

Dear Parent/Guardian,

Your child is invited to join St. Mary's County Camp D.A.R.E. (Drug Abuse Resistance Education) held on July 28, 2025, to August 1, 2025, at Real Life Church in Mechanicsville, MD. This is a free five-day camp for incoming 5<sup>th</sup> and 6<sup>th</sup> grade students in St. Mary's County for the 2025-2026 school year. The camp, organized by the St. Mary's County Sheriff's Office in partnership with Real Life Church, runs from 8:00 am to 4:00 pm daily. Parents/guardians are responsible for transporting their child. Please ensure your child is signed in and out of camp by an adult each day.

Camp D.A.R.E. is run by St. Mary's County Sheriff's Office members, and St. Mary's County school students are our camp counselors. The week involves teaching D.A.R.E. America Elementary curriculum with two daily lessons from certified instructors. The program focuses on educating participants about the harmful effects of drugs, alcohol, and violence, suggesting alternatives and providing tools for making good decisions. Beyond lessons, the day includes various activities like arts and crafts, recreational competitions, and public safety-related demonstrations. All participants receive a daily snack and lunch.

Camp D.A.R.E. is free thanks to generous contributors. Limited to 100 St. Mary's County students, spots are filled on a first-come, first-serve basis. To reserve a spot for your child, please fill out and return the attached information pack. You may either hand-deliver it to St. Mary's County Sheriff's Office Headquarters or scan and email it to:

<u>CampDare@stmaryscountymd.gov</u> **Applications must be submitted by May 31, 2025** 

We are are excited about Camp D.A.R.E. and can't wait to have your child join us!

Sincerely,

Steven Hall
Sheriff

St. Mary's County Sheriff's Office

#### **Camp D.A.R.E Application**

(Circle one of the following choices)

# Applying for:

- **Participant in Camp D.A.R.E** (Incoming 5<sup>th</sup> and 6<sup>th</sup> graders in St. Mary's County schools for the 2025-26 school year)
- o Junior Counselor (ages 12-14). \*(This is an application for the position; selection will take place closer to camp.)\*

# **Participant Name:**

First:	Middle Initial:	Last:
		T-Shirt size (Youth sizes):
Physical Address:		
City:	State:	Zip Code:
Cell Phone:	Alt. Phone:	
Parent/Guardian name(s):		Contact number:
E-mail address:	Camp DARE to contacts to assure co	* <u>Please check SPAM folder</u> nstant communication and updates from camp.*
<del>-</del>	<del>-</del>	
Phone number:	Relationship to camper:	
School:	Grade (2025-2026 School Year):	
Medical conditions that may in be required to faciliate access	1 1	on and/or reasonable accommodations that may D.A.R.E.
Participant Medical Informa	tion (Attach additional page	es if necessary)
Medical conditions:		
Allergies (to include food/spec	ific diet):	
Medications:		
	returned to the parent at the end	riginal bottle and submitted to the camp medic upon arrival of each day. Written instructions for administration shall

Participant's physician's name & phone number:

# Camp D.A.R.E. Medical Release

	or illness, I will be informed. If I cannot be reached at or surgery as advised by the attending medical y myself, the parent/guardian.
Parent/Guardian signature:	Date:
Camp D.A.R.E. Parent/Guardian Indemn	nification and Release
the camper's enrollment and participation in and fully appreciate that there are inherent rany summer camp program. In recognition of behalf of the camper and our heirs, executors and idemnify Camp D.A.R.E., the St. Mary Commissioners of St. Mary's County, and tassigns, and insurers from any and all liabit death, or property damage that may be suffer that may hereafter in any way be connected parent/guardian, bear sole responsibility for injury, harm, or loss that may befall my came	, as a condition precedent of a Camp D.A.R.E. and all related activities, recognize isks of injury and harm arising out of participation in a such risks, I hereby agree, on my own behalf and on a sasigns, and beneficiaries, to hold harmless, defend, as County Sheriff's Office, the Real Life Church, the cheir respective officers, elected officials, employees, lity, losses, claims and demands for personal injury, ared by myself or my camper while participating in or d with Camp D.A.R.E I further agree that I, as the providing adequate insurance to cover any potential per. I agree that if any portion of this <u>Indemnification</u> ace, notwithstanding, shall continue in full force and
Parent/Guardian signature:	Date:
Media Release	
hereby give permission to the St. Mary's Couthe Sheriff of St. Mary's County, Maryland child while engaged in activities associated property of Real Life Church. I understand to	/guardian of, unty Sheriff's Office, or a media organization used by to photograph, videotape, audio and video record my with the 2025 Camp D.A.R.E. program while on the these photographs/videos/recordings may be used for ional distribution and I, hereby, authorize their release
Parent/Guardian signature:	Date:

I acknowledge that first aid will be accessible at Camp D.A.R.E., and participants will be under

# **Transportation**

If campers need transportation to camp during the week due to financial hardships, an email will be provided with details on transportation, to include pick-up times and pick-up location. Please ensure your check your emails to include Spam folders.

The St Mary's County Sheriff's Office does not discriminate on the basis of race, color, sex, age, marital status, sexual orientation, national origin, religion or disability in the manner of employment or providing access to programs.