



City of Concord Police Department  
41 Cabarrus Ave. W Concord, NC 28025  
704.920.5000

## **What is the Youth Police Academy?**

The City of Concord Police Department is excited to provide the residents of Concord ages 12-16 with an opportunity to learn more about the Concord Police Department and the services we provide to the community. Youth participating in the one-day academy program gain firsthand information about the function and operations of the Concord Police Department through lectures and practical exercises.

## **What is the purpose of the Academy?**

The academy is designed to increase understanding between youth and police officers through hands-on education. Our goal is to have youth understand police officers' role in the community, in the criminal justice system and to provide an insight into the issues faced by police officers daily.

## **What topics will be covered and what will participants learn?**

- Concord Police organizational structure
- What it takes to become a police officer
- Techniques of traffic investigation

Throughout the academy participants will be encouraged to ask questions and discuss topics with the officers and instructors.

## **Who will be teaching the academy?**

All instructors will be sworn officers and staff from the Concord Police department who have expertise in the topic they will be teaching.

## **Who can apply?**

The academy is open to all City of Concord youth between the ages 12-16. Participants are encouraged to submit their application early due to class size being capped at twenty-four.



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## **When and where will the Academy be held?**

The academy will be held on Saturday May 21, 2022, at the Concord Police Department located at 41 Cabarrus Ave. W. The academy will begin at 9:00 AM and end at 4:00 PM.

Applications can be turned in to any Concord Police Department School Resource Officer, at the front desk of police headquarters, or emailed to Sgt. Matt Greer at [greerm@concordnc.gov](mailto:greerm@concordnc.gov) or at (704) 920-5063. Application deadline is Friday April 29, 2022.

## **Further Questions?**

Officer Kelemecz- [kelemecza@concordnc.gov](mailto:kelemecza@concordnc.gov)

Officer Bost- [bosta@concordnc.gov](mailto:bosta@concordnc.gov)

Officer Linker- [linker@concordnc.gov](mailto:linker@concordnc.gov)



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## Youth Police Academy Application

### Youth Participant's Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
School Presently Enrolled: \_\_\_\_\_  
Tee Shirt Size (Adult Sizes: S,M,L,XL,2XL): \_\_\_\_\_

### Insurance Information

Insurance Company: \_\_\_\_\_  
Policy Number: \_\_\_\_\_  
Expires: \_\_\_\_\_

### Family Physician Information

Physician's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**Please List ALL medical conditions, medications and allergies that your son/daughter may have:**

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**\*\*NOTICE\*\*** Throughout the youth academy, photos will be taken of participants. If you do NOT want your child's photo to be used and/or published on the City of Concord and/or the Concord Police Department's websites and/or social media outlets; **PLEASE INCLUDE WITH YOUR APPLICATION PACKET A WRITTEN LETTER NOTIFYING THE POLICE DEPARTMENT THAT YOU DO NOT WANT YOUR CHILDS PHOTO PUBLISHED.**



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My Son/Daughter, \_\_\_\_\_, has my permission to participate in the City of Concord Police Department Youth Police Academy. In the event of an illness or injury to my son/daughter while participating in this activity, I consent to any medical treatment or procedures that are deemed necessary in the best judgement of the attending physician or emergency medical personnel furnishing medical services.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Parent/Guardian's Name – Print

### **Parent/Guardian Information**

Name/Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

\_\_\_\_\_ Work Telephone #: \_\_ Alternative

# \_\_\_\_\_ Parent/Guardian

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name/Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

\_\_\_\_\_ Work Telephone #: \_\_ Alternative

# \_\_\_\_\_ Parent/Guardian

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Emergency Contacts**

1<sup>st</sup> Emergency Contact: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

2<sup>nd</sup> Emergency Contact: \_\_\_\_\_

Home Telephone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_



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### PERMISSION TO PARTICIPATE AND LIABILITY RELEASE

1. I/We, \_\_\_\_\_, are the parent(s) or legal guardian(s) of \_\_\_\_\_ (student name, hereinafter, the "Participant"). I/We hereby grant permission for the Participant to participate in the City of Concord, North Carolina Police Department's Youth Police Academy (the "Activity") on \_May 21\_, \_2022\_\_\_\_\_.

2. I/We understand that there are dangers and risks to which the Participant may be exposed to by participating in the Activity, which dangers and risks could result in personal injury, property damage and even death. **To the extent allowed under applicable law, I/We voluntarily agree on our behalf and on behalf of Participant to waive, release, hold harmless, and indemnify, the City of Concord, and each of their officers, employees, agents, affiliates, successors, and assigns (collectively the "Indemnified Parties") from and against any and all claims, demands or liabilities of whatever nature including but not limited to injury, death, or damage, whether in property or nature, which may arise in connection with the Activity or any phase or parts thereof. This waiver/release extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown, and includes liability that may arise out of negligence or carelessness on the part of Indemnified Parties.**

3. In consideration of the Indemnified Parties allowing the Participant to participate in the Activity, I/We agree to assume any and all risks and responsibilities in any way associate with participation in the Activity. **To the extent allowed under applicable law, for myself/ourselves, and in my/our capacity as parent/legal guardian of the Participant, I/We further release, waive, forever discharge, and covenant not to sue the Indemnified Parties, their officers, agents, employees and/or volunteers from any and all liability, claims and actions that may arise from any injury or harm to the Participant, including death, or from damage to my/our property or to the Participant's property in connection with the Activity. I/We understand that this Release covers liabilities, claims and actions caused entirely or in part by any acts or failures of the Indemnified Parties, including but not limited to negligence, mistake or non-supervision.**

4. I/We have carefully read this Release, fully understand its contents and agree to be legally bound by it. No oral representation, statement or inducements have been made with regard to this Release or the Activity.

### **THIS IS A RELEASE OF YOUR RIGHTS. READ CAREFULLY BEFORE SIGNING.**

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Parent/Guardian's Name – Print

\_\_\_\_\_  
Date

\_\_\_\_\_  
Home Telephone Number

\_\_\_\_\_  
Cell/Work Telephone Number



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## **DRESS CODE GUIDELINES**

All participants are expected to wear clothing and shoes that are appropriate, comfortable and safe.

What **NOT** to wear:

- Tank tops, muscle, mesh or see-through shirts or blouses
- See-through clothing
- Clothing advocating drug, alcohol, or tobacco use
- Clothing with inappropriate or suggestive language
- Clothing that discriminates against particular groups
- Excessively tight or baggy clothing; clothing with holes or slashes
- Excessively long or oversized shirts, coats, or jackets
- Sunglasses, hats, caps, stocking caps, bandannas, headbands, skull caps

**\*\*Due to the nature of activities, participants may be outside for extended amounts of time. Please dress accordingly\*\***