



CITY OF HARRISONBURG
POLICE
DEPARTMENT

POLICE CHIEF KELLEY WARNER
101 NORTH MAIN STREET, HARRISONBURG, VA 22802
OFFICE: (540) 437-2600
FAX: (540) 437-2691
WWW.HARRISONBURGVA.GOV/POLICE

**Join us and explore the police profession at
The Harrisonburg Police Department's P.A.T.C.H. Camp 2023!
Pride, Accountability, Teamwork, Courage, Honor**

This free program hosted by the Harrisonburg Police Department provides young adults exposure to your local police department and the role it plays in the community. Its goal is to help foster and enhance Pride, Accountability, Teamwork, Courage, and Honor to youth interested in law enforcement by participating in a summer camp. This goal will be accomplished by educating the participants on the various duties in which officers specialize in a relaxed, but active and hands-on approach. The program is supervised by officers within the Harrisonburg Police Department and other volunteers. The P.A.T.C.H. Camp will begin with an orientation event on June 23rd from 1:00 p.m. to 4:00 p.m. The remainder of the camp will be **Monday June 26th to Friday June 30th from 7:45 a.m. to 3:30 p.m.** Lunch will be provided to each PATCH camper but transportation to and from the police department is the responsibility of the family.

If you are interested, please review the requirements below, complete the application on the back and mail or return to the Harrisonburg Police Department lobby **no later than June 9th.**

Harrisonburg Police Department
Attn: Community Resource Unit - PATCH
101 N. Main St.
Harrisonburg, VA 22802

Contact for questions:

Sergeant John Hancock – Community Resource Unit
john.hancock@harrisonburgva.gov
(540) 437-2645

Officer Rebecca Bechtel – Community Resource Unit
rebecca.bechtel@harrisonburgva.gov
(540) 437-2630

HPD P.A.T.C.H. Requirements:

City of Harrisonburg residents will be given priority. Applicants from other jurisdictions will be considered.

Applicants must be 13 to 16 years old.

Applicants must be enrolled in a public or private school and maintain a “C” grade point average.

Applicants need to provide their latest report card to verify.

Applicants must be of good ethical and moral character in school and in the community.

The Community Resource Unit will review all applications for acceptability in this selective screening process.



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To be completed by the applicant, not the parents or guardians, please print clearly.

Part I: Personal Information and References

Name:

Preferred Name (Nickname):

Birth Date:

Address:

Phone Number:

Email:

School Name:

Employer Name:

Phone Number:

Clothing Sizes (Adult: XS/S/M/L/XL/XXL):

Character References (should include 1 teacher or school counselor):

	Name	Relation	Phone
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____



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Part II: Health Concerns

Please list any of the following concerns:

Medical:

Dietary:

Part III: Short Essay

On a separate piece of paper, describe in 100 words or less, why you want to be involved in the Harrisonburg Police Department's P.A.T.C.H. Camp.

Part IV: Signatures

I certify that the information above is true and correct. I give the Harrisonburg Police Department permission to verify all the information and to contact my school, employer, and character references for further information.

Applicant Signature

Parent/Guardian Signature

Date



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**Agreement Assuming Risk of Injury or Damage
Waiver and Release of Claim
For the Harrisonburg Police Department**

I, the undersigned, have voluntarily asked for permission to participate in the Harrisonburg Police Department's P.A.T.C.H. Camp.

I acknowledge that the activities of said P.A.T.C.H. Camp involve physical activities and therefore may include the possibility risk of personal injury or death, and damage or destruction to property, and while participating in activities it may require me to act or refrain from acting in ways that could cause injury to me or loss of property.

Therefore, as consideration for the opportunity to participate, I agree as follows:

1. I freely and expressly ASSUME AND ACCEPT THE RISK of and RESPONSIBILITY for any and all injury (which includes death) to me, and loss, damage, or destruction to any of my property, that I may suffer during the camp. This assumption of risk applies regardless of the cause for the injury, loss, damage or destruction, or the person or persons responsible for the cause, and specifically includes injury, loss, damage, or destruction caused by Harrisonburg Police Department, their officers, employees, and agents, even if it occurs through the negligence, willfulness, or wantonness on the part of such persons or entities.
2. I RELEASE, AND FOREVER DISCHARGE the City of Harrisonburg and the Harrisonburg Police Department, their officers, officials, employees, and agents from any and all liability, claims, suits, costs, and attorney fees for any and all injury (which includes death), and loss, damage, or destruction to any of my property, that I may suffer during the camp, or any events related thereto. This release and discharge apply regardless of the cause for the injury, loss, damage or destruction, or the person or persons responsible for the cause, and specifically includes injury, loss, damage or destruction caused by the Harrisonburg Police Department, their officers, officials, employees, and agents or the property or equipment of such persons or entities, and regardless of whether it occurs through the negligence, willfulness, or wantonness on the part of such persons or entities
3. I agree that if a lawsuit or claim for damages is brought against the City of Harrisonburg or the Harrisonburg Police Department, their officers, officials, employees, and agents, on account of injuries to me or damage to my property, I will INDEMNIFY, DEFEND AND HOLD THEM HARMLESS from all such damages and costs of suit, including attorney fees.
4. **I have read this agreement and understand all of its terms and conditions. By signing below, I am agreeing to be bound by all of those terms and conditions.**

Dated this _____ day of _____, 20__.

Participant's Printed Name: _____ Signature: _____

Address: _____ Telephone Number: _____

Parent/Guardian Name: _____ Signature: _____



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City of Harrisonburg, Virginia



Photo Release

Date _____

I hereby authorize the City of Harrisonburg to interview me and/or use my likeness and name in materials to be used in public service announcements, public education initiatives and in the service of the public good. This authorization extends to all publications whether now known or hereafter existing, controlled by the City of Harrisonburg. I will make no monetary or other claim against the City of Harrisonburg for the use of my interview, likeness and/or name in perpetuity.

Name _____

Signature _____

Relation to Subject (if subject is a minor) _____

Address _____

City, State _____ Zip Code _____

Telephone Number _____ Email Address _____