



Caddo Parish Sheriff's Office
Youth Firearms Education Camp
(Children 10 – 13 years old)
15639 Hwy 1 South
Shreveport, Louisiana 71115
(318) 681-0735

2023

- ✓ Please provide your child with a non-perishable lunch, **LUNCH IS NOT PROVIDED.**
- ✓ **ALL FORMS MUST BE MAILED** to the following address: CPSO Regional Training Academy, 15639 Hwy 1 South, Shreveport, LA 71115, Attention: Summer Gun Camp. **THE REGISTRATION DEADLINE IS JUNE 22, 2023.** The registration process begins upon receipt of your child's completed registration form, and the registration of your child is successfully completed only when you receive a telephone call confirming his or her registration.
- ✓ **CAMPERS ARE EXPECTED TO WEAR PANTS AND CLOSED TOE SHOES.**
- ✓ **BONUS ACTIVITIES:** After all firearms-related activities and demonstrations are completed, your child will be invited to participate in water activities with other campers. If you'd like your child to participate in the water activities, please provide him/her with a towel, and he/she will be allowed to change into shorts and water shoes, but **NO BATHING SUITS WILL BE PERMITTED.**
- ✓ **TRANSPORTATION WILL BE PROVIDED EACH DAY** to the Caddo Parish Regional Training Academy from the Caddo Correctional Center, which is located at 1101 Forum Drive, Shreveport, LA 71107. Campers are required to arrive no later than 7:30 a.m. each morning and must be picked up by 5:00 p.m. each evening. *If you prefer to provide your own transportation, please have your child to the Regional Training Academy no later than 8:00 a.m. and picked up no later than 4:30 p.m.* Please indicate your transportation preference below.

_____ YES, please provide transportation for my child to and from the Caddo Parish Regional Training Academy. Drop off time is 7:30 a.m. and pick up is 5:00 p.m.

_____ NO, I will provide transportation for my child to and from the Caddo Parish Regional Training Academy. Pick up time is 4:30 p.m.

****Please tell us how you heard about the Youth Firearms Education Camp.** _____ ******

Name of Applicant: _____
Last First M/I

Date of Birth: ____/____/____ Age: _____ T-shirt (Adult Sizes): _____

Participation date selection: Mon. (June 26th) _____ Tues. (June 27th) _____ Wed. (June 28th) _____
(Please indicate 1st & 2nd preferences)

Address: _____

City/State/Zip: _____

Parent/Guardian: _____

Employer: _____

Best Contact Phone Number: _____ Secondary Contact Phone Number: _____

Family Physician: _____ Phone Number: _____

Does your child have allergies? Yes _____ No _____ If yes, please list them below:

Current medications and dosages: _____

Emergency contacts other than parents or legal guardians (please provide at least two):

Name: _____ Best Contact Phone Number: _____

Name: _____ Best Contact Phone Number: _____

Name: _____ Best Contact Phone Number: _____



FLIP for Hold Harmless & Emergency Medical Treatment Information

HOLD HARMLESS AGREEMENT

We/I, the sole _____, parents, legal guardians of the minor child _____, acknowledge this is a binding document and do hereby agree to assume full responsibility for our/my child, and do agree to indemnify, forever defend and hold harmless Caddo Parish Sheriff Steve Prator, Caddo Parish Sheriff's Office, and all their respective officers, deputies, agents, servants and employees or anyone acting on their behalf from any and all such claims, expenses, damages, harm or destruction suffered or accrued by our/my child, including death, arising out of the activities for which our/my child is a participant or observer while on the premises and/or using any part of the training area of the Sheriff's gun safety camp entitled Youth Firearms Education Camp. Among the claims being released are all our/my child's, heirs, executors, parent's, legal guardian's, administrators, and/or signer's claims of negligence, gross negligence, strict liability, demands, rights or causes of action, present or future, even if said claims, expenses, damages, harm or destruction are due partially or wholly from the negligence or gross negligence of the Caddo Sheriff's Office, Caddo Parish Sheriff, and all their respective officers, deputies, directors, agents, servants, and employees or anyone acting on their behalf. Should the Caddo Sheriff's Office and/or anyone acting on their behalf be required to incur attorney's fees and costs to enforce the agreement, We/I, as parents/legal guardians, agree to defend, indemnify and hold them harmless for such fees and costs. We/I specifically acknowledge that firearms training is potentially extremely hazardous, however we/I also specifically acknowledge and agree that the benefits of this firearm safety training greatly outweigh the risks.

We/I, the sole _____, parents, legal guardians of the minor child _____, moreover acknowledge with **our/my initials** below that we/I have reiterated the following with our/my child.

- _____ a. The purpose of this camp is to train children on firearm safety for their first firearm.
- _____ b. Student is advised to follow all safety instructions given and is aware of the risks and hazards inherent to participating in such a course involving the manipulation of firearms and ammunition. Failure to follow safety instructions may result in the student's dismissal from camp.
- _____ c. Student is to treat all firearms as if they are loaded.
- _____ d. Student should never point their weapon at anyone.
- _____ e. Student should never put their finger on the trigger unless they are instructed to do so and/or are ready to fire.

Child's Name (Please Print)

Child's Signature

Parent's/Guardian's Name (Please Print)

Signature

Date

Parent's/Guardian's Name (Please Print)

Signature

Date

EMERGENCY MEDICAL TREATMENT

In the event of an emergency, if the parents/guardian or the emergency contacts named on the front of this form cannot be reached, the Caddo Parish Sheriff Office, Steve Prator, or his designee has my permission to transport my child _____ to the nearest medical facility (Willis Knighton – Pierremont) for treatment.

Parent's/Guardian's Signature

Date

Parent's/Guardian's Signature

Date

INTERNET / PHOTOGRAPH / INFORMATION WAIVER

The Caddo Parish Sheriff's Office operates a web site/page and Facebook page on the internet. The purpose of these pages is to keep the citizens of Caddo Parish informed of public safety and positive feedback with images promoting community participation in locally-offered camps and programs. Your signature below grants CPSO permission for your child's photographs, name, and work to be published on the internet and/or in any electronic form.

Parent's/Guardian's Signature

Date

Parent's/Guardian's Signature

Date