

MCJROTC Future Leaders Camp



6 - 10 June 2022

- Leadership Challenges & Games
 - Physical Training & Games
 - Swimming & Aquatic Sports
 - Drill & Ceremony
 - Land Navigation
- Military Classes & JROTC Introduction
- **Graduation Events and Awards**

"Future Leaders Camp Registration"

(4th – 8th Graders)

Note: Includes 3rd Graders going to 4th Grade & 8th Graders going to 9th Grade

Register at: <https://forms.gle/HHXPxmnAzfFsJzue9>

Contact your MCJROTC instructor for more information:

Major Kenneth A. White

(229) 349-1411

Kenneth.white@dallastown.net

MCJROTC FUTURE LEADERS CAMP

- The enclosed package of material provides information regarding the MCJROTC Future Leaders Camp held on 6 - 10 June 2022 at the High School
- Please complete the enclosed health statement and release of liability
- Cost of the camp is \$90, this covers snacks, water, lunch, rental fees, and a pizza party on Friday 10 June 2022
- Mail the completed forms with cash or check made out to Dallastown MCJROTC for \$90 to:
 - Dallastown Area High School
ATTN: MCJROTC
700 New School Ln
Dallastown, PA 17313
- Payments can also be made online via:
<https://www.eventbrite.com/e/dahs-mcjrotc-future-leaders-camp-2022-tickets-313914435527> *(Add'l online service fees will apply)*
- Payments should be received by Friday, 3 June 2022
- Camp starts 0900 (9am) on Monday, 6 June 2022 in the High School Lobby
 - ***All payments and forms must be received at the start of camp to ensure entry/participation****

Items to bring to the camp:

1. **\$90.00** for the week (if not previously received)
2. **Completed & Signed “Release of Liability” and “Health Statement” Forms** (if not previously received)
3. **Refillable Water Bottle/Source**
4. **Sunscreen**
5. **Swimming Suit and Towel**
6. *Bag lunch each day (optional)**

****Parents feel free to attend and observe outdoor training****

Graduation is on Friday, 10 June 2022 at 1500 (3pm)

MCJROTC FUTURE LEADERS CAMP DALLASTOWN AREA HIGH SCHOOL

RELEASE OF LIABILITY

I, _____ residing at

(Parent or Guardian)

_____ (home address)

understand that Dallastown Area High School, the United States government, the United States Marine Corps, and any agents and employees thereof assume no liability for any personal injury, death, or property damage or loss suffered due to participation in the MCJROTC Future Leaders Camp. This includes injury, loss, or damage due to the willful misconduct, gross negligence, or simple negligence of any agent or employee of the Dallastown Area School District whatsoever. Participation in the MCJROTC Future Leaders Camp includes any or all activities occurring on or off Dallastown Area High School property and/or involving Dallastown Area High School personnel, which relate directly or indirectly to the Future Leaders Camp. This includes, but is not limited to, travel in and around Dallastown Area High School, Dallastown, Pa. In consideration of the opportunity to participate in this camp, I, the undersigned, personally release and hold harmless Dallastown Area High School, the United States government, and the United States Marine Corps, any agents or employees thereof for any personal injury, death, property damage, or loss suffered. I assume all risks related to the participation in the Future Leaders Camp. This agreement is binding on all my assigns, heirs, executors, beneficiaries, and derivative claimants.

(Signature of parent or guardian)

(Date)

(Printed name of parent/guardian)

(Signature of Participant)

(Emergency Contact Phone Number)

(Alternate Emergency Contact Number)

_____ /6 – 10 June 21

(Relationship to Cadet)

(Age of Cadet and Period Covered)

MCJROTC FUTURE LEADERS CAMP DALLASTOWN AREA HIGH SCHOOL

HEALTH STATEMENT

I understand that MCJROTC Future Leaders Camp will be a strenuous and physically demanding period.

I certify that: _____ **(Name of Participant)**
is in good health and has no medical restriction (i.e. allergy, asthma, bone fractures, respiratory condition, blood, heart or kidney disorder, pregnancy, epilepsy, diabetes, sickle cell anemia, venereal diseases) or any physical or mental disorder that would cause hardship or endanger his/her well-being.

Medications taken:

Physical/Medical Restrictions:

(Signature of Parent/Guardian and Date)

I certify that _____ (Participant) who is participating in the MCJROTC Future Leaders Camp has adequate insurance coverage.

(Name of Insurance Company/Policy Number)

(Signature of Parent/Guardian and Date)

(Printed Name of Parent/Guardian)