



To Whom It May Concern:

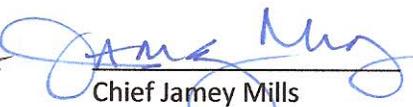
From June 15, 2015 to June 19, 2015, the Clermont County Sheriff's Office, Miami Township Police Department, Milford Police Department, Loveland Police Department and other partners are teaming up to present a week long Junior Police Academy (JPA) for ages 13 to 17. This program will provide a unique experience for law enforcement professionals to come together with young people and share basic law enforcement knowledge, techniques and experiences.

The JPA cadets will not only learn about law enforcement, but much emphasis is placed on teamwork, respect, positive behavior, pride in one's work and the resistance to drugs and alcohol abuse. It is our hope that each cadet will leave the program with a better understanding of citizenship and how rewarding community involvement can be.

In broad terms, the Junior Police Academy began in Austin, Texas and has since grown to over 200 programs nationwide. The Sheriff's Office was unable to host an academy last year due to our involvement in the Ohio Police and Fire Games. This year, thanks to the coordinated efforts of the Miami Township Police Department, Loveland Police Department and Milford Police Department, we are able to present this program at no cost.

We encourage you to learn more about the Junior Police Academies by visiting the national web page at www.juniorporiceacademy.org or feel free to contact Captain Paul Kamphaus at (513) 732-7536. We are looking forward to a fun and educational week and hope to see you there.


Chief Sue Madsen
Miami Township Police


Chief Jamey Mills
Milford Police Department


Chief Tim Sabransky
Loveland Police Department


Sheriff A.J. Rodenberg Jr.
Clermont County Sheriff

Junior Police Academy Requirements

- Age:** Must be 13 to 17 years old.
- Transportation:** Cadets are responsible for transportation to and from the academy
- Location:** Miami Meadows Park
1546 State Route 131
Milford, Ohio 45150
- Date:** June 15, 2015 through June 19, 2015. Class size is limited to 30 cadets. Due to the limited size and based on the demand, enrollment will be based on a review of the attached questionnaire. You will be notified upon acceptance.
- Class is Monday through Friday from 9:00am – 3:00pm.
- Clothing:** Physical conditioning will be every morning. Cadets should bring a pair of running shoes and dress comfortably. There are no shower facilities. JPA cadets should consider bringing a change of clothes, a towel and any other items to freshen up after physical activity. JPA cadets should bring a water bottle. During certain dates and times of instruction, the cadets are encouraged to wear the provided cadet T-shirt for uniformity.
- Food:** Lunch will be provided
- Registration:** Complete the attached paperwork by May 15, 2015 and return to:

Clermont County Sheriff's Office
4470 State Route 222
Batavia, Ohio 45103
Attn: Captain Paul Kamphaus

(Please be advised that a child over 18 years of age does not require a parent or guardian signature, however, such a signature is recommended if obtainable.)

Clermont County Sheriff's Office
JPA Camp-General Registration Form

Participant Name: _____
(If a minor, Parent/Guardian Name): _____
Street Address: _____
City, State, Zip Code: _____
Phone Number: _____
Email Address: _____

Release

Recognizing the risk and possibility of injury associated with participation in the Clermont County Sheriff's programs and in consideration of the Clermont County Sheriff offering the program at a nominal fee and accepting the participant into the program and activities, I for myself, my heir, successors, administrators and assigns hereby release, discharge and/or otherwise indemnify the Clermont County Commissioners, the Clermont County Sheriff, Miami Township Police Department, Miami Township Fire Department, Miami Township Trustees, Milford Police Department, Loveland Police Department, Clermont County, Ohio, as well as all employees and/or agents of these entities from any and all claims by or on behalf of the participant, the participant's heirs, administrators and assigns as a result of participating in the Clermont County recreational programs. I further certify that the participant is physically fit and capable of participating in all activities required by the recreational programs and that participating in the recreation programs will not pose a risk of physical harm to any participant.

Authorization for Medical Treatment

In the event participant receives an injury, requiring medical attention of any type, I hereby authorize the Clermont County Sheriff's Office/Miami Township Police Department/Milford Police Department/Loveland Police Department, Clermont County, Ohio or its employees or agents to consent to whatever treatment is medically necessary and hereby release those entities from any claims whatsoever arising from that consent.

Authorization to Use Image and Photographic Likeness

In the event the participant or my photograph or other image is taken or created during the participant or my participation in this program, in consideration of the acceptance of the participant in the program, I authorize the Clermont County Sheriff to use my photography or other image for promotional purposes.

_____ **Please check if you DO NOT want your child's photograph taken.**

Dated this _____ day of _____, 20_____

Participant _____

Guardian _____

PARENT/CHILD PERMISSION SLIP

This permission slip is for participation in the Clermont County Sheriff's Office Junior Police Academy Camp June 15th through June 19th 2015, to take place at Miami Meadows Park. This activity will be supervised by the Clermont County Sheriff, Miami Township Police Department, Miami Township Fire Department, Milford Police Department and Loveland Police Department.

We, the undersigned child and parent/guardian of _____ do hereby give permission for _____ to participate in the above stated activity. We appreciate the dangers and risks associated with above stated activity including preparations for and transportation to and from the activity, and on my own behalf and/or on behalf of my child I hereby fully release and waive any and all claims, demand, action or cause of action of whatever nature, either in law or equity arising by reason of any bodily injury, personal injury, mental injury, or death due to the child's participation in the above referenced activity and the necessary travel to and from the activity site that may arise against the Clermont County Sheriff, Miami Township Police Department, Miami Township Fire Department, Milford Police Department, Loveland Police Department and all employees, volunteers, related parties or other organizations associated with any program of activity.

We expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio or any other state in which said child may be injured and that if any portion of this release is held invalid, it is agreed that the balance shall, nevertheless continue in full force and effect.

We further state that I/We have fully and carefully read the above release and know the contents of the same and sign this release as our own free act.

Date: _____ Parent/Guardian: _____

Date: _____ Parent/Guardian: _____

Date: _____ Parent/Guardian: _____

Junior Police Academy

Youth Program Emergency Information and
Transportation Authorization Form

June 15-19, 2015

I give the Clermont County Sheriff's Office/Miami Township Police Department/Milford Police Department/Loveland Police Department, representatives my permission to transport my child, _____, to the nearest available medical/dental facility for emergency medical care. (This form does not authorize or guarantee treatment upon arrival at the designated facility, as each facility sets their own treatment procedures.)

I grant permission for my child to participate in all activities, including field trips with transportation provided by the Clermont County Sheriff/Miami Township Police Department/Milford Police Department, in connection with the program(s) in which I have enrolled by child.

Parent Signature: _____ **Date:** _____

Witness: _____ **Date:** _____

Mother's Name: _____ Cell Phone: _____ Work Phone: _____

Father's Name: _____ Cell Phone: _____ Work Phone: _____

Emergency Contact: _____ Phone: _____

Allergies / Medical Conditions: _____

Junior Police Academy – Questionnaire

*Clermont County Sheriff's Office
Miami Township Police Department
Milford Police Department
Loveland Police Department
June 15 - 19, 2015*

Participant Name: _____

(If a minor, Parent/Guardian Name): _____

Phone Number: _____

Email Address: _____

Parents have your child answer these questions. Thank you!

Please list any leadership experiences: _____

Please list any volunteer experiences: _____

Please list any awards, certificates, or accomplishments related to leadership, academics, or teamwork:

Why do you want to participate in the Junior Police Academy, and how will you be a good participant?

Please return this form with your registration to: Clermont County Sheriff's Office, 4470 State Route 222, Batavia, Ohio 45103, Attention: Captain Paul Kamphaus