Shades of Blue Aerospace Camp

ONTARIO APPLICATION

Student Information (student must be between the ages of 13 and 18) Name: Address:_____ City: _____State: ____Zip:_____ Phone: Email address: Date of Birth: Student's School: Grade Level in the Fall: Current GPA:_____ Ma!e____ Female____ Have you attended this program before? Yes_____ No____ How many years?_____ How did you hear about Shades of Blue?_____ **Parents / Guardian Information** Address:_____ City:______State:_____Zip: _____ Phone: Home: _____ Cell/Work: _____ Alt: ____ Email Address: **Emergency Contact (other than parent or guardian)** Name: ______Relationship to student: _____ Phone: Home_____Cell/Work ____ Names of Persons Authorized To Pick Students Up 1. Name: Relationship to student: Phone: Home_____Cell/Work _____ 2. Name: ______ Relationship to student: _____

Phone: Home: _____Cell/Work____

Student's Medical Information

Are there any general health concerns/allergies that we need to be aware of? Yes	No_
If yes, please explain:	
Please list/describe any physical limitations:	
Please list/describe any special dietary needs/requirements:	
Emergency Medical Contact Information	
Name of Primary Physician:	
Phone: Insurance Provider:	
Special Considerations?	
Please list any other special considerations that we should be aware of:	

CONSENT FORM AND RELEASE STATEMENTS

Student's Name (Please Print)					
The undersigned ("Participant") hereby acknowledges that he/she has voluntarily chosen to participate in the aerospace camp sponsored by Shades of Blue. Participant acknowledges and understands that the Shades of Blue aerospace camp will involve strenuous physical activity that could potentially be dangerous or harmful. Participant has chosen to participate in the camp voluntarily, with the full knowledge of this potential danger and harm. By signing this document, Participant represents and warrants that he/she does not have any physical condition which could be aggravated or worsened by strenuous physical activity or stress. In consideration of Shades of Blue permitting Participant to participate in this aerospace camp, Participant waives all claims, demands, actions, causes of action, and liabilities of any kind or nature, whether based in law or in equity, against Shades of Blue, including without limitation, its parent and its successors, subsidiaries and affiliates ("Affiliated Companies") arising out of or in any way related to the Shades of Blue aerospace camp or Participant's participation in the event, including without limitation claims for physical or other personal injury ("Claims"). Participant releases Shades of Blue and its Affiliated Companies from such Claims, regardless of when such Claims arise or when Participant discovers any injury or damage that does or may give rise to such Claims.					
I hereby give consent for my child to participat	•	mp, travel on all field			
trips, and participate in flights aboard civilian a	Print Name	Date			
MEDIA RELEASE					
I hereby grant permission to Shades of Blue to use son/daughter to be used in connection with the making Shades of Blue aerospace camps.					
Parent / Guardian's Signature	Date				

MILITARY INSTALLATION VISIT and MILITARY RECRUITER PRESENTION RELEASE

and tour a military installation and/or fly on a military ai from the U.S. Military may visit and speak on behalf of	des of Blue aerospace camp that my son/daughter, may enter rcraft as part of the camp's itinerary. Additionally, recruiters their respective organizations. I hereby grant permission to aghter to visit such installations, listen to their presentations,				
Parent / Guardian's Signature	Date				
PARENT/GUARDIAN ACADEMY AGREEM	<u>ENT</u>				
-Parents will ensure that students arrive at the aerospa	ice camp on time every day				
-Parents will ensure that students are picked up on time at the end of every day					
-Parents will ensure that students bring all required materials to the academy every day					
-PARENTS WILL SIGN STUDENTS IN/OUT OF THE	ACADEMY EVERY DAY				
Parent / Guardian's Signature	Date				
SHADES OF BLUE MEMBERSHIP CONSENT	Γ				
Shades of Blue would like to enroll the graduates of ou	r aerospace camp in Shades of Blue. The purpose is to				
track the progress of our graduates toward their career	goals. The membership is free.				
All information will be kept confidential.					
I consent to having my child become a n	nember of Shades of Blue.				
I do not wish to have my child become a	member of Shades of Blue.				
Parent / Guardian's Signature	 Date				

STUDENT AGREEMENT

Please read the information listed below and sign at the bottom of the page

STUDENT GUIDELINES

- Drugs, alcohol, tobacco products, weapons, beepers, laser pointers, electronic devices/games,
 Ipods, mp3 players, radios, are not permitted and will be confiscated. Cell phones must be turned off except during breaks.
- Students must report on time each day or risk missing the field trips.
- Students must participate in all daily activities.
- Students must wear appropriate shorts, slacks, jeans or skirts, tennis or sport type shoes and name tag everyday.
- On field trips, we'll be in airport hangars, climbing in and out of airplanes and other types of activities, so, for your safety, no sandals or open toe shoes, no short shorts, short skirts, baggy oversized style jeans, and no facial jewelry such as nose or eyebrow rings.
- Parents must sign Students IN and OUT of the academy daily. Students are not allowed to leave early without prior coordination between parents and camp directors
- Students must use the sponsor-provided transportation for field trips.
- Students must bring a government issued photo ID

SAFETY TIPS

- This is a fast-paced week—pay, attention to what is going on around you.
- Watch out for sharp objects around aircraft/equipment--especially at eye level.
- Take care entering and exiting: 1. bus 2. aircraft 3. other facilities.
- Your Camp Directors and designated Flight Instructors will brief you on all special emphasis
 Safety items for the day. Pay close attention to these briefings and abide by all of the rules to ensure maximum safety. Reckless behavior will not be tolerated.
- Our Camp Coordinators have designed the week of activities to ensure your safety throughout the aerospace camp, however, you are ultimately responsible for your own safety and assuring you have a safe week.

I have read and understand all of the information listed above, and I agree to follow all student guidelines and safety tips while attending the Aerospace Camp.

Student	
Name	_Signature/Date

Thank you for selecting the Shades of Blue aerospace camp. We will ensure that all our students have a rich and rewarding experience during the camp. We encourage you to help us make this experience a valuable experience by ensuring that your child meets all the requirements and standards set forth by our Camp Director and his/her staff. We want nothing more than to provide a safe environment for all of the students and make this an experience that they will not forget. If you have any questions, please contact the Shades of Blue Aerospace Camp Director. Please submit all completed applications to the Camp Director at:

Shades of Blue Camp Director
13990 Iroquois Road
Apple Valley, CA 92307
or
F4Tony@aol.com

All applications must be postmarked or dated by August 1, 2014.

- Remember to attach the Student's Essay ("Why I want to attend the Shades of Blue aerospace camp"),
 and a copy of his/her latest Report Card.
- Make sure your student has a government issued photo ID and transportation to and from the camp location (UPS Air Cargo Facility, 3110 East Jurupa Avenue, Ontario, CA 91761) each day.
- If selected to attend the Aerospace Camp, you will receive notification NO LATER than August 2, 2014.

If you have any questions, please contact Camp Director, Tony Marshall at 760-247-0456, 760-963-1177 or f4tony@aol.com