 1st 2025

Helena Middle School: June 9th - 13th 2025

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Please select which camp location you are requesting that your child attend	Please se	elect which	camp location v	vou are requesting	that vo	ur child attend
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Oak Mountain Midd Chelsea Middle Scho			
*Your child must be enrolled in a Shelb		udent for the 202	5-2026 school
year in order to attend at that location.			
	STUDENT INFORMATION		
Student Name:	DOB:	Age:	
School:	Grade:		
Special Instructions/Needs:			
Medication:	Dosage:		
Allergies:			
<u>P.</u>	ARENT CONTACT INFORMATION		
Parent Name:			
Address:	City/Zip:		
Phone – Home:	Work:		
Cell:	(text capable? Yes / No)		
E-Mail:	(accessed dai	ly? Yes / No)	
Primary Emergency Contact:	Relationship:		
Phone 1 & 2:	/		
**Parent or Emergency contact must be	e available at one of these numbers d	uring camp hours*	**
Secondary Emergency Contact:	Relationship:		
Other than parent)			
Phone 1 & 2:	/		
Application continues on page two!			

APPLICATION DEADLINE: MAY 1st, 2025 or until 50 spots are taken

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Parent/Guardian Permission for Camper Consideration

I would like for my child,	, to be considered for Camp Journey. I grant school
officials and counselors permission to release informa	tion about my child in order to properly assess the needs of my
child for this camp. I understand that components o	f the camp will include strenuous physical activity and menta
determination. I agree with and support the mission of	the camp and will be available to conference with officers before
during, and after the camp to discuss my child's progres	s. <u>I understand that daily, timely attendance is a REQUIREMENT</u>
Failure to follow pick up and drop off requirements ma	y result in dismissal from the camp.
(Initial)	
(1116:01)	
Students who fail to follow instructions, respect other	ers or any other just cause determined by the Camp Journey
staff may be dismissed from camp and a guardian wi	ll be required to pick them up immediately.
Initial)	
· · ·)	
Signed	Date



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RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY, AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")

In consideration of participating in our summer camp, I represent that I understand the nature of the camp and my minor child is qualified, in good health, and in proper physical condition to participate in such activities. I acknowledge that if my minor child believes event conditions are unsafe, my minor child will immediately discontinue participation in the Activity.

I fully understand that camp events involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages my minor child incur as a result of my minor child's participation in the Activity.

I hereby release, discharge, and covenant not to sue the Alabama entities of the Shelby County Sheriff's Office, Shelby County Commission, Shelby County District Attorney's Office, Helena Police Department, Vestavia Hills Police Department, Hoover Police Department, Alabaster Police Department, Pelham Police Department, Shelby County Board of Education, City of Alabaster, City of Helena, City of Hoover, City of Pelham, City of Chelsea, City of Vestavia Hills, Board of Education of the City of Alabaster, Board of Education of the City of Hoover, Board of Education of the City of Vestavia Hills, Board of Education of the City of Pelham, Compact, and any other partnering agencies included with Compact, including all of their respective administrators, directors, agents, officers, volunteers, public officers, public employees, other employees, other participants, any sponsors, any contractors, and, if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages on my account caused or alleged to be caused in whole or in part by the negligence of the "releasees" or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability, and assumption of risk I, or anyone on my and/or my minor child's behalf, makes a claim against any of the releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which any may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, AND PARENTAL CONSENT AGREEMENT, understand that I have given up substantial rights by signing it, and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect. In the event of an emergency, I authorize the Shelby County Sheriff's Office, Helena Police Department, Compact and its officers, agents, servants and employees to secure from any licensed hospital, physician, and/or medical personnel any treatment deemed necessary for my immediate care, and I agree that I will be responsible for payment of any and all medical services rendered.

Check one:

I DO grant permission to the above listed agencies, their contractors, and media to publish photos and my child to promote Camp Journey.				
I DO NOT grant permission to the videos to promote Camp Journey.	e above listed agencies, their contractors, and media to publish photos and			
Printed name of participant	Signature of Parent/Legal Guardian			
Date	Printed Name of Parent/Legal Guardian			

We will send a confirmation email when your application is approved

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Recommendation of Student to Summer Camp

TO BE COMPLETED BY A SCHOOL OFFICIAL

MUST BE COMPLETED FOR CONSIDERATION

Name of Person Recon	nmending Student:	
Title:	Organization:	
(Recommendation must be f	From a Non-Family Member)	
I recommend this student t	for summer camp for the following reasons:	
Signed:	Date:	
Return application By May 1st	., 2025	
PLEASE EMAIL or drop off ye enrolled:	our completed application to the SRO assigned to the school to which	your child is
Helena Intermediate School: Oak Mountain Intermediate: Mt Laurel Elementary: Chelsea Park Elementary:	Jeff Murphy: jmurphy@cityofhelena.org Matthew Sulinsky: msulenski@shelbyso.com Carnell Buford: cbuford@shelbyso.com Diane Fenn: dfenn@shelbyso.com	
Forest Oaks Elementary: Vincent Elementary:	Ken Prady: kprady@shelbyso.com Cody Childress: cchildress@shelbyso.com	

Jason Valenti: jvalenti@shelbyso.com

Shelby Elementary: