

Woolwich Township Youth Police Academy

Registration Application Packet

(July 24th – July 28th, 2023)

Packet No.:

Dear Parent:

Thank you for taking an interest in the Woolwich Township Police Department. Please read this application package carefully and review it with your child who is interested in attending the Youth Police Academy sponsored by the Woolwich Township Police Department.

Please understand that the Youth Police Academy is for individuals who have an interest in police service, community, government, and/or a general appreciation for public service. The Youth Police Academy is not a "boot camp" or a type of "scared straight" program for young people who purposely do not follow rules.

The goal of the program is for the cadets to enjoy themselves while gaining an understanding of some of the demands of police training and service. The Youth Police Academy consists of physical training, lectures, presentations and hands-on activities. It will culminate with a graduation for each class. The Youth Cadets will learn how to march and work together as squads. Cadets will learn the importance of being physically fit, staying drug free, teamwork, and respect.

Children attending the Youth Police Academy must at all times adhere to the rules enumerated below in this application package.

Thank you again for your interest in the Woolwich Township Police Department and the Youth Police Academy. Please read the application carefully and complete all required sections. Please be sure to sign your name on the bottom.

PLEASE RETURN THIS COMPLETED APPLICATION AND MEDICAL WAIVER TO DEPARTMENT HEADQUARTERS NO LATER THAN MONDAY, JUNE 1st, 2023.

If you have any questions, you may contact me at 856-467-1667 ext. 1213 or email at averrilli@woolwichtwp.org

Sincerely,

Anthony Verrilli – Lead Instructor Patrol Sergeant Woolwich Township Police Department

Support Staff:

Sgt. Joseph Rieger – Instructor DSG. Chris Beckett – Instructor Cpl. Steve Spithaler – Instructor Cpl. Matthew Boyko – Instructor

Ptl. Lindsay Davis – Instructor

Childs N	Name:										
School Name:					G	Grade This Coming l					
Date of Birth:				Age at Time of	the Acaden	ny:			(Gender:	
Home Address: Street:							Town	1:			
State:		ZIP Co	de:		Home Pho	one:					
Mother/	Guardian N	lame				Ce	:11:				
Email:				Work Address:							
Father/C	Suardian Na	ame				Ce	:11:				
Email:				Work Address:		•					
Person Whom The Child Can Be Released To Other Than Parent/Guardian											
Name						Ce	:11:				
Email:				Work Address:							
Relation	iship To Ch	ild:									
Name						Ce	:11:				
Email:				Work Address:							
Relation	ship To Ch	ild:									
Name						Ce	:11:				
Email:				Work Address:							
Relation	ship To Ch	ild:									
				rt / Short Size Info							
T-Shirt Size: S M DL DXL Short Size: S M DL DXL Medical Information											
List any and all medications including											
dosage:											
D "1	11										
Describe	e any allerg	ies:									
Please describe any concerns or special considerations regarding your child:											
Jiliu.											

Child's Doc Name:	tor's													
Address:										P	hone	#:		
Health Insurance Information														
Subscriber Name:														
Policy #	Policy # Group #:													
	Medical Waiver													
By completing and signing this Youth Camp Academy Application I give my permission for any and all medical attention necessary to be administered to my child in the event of an accident, injury, sickness, etc. until such time as I may be contacted. I also hereby assume the responsibility for payment of any such treatment.														
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I hereby grant the Woolwich Township Police Department and its representatives, permission to use my child's likeness in a photograph in any and all of its publications, including websites, without payment or any other consideration. I understand and agree that these items will become the property of the sponsoring agencies and will not be returned. I hereby irrevocably authorize both departments to edit, alter, copy, exhibit, publish or distribute this photo for purposes of publicizing events and activities administered by said departments for any other lawful purpose. In addition I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my child's likeness appears. I hereby hold harmless and release and forever discharge the both agencies and its representatives from all claims, demands and cause of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization. If I choose not to authorize having my child's photograph utilized in any publications I shall affix a letter stating such to this application at the time of submission of this application. I also understand that I will receive a letter from the co-sponsors prior to the start of the police academy acknowledging that I am not authorizing my child or the child's photograph to be utilized in any publications.														
Youth Police Academy Session														
(All Times are 8:00 AM-4:00 PM Monday – Friday)														
Session I: July 24 – July 28, 2023 No Additional Sessions for the 2023 Calen								s for the 2023 Calendar Year						
Required Parent Orientation I understand that at least one parent/guardian must attend a parent orientation night in order for your child to														
attend this Youth Police Academy. You must select one of the parent orientation nights as listed below. You may choose either date dependent upon which is more convenient for you. Choose One:														
	Parent				_									t Orientation Night B
July 19, 2023 at 6PM – Gen. Harker School No Additional Sessions for 2023 All Youth Academy training will take place at the General Harker School (1771 Oldmans Creek Road,														
Woolwich Twp. NJ, 08085)														

Firearms Safety Lesson

I understand that my child will receive a firearms safety lesson which includes a review and modeling of various types of police firearms. Children attending the Youth Police Academy will have the opportunity to view such police weapons as part of a firearms safety lesson. The children will also get a chance to fire a simunition firearm, which is used for training, and which has a plastic tip. I understand that I can choose not to have my child participate in the Firearms Safety Lesson and he/she can be provided an alternate activity. If I choose not to authorize my child to have the Firearms Safety Lesson, I shall affix a letter stating such to this application at the time of submission of this application. I also understand that I will receive a letter from the academy staff prior to the start of the police academy acknowledging that I am not authorizing my child to participate in the Firearms Safety Lesson.

Youth Camp Police Academy Rules

- 1. Respect yourself and others.
- 2. Raise your hand if you would like to speak.
- 3. When you are acknowledged, you will stand and respond with "yes sir, no sir, yes ma'am and, no ma'am."
- 4. Pay attention to the speaker.
- 5. All participants will follow directions of all police officers and civilian instructors.
- 6. No foul language.
- 7. No "horse play" allowed.
- 8. Academy t-shirt, shorts, and hat are to be worn every day. Please wash daily!

- 9. Video games, iPods, etc. are not allowed.
- 10. No jewelry permitted.
- 11. You are expected to conduct yourself as a gentleman or lady at all times. Proper decorum is demanded.
- 12. If a cell phone is brought to the academy, it must be turned off.
- 13. No teasing, name calling, or harassing fellow classmates.

Parent/Guardian Consent and Waiver

I, the parent/ guardian of the participant listed in the application package, do hereby consent and allow his/her participation in the above program. I agree to indemnify and hold harmless the Township of Woolwich, its agents and employees from any injury or damages I or my child may sustain while participating in this program. I have read this form in its entirety and understand it fully. I understand that if my child does not follow the rules while at the Youth Police Academy he/she he will not be permitted to complete the academy.

I understand that at least one parent or guardian must attend one of the orientation nights as listed in this application package. I also understand that the location in which I drop my child off may not be the same every day and I will receive specific instruction of the exact location where your child will have to be dropped off.

CIRCLE ONE: I DO authorize / DO NOT authorize my child to walk to/from the academy each day. We recommend you only authorize those who are within a close proximity to the Walter Hill School ~ 1 mile. (Academy days will begin and end each day at the General Harker School – 1815 Kings HWY Swedesboro, NJ 08085)

Parent Name:			Date:	
SIGN HERE→	*	Parent Guardian Signature:		