Girl's Future Firefighter Camp

Presenting young ladies ages 13-18 a pathway to a career in Public Safety July 26th, July 27th, and July 28th

"It is so important to give back to the community. The idea that women are not capable of long-lasting careers in the fire service, or any public safety career is just not true! It is my hope that as we build confidence in these young ladies that we take them by the hand and show them that they can be leaders in their homes, schools, and careers. This camp was created to remove the myths about what we do as firefighters as well as open their eyes to a bright filture. I must let these girls know that they are strong, confident, and brave and yes, they can be ANYTHING they want to be!" Fire Chief, Shelly Carter, Executive Director

Presenting young ladies ages 13-18 a pathway to a career in Public Safety Girl's Future Firefighter Camp provides a unique opportunity to gain insight into the training, duties, and expectations of firefighters. The girls will participate in a variety of mental and physical challenges, including: Physical Training; Dispatch Operations; Hoseline Operations; Ladder Operations; Ropes and Knots, Pump Operations, Law Enforcement knowledge, Arson Investigation and Code Enforcement; Reports Writing; and Emergency Management. Campers will also become CPR and AED Certified.

Just to name a few!

Who We Are

* Girl's Future Firefighter Camp has been in operation for 9 years established in 2015. We are proud to be back this year with much more to offer the girls. We have collaborated with the Bloomfield Fire Department to expand our hands-on training with real life firefighting equipment.

*Girls Future Firefighter Camp is comprised of amazing women and a few amazing men that are currently working or retired from the fire service and other public safety careers.

*We stand united by the belief that these young ladies will receive guidance from the camp by highly trained and certified instructors. That the seed we plant in them during their camp experience will grow into awesome careers and futures not just for themselves but for other young ladies to come. This training from our instructors and parental intervention can make a huge improvement in student achievement and community's quality of life while building self-pride and confidence!

WHEN:

July 26th 8:00 am - 4:00pm July 27th 8:00 am - 4:00pm July 28th 8:00 am - 12:00pm 1:00 pm - Graduation

WHERE:

The Bloomfield Center Fire Department 18 Wintonbury Ave Bloomfield, CT 06002

COST:

FREE!!!

Contact information:

Fire Chief Shelly Carter (860)833-1653 girlsfuturefirefightercamp@gmail.com www.girlsfuturefirefightercamp.com

GIRL'S FUTURE FIREFIGHTER CAMP

PERMISSION TO ATTEND ACKNOWLEDGEMENT OF RESPONSIBILITY AND RELEASE OF LIABILITY

I,, (parent/guardian) allow my daughter,	
, (student's name) to attend and participate in the Girl's	
Future Firefighter Camp, on July 26th, July 27th, and July 28th, 2024.	
Destination/Detailed Description of Activity and Purpose: Location: The Bloomfield Center B	ire
Department, 18 Wintonbury Ave, Bloomfield, CT 06002. Instructors will be GFFC Board Members	ers,
Bloomfield Firefighters, along with uniformed members from various Fire Departments, and commun	iity
volunteers. Training exercises will focus on the following skills: Pump Operations, Engine Ops, Truck C	ps,
Vehicle Extrication, Fire Inspection, Fire Investigation scenarios, Team building, Leadership, Ropes and Knowski.	ots,
Physical Fitness, CRP/AED Certification and Public Speaking. The purpose of the camp is to introduce g	irls
to a career in the fire and emergency services, while focusing on character and self-confidence. Transportat	ion
to and from camp is optional.	
Student Agreement:	
While participating in GFFC, I will accept responsibility for maintaining good conduct and appearance, ar will follow directions always.	d I
ndent's Signature:	

PARENT PERMISSION AND RELEASE OF LIABILITY

This is to certify that I authorize the Camp Commander or a designated representative of the GFFC to secure any and all emergency medical care and treatment for my child for acute illness suffered or injury sustained while participating in the Camp. I understand that, while the safety of my child is a high priority for the GFFC, the GFFC will not be responsible for medical costs associated with injury to my child. I am aware that accidents resulting in personal injury and property damage sometimes occur during participation in the activities described above and particularly can occur while my child is participating in any of the hands-on training exercises described above. In consideration for my child's participation in the Camp, I expressly hold harmless from and waive against the Girl's Future Fire Fighter Camp, Bloomfield Fire Department, GFFC Board Members, Instructors, and volunteers any and all claims for medical expenses, loss of services, injury to person or property, death, or other claims, actions, or liabilities made on behalf of my child, regardless of the cause of such claims, actions, or liabilities or any concurrent or contributing fault or negligence of GFFC, Bloomfield Center Fire Department, or its representatives as such may result from my child's participation in the Camp.

In further consideration for my child's participation in the above-described Camp, I also agree to indemnify and hold harmless the GFFC, Bloomfield Center Fire Department, GFFC Board Members, Instructors, and volunteers against any and all suits, actions, losses, damages, claims, or liabilities of any character, type, or description, including attorney's fees and court costs, made by third parties against GFFC or its representatives which may result from my child's participation in the Camp. I understand that the GFFC, Bloomfield Center Fire Department, GFFC Board Members, Instructors, and volunteers are not waiving any sovereign or governmental immunity, which it or they have under Connecticut law. I have read and understand this release and sign it voluntarily and with full knowledge of its significance.

Signature of Parent/Guardian	
Printed Name of Parent/Guardian	
Patent/Odardian	
Daytime Number:	
Emergency Number:	
Date Signed:	

THE STATE OF CONNECTICUT

BEFORE ME, the undersigned, a Notary Public i	n and for said County and State, on this day personally	
appeared, known to me to be the person whose name		
	edged to me that he/she executed the same for the purpose	
and consideration there in expressed.		
GIVEN UNDER MY HAND AND SEAL OF C	DFFICE, this day of	
A.D. 21		
Notary Public for State of Connecticut		
My Commission Expires:		

MODEL RELEASE

I,do :	hereby give Girls Future Firefighter Camp, thei
assigns, licensees, and legal representatives the in-even	evocable right to use my name, picture, portrait, o
photograph in all forms and media and in all manners,	, including composite or distorted representations, for
advertising, trade, or any other lawful purposes and I	I waive any right to inspect or approve the finished
version(s), including written copy that may be created a	l and appear in connection therewith. I have read this
release and am fully familiar with its contents.	
Participant Signature:	
Parent Signature:	
(If under 18 years old)	
Home Address:	
Trome / Redress.	

DEMOGRAPHIC INFORMATION FORM

Last Name			
First Name			
Home Address			
City	State	Zip	
Email:			
High School			
Date of Birth			
Driver			
License #	State Issued	Expiration Date	
Emergency Contact			
Phone Number			
Relationship			

REFERENCES:

Personal Reference #1		
Name:		
Address:		
Phone:		
Personal Reference #2		
Name:		
Address:		
Phone:		

ABOUT THE CAMPER

How did you hear about GFFC?	
School Social Media	Word of Mouth
Other:	
In your own words, tell us why you want to part	rticipate in the GFFC:
Do you have any limitations that would limit th YES NO If yes, please explain:	ne activities in which you can participate at the Camp?
Do you need transportation to the campsite?	Yes No
Parent/Guardian Print Name	Student Print Name
Parent Signature	Student Signature

Please submit to:

Fire Chief Shelly Carter

Email: girlsfuturefirefightercamp@gmail.com

For any questions or concerns please contact Fire Chief Shelly Carter at 860-833-1653

HEALTH SERVICE FORM

Student Name:
Will your child require the administration of any medication or medical procedure while at the Camp? Yes \square No \square If yes, please indicate the medication(s) and /or procedure(s) with times for administration:
Medication:
Procedure:
Please give additional information/instructions needed:
OVER THE COUNTER MEDICATIONS: My child has permission to take over-the-counter medications in case of accident or injury. Tylenol/Acetaminophen Benadryl Ibuprofen Imodium Aspirin Pepto/Tums Skin Ointment (rash/antibacterial)
Special considerations or notes regarding over-the counter medications:

If yes, please explain:	
Please list other information not covered in this form that is important for advisors of the camp should know	w: