

**ASHEVILLE  
FIRE  
DEPARTMENT**



***ESCAPE***

**APPLICATION  
PACKET**

Dear Fire Camp Applicant,

Thank you for expressing interest in the Asheville fire camp, known as **Fire Escape**. We are excited to offer this unique opportunity for local middle school aged youth in order to gain an appreciation of fire and life safety issues, develop valuable skills used in search and rescue operations, increase team building skills, and become an advocate for safety.

The **Fire Escape** is limited to 30 students who will be selected based on the attached application. The targeted age group are rising 6<sup>th</sup> graders through 8<sup>th</sup> graders. Campers will be chosen on the basis of their suitability for camp, as will be determined by the enclosed application. Applications can be filled out online and sent to: khinz@ashevillenc.gov or printed and returned by mail to: Kelly Hinz, AFD PO Box 7148, Asheville, NC 28802.

Activities at **Fire Escape** are highly interactive and hands-on in nature. Most activities are conducted in pairs or teams, in which the campers must work together and rely on each other to succeed. The nature of the activities and the locations where they are conducted require campers to follow explicit rules in order to ensure everyone's safety. Campers should wear comfortable clothing, sunscreen and closed toed shoes. **NO** sandals or flip flops.

Camp activities will be held at Local 865 Asheville Firefighters' Associations camp grounds located at 227 Clayton Road Arden, NC 28704. A drop-off and pick-up location will be available to help with transportation at the Stephens Lee Rec. Center. Pick up times will be at approximately 8:30am and drop off time is 2:15pm. The fire camp will run from 9 a.m. until 2 p.m. and will include water and lunch each day, and is **free to all eligible participants**. For campers with special dietary needs, we will try to reasonably accommodate. Please send lunch with the camper if there is a concern.

We are pleased you want to support your child's interest in fire and life safety through this unique, fun, educational and hands-on program!

Please let us know if you have any questions or concerns.

Sincerely,

Kelly Hinz, 828-251-4010  
Asheville Fire Department  
khinz@ashevillenc.gov

# FIRE ESCAPE FAMILY DATA

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## YOUTH INFORMATION

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_____	_____	_____	
Name	Date of Birth	Age	
_____	_____	_____	
Street Address	Unit Number	City	Zip Code
_____	_____	_____	
Home Phone	Cell Phone	Email Address	
_____	_____	_____	
School Attending in Fall	Grade	T-Shirt Size (adult)	
_____	_____	_____	
Non-Relative Character Reference	Relationship	Phone Number	

## PARENT/GUARDIAN INFORMATION

_____	_____	_____
Name of a Parent/Legal Guardian	Cell Phone	Email Address
_____	_____	_____
Name of Workplace/Employer	Work Phone	Email Address
_____	_____	_____
Name of other Parent/Legal Guardian	Cell Phone	Email Address
_____	_____	_____
Name of Workplace/Employer	Work Phone	Email Address

## EMERGENCY CONTACT INFORMATION

Name of Emergency Contact		Relationship
Contact's Home Phone	Contact's Cell Phone	Contact's Work Phone
Camper's Name		

**Family Concerns.** Describe any potential camper concerns, including recent family changes (i.e., family loss or illness, changes in family work and living situations, etc.)

**Diet/Allergy Considerations.** List any food restrictions/reactions we should be aware of in preparing snacks and the final day picnic. List any substances your child is allergic to, including insects, food, environmental, or other factors.

**Medication.** List any medications used and their purpose.

### **Medical Coverage.**

Company	Phone Number	Name of Insured
Policy Number	Camper's Physician	Physician's Phone Number

**Family Participation.** Families are invited to the family picnic and closing ceremony on the final day of camp. Please let us know your plans:

- I/We plan to attend. Please contact us with more detailed information.  
 I/We do not plan to attend.

# FIRE ESCAPE CODE OF CONDUCT

ASHEVILLE Fire Camp provides campers with a rare opportunity to enter the world of the Firefighter. This includes exposure to equipment and other property that are generally off-limits to the public and which must be treated with care, both for the safety of the user and other campers, staff and public, and to maintain the integrity of the equipment.

As a participant in ASHEVILLE Fire Camp, I agree to abide by the following rules of conduct:

1. I will abide by the rules communicated by Fire Camp staff, verbally and in writing and abide by any posted rules on City property.
2. I will participate in all activities, as directed by Camp staff, which may include alternate activities if I am not able to safely complete the scheduled activities.
3. I will maintain a positive attitude and engage in positive communications throughout the week of Camp.
4. I will respect and support my teammates, fellow campers, and staff at all times.
5. I will care for all equipment and property used in camp as directed by staff and will treat all Camp and City of ASHEVILLE property with respect.
6. I will refrain from engaging in behavior which may result in injury to myself or others.
7. I will engage in Camp activities only when Camp staff members are actively supervising the activities.
8. I will abide by all laws and refrain from bringing into camp or using in camp, any substances that are illegal for adults and/or minors.
9. I will report to a Camp staff member any behavior or activity I am aware of or believe will take place which compromises the welfare of people or property.
10. I will let a Camp staff person know if I am encountering any problems which could compromise my following any of the above rules.

**I have read and understand the above Code of Conduct and understand that if I do not live up to these conditions, I will receive counseling and/or be sent home.**

\_\_\_\_\_  
Camper Name (printed)

\_\_\_\_\_  
Camper Signature

\_\_\_\_\_  
Date

I agree by checking this box that this is an electronic submission and is the same as my signature.

**I have reviewed the above Code of Conduct and agree with the rules.**

\_\_\_\_\_  
Parent/Guardian Name (printed)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

I agree by checking this box that this is an electronic submission and is the same as my signature.

**FIRE ESCAPE**  
PERMISSION TO PARTICIPATE,  
PARENTAL RELEASE, AND  
INDEMNIFICATION AGREEMENT

I grant permission for my child/legal \_\_\_\_\_ to participate in **FIRE ESCAPE**, sponsored by the ASHEVILLE Fire Department.

Activities include training in the following areas: physical fitness, use of fire equipment & gear, fundamentals of fire suppression, rope handling & basic knots, altitude rescue techniques, handling of vehicle extrication tools, basic first-aid, CPR, and water safety & self-rescue.

By signing this agreement I acknowledge my child is voluntarily participating in Fire Escape activities with full knowledge of the potential hazards or dangers, and I agree to assume on behalf of my child any and all risks of injury associated therewith.

By signing this agreement, I hereby agree for myself, my child, my heirs, representatives and assigns to fully and forever release and discharge the City of ASHEVILLE, its employees, assistants, representatives, and their heirs and assigns, from any and all claims, demands, damages, rights of action, losses, causes of action, and liability arising out of or from accidents, injuries, or other damages, sustained directly or indirectly by or caused by my child, relative and guests, arising out of my child's participation in **FIRE ESCAPE**.

I hereby agree to indemnify, defend, and hold harmless the City of ASHEVILLE, its employees, representatives, assistants, and their heirs and assigns, from and against any and all claims, demands, damages, rights of action, losses, causes of action, and liability, including attorney's fees and court costs, arising out of or from my child's participation in **FIRE ESCAPE**.

I agree to be bound by the provisions of the above Release and Indemnification Agreement and make the representations contained therein.

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Parent/Guardian Name (printed)

Parent/Guardian Signature

Date

I agree by checking this box that this is an electronic submission and is the same as my signature.

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Emergency Telephone Number

# FIRE ESCAPE IMAGE/MEDIA RELEASE

Campers may be photographed, videotaped, recorded, interviewed or quoted for marketing, educational or training purposes, as well as to provide campers and staff with memories of their week at camp.

Images and recordings may be shared with or displayed through:

- City media (City website, publications, and television stations)
- Commercial media (radio, television and newspaper)
- Bulletins or newsletters used by businesses, schools, churches, government agencies, non-profits, etc.
- Documents provided to actual or potential camp funding sources

Any photographing or videotaping is likely to be carried out by City staff. However, members of the media will be invited to observe, photograph, interview, record and publicize portions of camp.

Camp families may photograph or videotape campers at the pre-camp family orientation and at the demonstrations, picnic and closing ceremony on the last day. These images and recordings may be shared with the family and friends of other campers.

Note: Photos are taken and used with discretion and respect for program participants and we encourage camp families and others to do the same.

This release will enable campers and their families to enjoy memories of the week for years to come and enhances ASHEVILLE Fire Department's ability to recruit future campers and commercial sponsorship.

I, \_\_\_\_\_, agree to allow ASHEVILLE City staff, media representatives, and ASHEVILLE Fire Camp families to photograph and/or record my son/daughter during Fire Escape for the purposes explained above.

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Parent/Guardian Name (printed)

Parent/Guardian Signature

Date

I agree by checking this box that this is an electronic submission and is the same as my signature.