{24-25 version} Child's Name: _____

Your Name:_____Your Phone #_____Your Email:_____

Camp Classen

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 17-21, 2025. 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 ($300). 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 23, 2025. (The school will pay for the background checks.) **Camp Fee/Tuition** are due for both students and parents by Nov. 11, 2025.

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 Counselors are expected to:

- Remain on the Outdoor School site AT ALL TIMES
- Report all incidences regarding student health and behavior issues to the campus camp director or Wayland Bonds Elementary amind/teachers immediately
- 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 ALL campers, and promote tolerance and teamwork
- Model appropriate behavior and language at all situations in accordance with school/camp rules
- Remain in an active appropriate supervisory role with your assigned fifth grade campers 24 hours a day for each day of attendance at Outdoor School; your campers will be instructed to remain with you at all times unless instructed to do differently by a campus teacher
- Follow through with requests by the campus Outdoor School Director and camp staff as soon as possible.
- Abide and respect the rules of the school administration and camp director regarding students.

Duties Include:

- 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 campers
- Staying with assigned campers throughout the week's non-trail activities including meals, evening activities, and hygiene activities unless instructed to do so by the campus Outdoor School Director

Before Attending Outdoor School:

- Complete and pass a 'Criminal History Background' check
- 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

PLEASE NOTE: the camp settings require a great deal of walking throughout the day and evening on rocky, uneven ground; the trails are rigorous and usually last approximately 2 ½ hours. During the week you will be expected to walk the same places as your assigned campers
and you will be supervising the campers as they move between trails and activities.
I have read and understand responsibilities associated with the position of Parent Counselor in the Outdoor School program with Wayland Bonds Elementary.

_____ _____

Parent Signature Date

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 need to be aware of:
_____
_____
_____

Please list any food restrictions due to religious reasons or severe allergies so we can notify the camp nutrition department to have an alternative available for you:
(i.e. vegetarian, no beef/pork products etc.)
_____
_____

Insurance:

Insured Carrier's Name:_____ Carrier's DOB:_____

Insurance Company:_____ Subscriber Policy #_____

******Please check ONE ***and*** attach a copy of insurance card if you check the first******

_____ **I am attaching a copy of BOTH sides of my insurance card.** I will assume responsibility for any medical charges not covered by the insurance company. *(**If you are unable to print a copy**, please take a photo and email me.)*

_____ I have no insurance coverage, but I will assume responsibility for medical charges incurred.

MOORE PUBLIC SCHOOLS

Volunteer Authorization to Release Background Information

In connection with my application for volunteer service with MOORE PUBLIC SCHOOLS, I authorize MOORE PUBLIC SCHOOLS and, or, ACCUFAX Div., Southvest Inc., their agent, to solicit background information relative to my criminal record history. I understand that MOORE PUBLIC SCHOOLS may conduct inquiries into my background that may include criminal records, credit report, motor vehicle records, workers compensation records, personal references and other public record reports pertaining to me. When requested by an employer motor vehicle records or a driving history may be obtained.

I authorize without any reservation, any person, agency, or other entity contacted by MOORE PUBLIC SCHOOLS or ACCUFAX Div., Southvest Inc., their agent for purposes of obtaining background report information, to furnish the above-mentioned information.

I release MOORE PUBLIC SCHOOLS, their respective employees or ACCUFAX Div., Southvest Inc. their agent and employees and all persons, agencies and entities providing information or reports about me from any and all liability arising out of furnishing any such information or reports.

PLEASE PRINT (Use Blue or Black Ink) **Requested by: *** 421733 COST $25.00

FULL LEGAL NAME_____ Date of Birth_____

OTHER NAMES USED_____ SS# _____

DRIVERS LIC # _____STATE ISSUED_____

Name exactly as it appears on Drivers License_____

Please note: If your address is a rural route, or post office box, we must have City & County where mail was delivered

Current Address_____City_____Co._____ St.___ Zip_____
How long at this address? (Months/Years) _____

Previous Address_____City_____Co._____ St.____Zip_____
How long at this address? (Months/Years) _____

Previous Address_____City_____Co._____ St.____Zip_____
How long at this address? (Months/Years) _____

SIGNATURE _____ **DATE** _____

LIST ALL CITY/STATES RESIDED AT SINCE AGE 18 AND HOW LONG IN EACH CITY/STATE:

_____

Thank You **for volunteering at** MOORE PUBLIC SCHOOLS**!**

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 source.
- **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.

MOORE PUBLIC SCHOOLS

- **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/learnmore.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

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.

MOORE PUBLIC SCHOOLS

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:	PLEASE CONTACT:
CRA's creditors and others not listed below	**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**
National banks federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	**Office of the Comptroller of the Currency** Compliance Management, MailStop 6-6 Washington, D.C. 20219 **800-613-6743**
Savings associations and federally charted savings banks (word "federal" or initials "F.S.B." appear in federal intuition's name)	**Office of Thrift Supervision** Consumer Programs Washington, D.C. 20552 **800-842-6929**
Federal Reserve system member banks (except national banks, and federal branches/agencies of foreign banks)	**Federal Reserve Board** Division of Consumer & Community Affairs Washington, D.C. 20551 **202-452-3693**
Federal Credit Unions (words "Federal Credit Union" appear in intuition's name)	**National Credit Union Administration** 1775 Duke Street Alexandria, VA 22314 **703-518-6360**
State chartered banks that are not a member of the Federal Reserve System	**Federal Deposit Insurance Corporation** Division of Compliance & Consumer Affairs Washington, D.C. 20429 **800-934-FDIC**
Air-surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission.	**Department of Transportation** Office of Financial Management Washington, D.C. 20590
Activities subject to the Packers and Stockyards Act, 1921	**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.

1. 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.
3. 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.
5. 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)
6. Step 3/6: "Fill Out Forms". You will need to complete the "Household Form" and the "Terms and Conditions" for each participant.
7. 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) ☐