

Tangipahoa Parish Sheriff's Department

Young Marines Program

Daniel H. Edwards
Sheriff



THE TANGIPAHOA PARISH SHERIFF'S OFFICE Young Marine Program

Organized and funded by Sheriff Daniel Edwards, the Tangipahoa Parish Sheriff's Office Young Marines Program was formed in December 2005. The late Sheriff Harry Lee of the Jefferson Parish Sheriff's Office introduced Sheriff Daniel Edwards to a youth development program that would directly deal with issues facing the youth of Tangipahoa Parish. With the consent of the United States Marines Corps and Chartered by the National Young Marines Program, the Tangipahoa Parish Sheriff's Office Young Marines Program began. The national program was established by The National Board of Trustees of the National Young Marines, operating under the authority of Public Law No. 243, Seventy-fifth Congress of the United States of America, Chapter 546.

The objectives of the Young Marines Program are to develop within its youth traits of character and physical stamina exemplified by members of the United States Marine Corp. Its purpose is to promote the mental, moral and physical development of its members. Sheriff's Office personnel, instructors and senior staff act as positive role models, instilling in its members ideals of honesty, fairness, courage, respect, loyalty, dependability, attention to duty, love of God, family, and fidelity to our country and its institutions. The program also stimulates an interest in the respect of achievement, including the history and traditions of the United States of America. The program teaches physical fitness through the conduct of physical activities, involving participation in athletic events and close order drill. It is also intended to promote gang and drug-free lifestyle in which its members can take pride. The decision was made and Sheriff Daniel Edwards instituted the Program with the first recruit training that began in March, 2006.



YOUNG MARINES OF THE MARINE CORPS LEAGUE WASHINGTON DC

Young Marines
Enrollment Application
PLEASE PRINT

| | | |
|---------------------------|------------------|------------------------------|
| Last Name _____ | First Name _____ | Middle Initial _____ |
| Age _____ | Gender _____ | Date of Birth _____ |
| Home Street Address _____ | | Social Security Number _____ |
| City _____ | State _____ | Zip Code _____ |

Living with: Mother & Father Mother Father Legal Guardian Other

Mother's Name _____

Home Street Address _____ City _____ State _____ Zip Code _____

Home Telephone Number () _____ Work Telephone Number () _____

Father's Name _____

Home Street Address _____ City _____ State _____ Zip Code _____

Home Telephone Number () _____ Work Telephone Number () _____

(Legal Guardian or Custodial Parent's Name Only) Name _____

Address info same as Mother/Father

Jurisdiction and Court Order Document Number _____

Home Street Address _____ City _____ State _____ Zip Code _____

Home Telephone Number () _____ Work Telephone Number () _____

PHOTO / VIDEO / FILM RELEASE

The Young Marines may encounter the news media, video and film crews, or photographers hired by the Young Marines for the purpose of taking promotional or publicity photographs, video or film. There is a possibility that students and adults attending programs will be photographed. I give my consent to authorize the Young Marines of the Marine Corps League, or any entity or person authorized or designated by them the use and reproduction of any and all photographs, video, or film taken of the person named as the subject of this application during Young Marine training or related activities. I understand there will be no compensation to me. All negative and positives, together with the said prints, video, or film are the property of the Young Marines of the Young Marine Corps League or the entity or person authorized or designated by it, solely and completely. I also waive any right to inspect or approve any photo, video or film taken during said training or related activities. I affirmatively release and discharge the Young Marines of the Young Marine Corps League from responsibility for the distortion or manipulation, wether intentional or otherwise, of photos, video or film taken of your child while a participant in the Young Marine Program.

PERMISSION & WAIVER

I / We, the undersign, do hereby certify that I / We have read and fully understand the attached release and waiver; that I / We have fully consented to such release and waiver and expressly give this minor permission to participate in the Young Marines Program. Furthermore, I / We certify that this application is complete, correct, and true to the best of my/our knowledge.

Mother / Legal Guardian

Date

Father / Legal Guardian

Date

Primary Emergency Contact

(Check if applicable) Contact is the same as: ___ Mother ___ Father ___ Legal Guardian

Last Name: _____ First Name: _____ Middle Initial: _____

Home Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ Pager: (____) _____

Other: (____) _____ Email Address: _____

Alternate Emergency Contact Information (Other than Parents/Guardian)

Alternate #1

Last Name: _____ First Name: _____ Middle Initial: _____

Relationship: _____

Home Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ Email Address: _____

Alternate #2

Last Name: _____ First Name: _____ Middle Initial: _____

Relationship: _____

Home Street Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: (____) _____ Work Phone: (____) _____

Cell Phone: (____) _____ Email Address: _____

Medical Insurance Information (Please provide copy of front & back of medical card)

Name of Medical Insurance Company: _____

Policy Number: _____

Contact Telephone Number: (____) _____

Young Marine Contract and Obligation

PLEASE COMPLETE, READ, AND SIGN

Last Name _____ First Name _____ Middle Initial _____

UNDERSTANDING AND CONDITIONS

1. I understand that I am joining the Young Marines of my own free will and desire. I know that the training will be challenging, but I will accept it and shall always try to do my best.
2. I understand that I am bound to obey all orders and instruction given from time to time by instructors, staff and Young Marines appointed over me in accordance to the rules and regulation governing the discipline of the Young Marines.
3. I understand as a Young Marine in good standing I have the following rights:
 - • Attend scheduled meetings, events and activities that are purposeful, planned and organized.
 - • Meet in a safe, drug and tobacco-free environment under the supervision of Registered Adults.
 - • Be treated fairly with dignity and respect.
 - • Have opportunities to succeed and excel.
 - • Report any inappropriate action by other Young Marines or adults.
 - • Receive a copy of the Young Marines Esprit Magazine in the Fall, Winter, Spring, and Summer.
4. **Young Marine - Core Values**. Every United States Marine upholds the core values of Honor, Courage and Commitment. These values give Marines their strength, regulate their behavior, and bond them together into a force, like no other, capable of overcoming every obstacle and meeting any challenge. The Young Marines' Core values are Discipline, Leadership and Teamwork.
 - a. **Discipline**. Discipline requires that Young Marines show instant willingness and obedience to the rules of the Young Marine program, their parent's rules, and the laws of the land. Discipline also dictates a respect for authority. Young Marines will:
 - 1) Follow all rules and regulations set forth in the Young Marine Guidebooks and manuals.
 - 2) Follow the rules of the home and of their parents, completing chores, obeying curfews, and assisting in the home when needed.
 - 3) Follow all laws of our government and have respect for our leaders, police and those in charge of us.
 - b. **Leadership**. Leadership is the ability to influence others. A good leader is able to effectively pass on from their leaders all that is expected to be accomplished. A true leader leads by example. Young Marines will:
 - 1) Aspire to positively influence the fellow Young Marines all the time.
 - 2) Accomplish their mission by completing all tasks assigned by their leaders and those in charge of them from their parents, teachers, coaches and Young Marine adult leaders.
 - c. **Teamwork**. Teamwork is co-operation between those working together on a task. To truly understand teamwork, Young Marines must learn to listen to their leaders and peers, ask questions to ensure complete understanding, persuade their team that they can accomplish the mission, respect those on their team and their suggestions, help those on their team to accomplish the mission, share in the glory and the failures of the team, and participate in the task as a member of the team. Young Marines will:

- 1) Always work together to accomplish the mission.
- 2) Keep their team motivated at all times even when the mission or task is not a popular one.
- 3) Not grab all the glory for a team effort, but spread it amongst all team members.

5. Young Marines Code of Conduct

a. Article I:

- (1) I am an American youth, proud of my country and our way of life. I am prepared to dedicate myself to educating others and myself in the history, traditions, and institutions thereof. I will do my best to live by the core values of Honor, Courage and Commitment, Discipline, Leadership and Teamwork.

b. Article II:

- (1) I will never let another Young Marine down of my own accord. If in-charge, I will do my best to ensure the safety and well being of those for whom I am responsible. I will immediately report any suspicious activity or behavior to a registered adult.

c. Article III:

- (1) If I am offered drugs, alcohol, or tobacco products, I will politely resist and refuse. I will make every effort to stay clear of situations involving gangs, drugs, alcohol, and tobacco. I will not get involved in the same. I will also aid my friends and schoolmates to stay clear of similar situations.

d. Article IV:

- (1) I will always be loyal to my fellow Young Marines. I will make no statements nor take part in any action that may bring discredit to my God, country, family and Young Marines. If I am the senior Young Marine present, I will take charge. If not, I will obey the lawful orders of those senior to me and support them in every way.

e. Article V:

- (1) When asked about the Young Marines Program, I will answer questions politely, respectfully and to the best of my ability. If I am asked a question that I do not know the answer to, I will refer the person asking the question to a registered adult. I will never give information that I am not certain of nor mislead those who are seeking information about the Young Marines Program.

f. Article VI:

- (1) I will never forget that I am an American Youth and therefore the future of America, privileged with the freedom won and kept by the blood of those who fought to ensure our freedom. I am responsible for my actions, and dedicated to the principles that made my country free.

YOUNG MARINES OBLIGATION

From this day forward, I sincerely promise, I will set an example for all other youth to follow and I shall never do anything that would bring disgrace or dishonor upon my God, my Country and its flag, my parents, myself or the Young Marines. These I will honor and respect in a manner that will reflect credit upon them and myself. Semper Fidelis.

Young Marine _____

Date _____

Parent/Legal Guardian _____

Date _____

Health History (Completed by Parent/Legal Guardian)

PLEASE PRINT (Update Annually)

Note: For the safety and well being of your child ensure all information is true and correct. Your child will NOT be disqualified from the program based on information provided here.

| | | |
|----------------------------|------------------------------|------------------------------|
| Last Name _____ | First Name _____ | Middle Initial _____ |
| Age _____ | Date of Birth ____/____/____ | Social Security Number _____ |
| Parent/Guardian Name _____ | | |
| Home Number (____) _____ | Work Number (____) _____ | |
| Physician's Name _____ | | Date of Last Visit _____ |
| Dentist's Name _____ | | Date of Last Visit _____ |

| The Subject Young Marine: | *Yes | No | Remarks ("Yes" require remarks) |
|--|------|----|---------------------------------|
| Wears Eye Glasses /Contact Lenses | | | |
| Is on a restricted diet | | | |
| Wears a hearing aid | | | |
| Visited the Dentist in the last 6 months | | | |
| Known health problems (knee problems, migraines, etc.) | | | |
| Is under a doctors care | | | |
| Is on prescription medication | | | |
| *Has Allergies | | | |
| Food//Medication//Environmental (pollen, bee stings) | | | |
| Has heart murmur | | | |
| Suffered Rheumatic Fever | | | |
| Had a family member under age 50 die of a heart problem | | | |
| Suffers one or more of the following conditions: Seizures, Diabetes, Asthma, Arthritis | | | |
| Have a history of head injury | | | |
| Been hospitalized or had surgery and dates | | | |
| Had any injuries (no matter how minor) in the past year. (Sprains, broken bones, ingrown toenails, stitches) | | | |
| Received a Tetanus Booster and Date | | | |

I certify to the above to be complete, correct, and true to the best of my knowledge.

Parent/Legal Guardian _____ Date _____

PHYSICAL EXAMINATION (Must be completed by a Physician, PAC, or CRN)

(A current school or sports physical may substitute, if done during the current school year. A photocopy must be included in YMRB.)

Height _____ Weight _____ BP _____ Vision Screen _____

Hearing _____ Lungs _____

Heart Rate _____ Rhythm _____ Hernia _____

Neurological Examination _____

Are there any restrictions or accommodations needed for the following activities?

| Activities | Yes | No | Remarks ("Yes" require remarks) |
|--------------------|-----|----|---------------------------------|
| Competitive Sports | | | |
| Physical Training | | | |
| Swimming | | | |
| Classroom | | | |
| Other | | | |

I, certify that _____, is/ is not physically and medically fit to participate in the Young Marines.

Please provide additional remarks or instructions, if participation in the Young Marines is conditional due to any medical conditions not provided in the remarks above.

Examiner's Signature _____ Date of Exam _____

Print Examiner's Name _____ Title _____

Office Address _____

City _____ State _____ Zip Code _____

Office Telephone Number (____) _____