

## Office of the Sheriff

Charles County, Maryland



Headquarters 6915 Crain Hwy - P.O. Box 189 La Plata, Maryland 20646-0189 301-609-6400

May 04, 2015

Dear Parents/Guardians

The Charles County Sheriff's Office would like to take this opportunity to tell you about the Charles County Kops for Kids camp provided through the Cal Ripken Senior Foundation.

This program will be facilitated by the Charles County Sheriff's Office School Resource Unit. The program is being offered to youths currently in grades 3 through 5 who reside in Charles County. The program takes place at North Point High School Stadium, located at 2500 Davis Road Waldorf, Md. This is a two day event starting Thursday, June 18, 2015 and runs until Friday, June 19, 2015. The program hours are 7:00am to 3:00 pm. Parents of participants will be responsible for transportation to and from North Point High School. There is no cost associated with the Charles County Kops for Kids camp and participation is limited to the first 100 students accepted into the program.

The camp participants will receive football instruction from coaches and special guests. The campers will also compete in a combine and a flag football tournament. The program incorporates life skills classes taken from the Healthy Choices/Healthy Children curriculum. These programs include a variety of real world life lessons to include topics such as sportsmanship, decision making, conflict resolution, communication skills, teamwork, leadership, nutrition, and self management.

No football experience is required to participate. Your camper is encouraged to wear comfortable shoes and dress for the weather (NO CLEATS). Lunch is provided free of cost each day. For the safety of all campers parents will not be permitted to be on the grounds during the camp.

If you would like your child to participate in the Charles County Kops for Kids camp, please complete the enclosed registration form and return it as soon as possible to your child's School Resource Officer.

You will be contacted by June 4, 2015. Completed registrations do not guarantee a spot in the camp.

Should you require any additional information on the Charles County Kops for Kids camp, do not hesitate to contact Sgt. Mike Vaughn at 301-399-0758 or Cpl. Chris Cusmano at 301-753-1759.

Sincerely,

Sheriff Troy D. Berry

Charles County Sheriff's Office

# CCSO FOOTBALL CAMP







PRESENTED BY THE
CHARLES COUNTY SHERIFF'S OFFICE
CHARLES COUNTY PUBLIC SCHOOLS
WALDORF JAYCEES
CAL RIPKEN SR. FOUNDATION

JUNE 18 = 19
7 A.M. TO 3 P.M.
NORTH POINT HIGH SCHOOL
CURRENT STUDENTS IN GRADES 3 -5
LIMITED TO THE FIRST 100
REGISTRANTS



Michael Bibbs, former lowa State football player & Green Bay Packer, will be assisting with the camp in conjunction with his Game Changer Join the Charles County Sheriff's Office for the 2015 Football Camp funded by the Waldorf Jaycees and the Cal Ripken, Sr. Foundation. Students will learn football techniques and lessons in sportsmanship and teamwork. The camp is **FREE**.

#### **CAMP INCLUDES:**

- Football instruction, exercises and a championship game
- Lunch
- A commemorative T-shirt
- Character education including lessons in sportsmanship and teamwork

### FOOTBALL CAMP PARTICIPANT INFORMATION

Child's Name	Age	T-Shirt Size*			
CONTACT INFORMATION	* Please specify youth or adult size S, M, L, o				
Parent/Guardian Name					
Address		StateZip			
E-mail		Phone Number_			
Emergency Contact Name		Phone Number_			

\*\*Registration will not be accepted without the required attached medical forms completed\*\*

ALL COMPLETED FORMS MUST BE RETURNED TO A SCHOOL RESOURCE OFFICER. FOR MORE INFORMATION PLEASE CALL SGT. MIKE VAUGHN AT 301-399-0758 OR CPL. CHRIS CUSMANO AT 301-753-1759.

#### Health History/ General Information: Page 1

Childs Full Name	e:			Cablishidae ne
DOB:	Age:	Gender:		
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Mother's full na	me:			
Telephone: (hon	ne)	(cell)	(work)	
Telephone: (hon	ne)	(cell)	(work)	
Health Insurance	e Company:			
Policy Number:				
Please attach a pho	tocopy of both sides o	f the insurance card. If you do	not have medical insurance en	ter "none" above.
		ase parents cannot be rea		
Alternate contac	ct:	(cell)	_ Relationship:	
Telephone: (hon	ne)	(cell)	(work)	
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Please list any m	nedical concerns or	health history that you fe	eel we should know about	your child:

Page 2:	Health	History	Continued
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Child's full name:		
Medications: List all medications used, including over-the-counter medications: (include medication name, dose, frequency and reason medication is taken) If no medications are taken then write "none" in the space below		
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Bring medications in the original containers and prescription bottles. Make sure that they are NOT expired, including inhalers and EpiPens. The camp nurses are not allowed to administer the medications to your child, except in an emergency situation. Make sure your child is familiar with the medication and how to properly administer it. We request that at the start of the camp day all medications that are brought to camp will be held at the nurse's station and returned to you at the end of the camp day. The nurses will be available to discuss any health concerns you may have about your child.

The majority of children that come to the Nurse's station are for dehydration. Please make sure your child is having a healthy breakfast and drinking water prior to coming to camp. The drink containers should be filled with either water or Gatorade. Please do not allow your child to bring soda to camp. This increases the likelihood of dehydration as they exercise. Water is always available for your child and encouraged readily by all staff members to drink frequently during the day.