{24-25 version}	Child's Name:

Your Phone # Your Email:

Gamp	o Glassen
Parent	Counselors

Wayland Bonds Elementary 5th Grade Parents

We are currently recruiting parents wishing to volunteer their services as outdoor school counselors during the week of November 18-22, 2024. As a counselor, you would be responsible for supervising those students assigned to your cabin at all times and to participate in all activities in which the students are involved. In order to continue the program in the coming years and to guard against serious injury, we must have counselors who are supportive of what the teachers are doing and who will conduct themselves in a responsible manner. At Outdoor School we do not allow pranks of any kind instigated by adults or students

We will need at least 2 counselors per cabin. Each counselor will pay his/her fee to camp (\$225). All counselors attending Outdoor School will have a criminal background check run by the district through the state. This procedure is district policy for all persons who work with students and is just another step in trying to maintain the safest possible learning environment for each child. All counselor applications and background check paperwork are due on or before September 20, 2024. (The school will pay for the background checks.) Camp Fee/Tuition are due for both students and parents by Nov. 1, 2024.

If you are interested in assisting as a counselor, please complete the counselor volunteer application and return it to the school as soon as possible. All applications will be held in strict confidence and will be reviewed on an equal basis. If you are selected as a counselor, you will receive a letter of confirmation. You will also receive information regarding a counselor orientation meeting to be held at a later date.

We are looking forward to an incredible experience at Outdoor School.

Thank you,

Mrs. Cosper

*For all questions please email me at melissacosper@mooreschools.com

Parent Application for Outdoor School Counselor

	Parent Name	Child's Name
	Home Phone	Cell Phone
	Email	_
	Parent Counselo	rs are expected to:
•	Remain on the Outdoor School site AT ALL TIMES	
•	Report all incidences regarding student health and believen tary amind/teachers immediately	navior issues to the campus camp director or Wayland Bonds
•	Require appropriate attire and behavior for campers in	accordance with school/camp rules
•	Follow closely the daily/weekly schedule and allow for	flexibility if conditions change
•	Maintain a safe situation and positive attitude with AL	·
•	Model appropriate behavior and language at all situation	·
•	Remain in an active appropriate supervisory role with y day of attendance at Outdoor School; your campers witimes unless instructed to do differently by a campus	·
•	Follow through with requests by the campus Outdoor's Abide and respect the rules of the school administrat	School Director and camp staff as soon as possible.
	<u>Duties I</u>	nclude:
•	Assisting in loading/unloading of students on buses	
•	Riding with campers on the bus to and from the camp	
•	Staying with campers in their assigned cabin	
•	Walking all trails (rigorous and lengthy) with assigned	·
•	Staying with assigned campers throughout the week's activities, and hygiene activities unless instructed to c	
	Before Attending	Outdoor School:
•	Complete and pass a 'Criminal History Background' che	eck
•	Attend ALL Parent Counselor meetings	
•	Complete Emergency Health Medications Information	Form
•	All forms are due by September 20, 2024	
•	Counselor fee \$225 due by November 1, 2024	
unever expect and you I have		tween trails and activities. vith the position of Parent Counselor in the

Date

Parent Signature

Camp Classen Outdoor School Program Emergency/Health/Medications Information

Counselor's Name	Male	Female
Child's Name:		
Counselor T-shirt size (Size up if in doubt.)		
Adult Sizes : Small Medium Large XL XXL 3XL	4XL	5XL
Birthdate:/ Age: Phone:		
Home Address:		
Work Phone: Email:		
Emergency contact :Relationship):	
Phone (s):		
Doctor: Phone:		
Date of last tetanus shot (REQUIRED approx. date is fine)		
Do you have any history of health concerns or physical limitations that we n	need to	be aware of:
Please list any food restrictions due to religious reasons or s notify the camp nutrition department to have an alternative		•
(i.e. vegetarian, no beef/pork products etc.)		

Insurance:	
Insured Carrier's Name:	Carrier's DOB:
Insurance Company:	Subscriber Policy #
******Please check ONE <u>and</u> attach a cop	py of insurance card if you check the first*****
I am attaching a copy of BOTH sides	s of my insurance card. I will assume responsibility for
any medical charges not covered by the insurance take a photo and email me.)	te company. (<i>If you are unable to print a copy, please</i>
I have no insurance coverage, but I will assincurred.	sume responsibility for medical charges

Volunteer Authorization to Release Background Information

background report information		uthvest Inc., their agent	for purpo	y contacted oses of obtain
	, to furnish the above	-mentioned information.	_	
release MOORE PUBLIC SCHOO	OLS their respecti	ve employees or ACCUF	AV Div. S	outhwest Inc. f
agent and employees and all pers	, alon loopeou			
and all liability arising out of furni			o, reperte	about the front
			SANSON OF STREET	
PLEASE PRINT (Use Blue or Bl	ack Ink)	<u>R</u>	equested l	Dy: * 421733 COST
FULL LEGAL NAME		Da	te of Birth	
No. of Concession Processing Concession Con-		-MANAGE		
OTHER NAMES USED		SS#		-
DRIVERS LIC#		STATE ISSUE	=D	
DRIVERS LIC#		STATE ISSU	ED	H
DRIVERS LIC#	rivers License	STATE ISSU	ED	
Name exactly as it appears on Dr	as 10 Separate		av sa lik	
A SECTION AND A SECTION ASSESSMENT	as 10 Separate		av sa lik	l was delivered
Name exactly as it appears on Dr	as 10 Separate		av sa lik	l was delivered
Name exactly as it appears on Dr Please note: If your address is a Current	as 10 Separate		av sa lik	I was delivered
Name exactly as it appears on Dr Please note: If your address is a	rural route, or post office b	oox, we must have City & Coun	ty where ma	
Name exactly as it appears on Dr Please note: If your address is a Current Address How long at this address? (Months)	rural route, or post office b	oox, we must have City & Coun	ty where ma	
Name exactly as it appears on Dr Please note: If your address is a Current Address How long at this address? (Months)	rural route, or post office b	oox, we must have City & Coun	ty where ma	_ Zip
Name exactly as it appears on Dr Please note: If your address is a Current Address How long at this address? (Months) Previous Address	CityCity	oox, we must have City & Coun	ty where ma	
Name exactly as it appears on Dr Please note: If your address is a Current Address	CityCity	oox, we must have City & Coun	ty where ma	_ Zip
Name exactly as it appears on Dr Please note: If your address is a Current Address How long at this address? (Months) Previous Address How long at this address? (Months)	CityCity	oox, we must have City & Coun	ty where ma	_ Zip
Name exactly as it appears on Dr Please note: If your address is a Current Address How long at this address? (Months) Previous Address How long at this address? (Months)	CityCity	oox, we must have City & Coun	ty where ma	_ Zip
Name exactly as it appears on Dr Please note: If your address is a Current Address How long at this address? (Months) Previous Address	CityCityCityCityCityCityCityCityCityCityCity	CoCo	ty where ma	_ Zip _Zip
Name exactly as it appears on Dr Please note: If your address is a Current Address How long at this address? (Months) Previous Address How long at this address? (Months) Previous Address Previous Address	CityCityCityCityCityCityCityCityCityCityCity	CoCo	ty where ma	_ Zip _Zip
Name exactly as it appears on Dr Please note: If your address is a Current Address How long at this address? (Months) Previous Address How long at this address? (Months) Previous Address	CityCityCityCityCityCityCityCityCityCityCity	CoCo	ty where ma	_ Zip _Zip

Thank You for volunteering at MOORE PUBLIC SCHOOLS

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The Federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness and privacy of information in the files of every "consumer reporting agency" (CRA). Most CRA's are credit bureaus that gather and sell information about you – such as if you pay your bills on time or have filed bankruptcy – to creditors, employers, landlords and other businesses. For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W. Washington DC 20006. The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn about those rights.

- You must be told if information in your file has been used against you. Anyone who uses information from a
 CRA to take action against you such as denying an application for credit, insurance or employment must tell you,
 and give you the name, address, and phone number of the CRA that provided the consumer report.
- You can find out what is in your file. At your request, a CRA must give you the information in your file, and a list
 of everyone who has requested it recently. There is no charge for the report if a person has taken action against
 you because of information supplied by the CRA, provided that you request the report within 60 days of
 receiving notice of the action. You also are entitled to one free report every twelve months upon request if you
 certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3)
 your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.
- You can dispute inaccurate information with the CRA. If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (The source also must advise national CRA's to which it has provided the data of any errors) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA's investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.
- Inaccurate information must be corrected or deleted. A CRA must remove or correct inaccurate or unverified
 information from its files, usually within 30 days after you dispute it. However, the CRA is not required to remove
 accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute
 results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information
 source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it
 has reinserted the item. The notice must include the name, address and phone number of the information
- You can dispute inaccurate items with the source of the information. If you tell anyone such as a creditor who
 reports to a CRA that you dispute an item, they may not then report the information to a CRA without including
 a notice of your dispute. In addition, once you've notified the source of the error in writing, it may not continue
 to report the information if it is in fact, an error.
- Outdated information may not be reported. In most cases, a CRA may not report negative information that is
 more than seven years old; ten years for bankruptcies.
- Access to your file is limited. A CRA may provide information about you only to people with a need recognized by the FCRA – usually to consider an application with a creditor, insurer, employer, landlord or other business.
- Your consent is required for reports that are provided to employers, or reports that contain medical
 information. A CRA may not give out information about you to your employer, or prospective employer, without
 your written consent. A CRA may not report medical information about you to creditors, insurers, or employers
 without your permission.
- You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers. Creditors and
 insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such
 offers must include a toll-free phone number for you to call if you want your name and address removed from
 future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA
 form provided for this purpose, you must be taken off the lists indefinitely.
- You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the
 FCRA, you may sue them in state or federal court.

The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- You may seek damages from violators. If a CRA, a user or (in some cases) a provider of CRA data, violates the
 FCRA, you may sue them in state or federal court.
 Identity theft victims and active duty military personnel have additional rights. For more information, visit
 www.consumerfinance.gov/leammore.
- Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/leammore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The FCRA gives several different federal agencies (listed below) authority to enforce the FCRA:

FOR QUESTIONS OR CONCERNS REGARDING:

CRA's creditors and others not listed below

National banks federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)

Savings associations and federally charted savings banks (word "federal" or initials "F.S.B." appear in federal intuition's name)

Federal Reserve system member banks (except national banks, and federal branches/a gencies of foreign banks)

Federal Credit Unions (words "Federal Credit Union" appear in intuition's name)

State chartered banks that are not a member of the Federal Reserve System

Air-surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission.

Activities subject to the Packers and Stockyards Act, 1921

PLEASE CONTACT:

A. Bureau of Consumer Financial Protection 1700 G Street NW Washington, DC 20580

B. Federal Trade Commission Consumer Response Center – FCRA Washington, DC 20580 202-326-3761

Office of the Comptroller of the Currency Compliance Management, MailStop 6-6 Washington, D.C. 20219 800-613-6743

Office of Thrift Supervision Consumer Programs Washington, D.C. 20552 800-842-6929

Federal Reserve Board Division of Consumer & Community Affairs Washington, D.C. 20551 202-452-3693

National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-518-6360

Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, D.C. 20429 800-934-FDIC

Department of Transportation Office of Financial Management Washington, D.C. 20590

Department of Agriculture Office of Deputy Administrator – GIPSA Washington, D.C. 20250 202-720-7051

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

Instructions for completing waivers for ALL Camp Classen participants

We have created an Outdoor Education Participant Portal in our Online Registration System to make completing the Camp Classen Waiver quick and easy. Please follow the steps below. If you have any trouble our questions, please reach out to the Camp Classen office for assistance at (580) 369-2272.

- This is the link to the registration website you will need to go to: https://ymcacampclassen.campbrainregistration.com/
- 2. Use the "New User Sign-up" to create an account.
- Once logged in you should see the option to "start a new application" on the homepage. Choose the option "Outdoor Education Participant Portal"
- 4. Step 1/6: You will now add the Parent and student information. If you are coming as a parent sponsor, select yourself to add to the registration or add an additional parent. You will then add your student by clicking add child.
- Step 2/6: On the "Select Sessions" page you will need to select your student's school. Choose "add to cart" and then choose whether the participant is a student, chaperone or school staff member. Repeat this step for each participant (parent and child, if both attending)
- Step 3/6: "Fill Out Forms". You will need to complete the "Household Form" and the "Terms and Conditions" for each participant.
- Step 5/6: On the next page you will click "submit application".

DONE! Thank you!

If you have any trouble completing this registration, please reach out directly to Camp Classen at (580) 369-2272 or email sjolly@ymcaokc.org or kjolly@ymcaokc.org

Please check here if this has been completed: (required)	
Please check here if this has been completed: (required)	