R.E.Sp.E.C.T. Program
Camp & Clinic Assistance Guidelines

The following is a list of guidelines that the R.E.Sp.E.C.T. Program will use to assist our Cheyenne & Arapaho tribal youth participating in recreational, exercise or sports camps or clinics.

1. All applicants must be enrolled members of the Cheyenne & Arapaho Tribes of Oklahoma and provide a copy of the CDIB (Certified Degree of Indian Blood).

2. Assistance will be given to tribal students/participants who are enrolled in Pre-K to 12th Grade.

3. Applicants must provide a copy of the flyer or brochure with fees and vendor/camp information.

4. Allowance for tribal youth will be one time per year up to ONE HUNDRED DOLLARS ($100.00) for Single Day Camps and TWO HUNDRED DOLLARS ($200.00) for Overnight Boarding Camps to be used towards an accredited camp or clinic in their respective sport or recreation of choice.

5. Checks will be made out directly to the organization who is conducting the camp or clinic, NOT the participant or parent/guardian of the participant. Reimbursements will only be allowed for camps that require online payments. Reimbursement will be made after camp has been completed. Approval will need to be made prior to camp.

6. COMPLETED APPLICATIONS will need to be turned in to the RESpECT Program office two weeks prior to the deadline of their selected camp or clinic. Incomplete applications will not be processed. Applicants are responsible for submitting all required documents.

7. Participants/applicants will be responsible for the remainder of the fees, meals, transportation, supplies...etc, associated with the camp or clinic.

8. Participants are responsible for registering and submitting any required documents to the camp or clinic itself. The RESpECT Program will only process payment, if approved. It is your responsibility to confirm approval of application prior to registrations.

9. Participant and parent/guardian must sign and abide by the RESpECT program “Sportsmanship Creed and Parent Creed”, and must conduct themselves accordingly throughout the camp or clinic.

10. Participants must agree to complete the camp or clinic in its entirety. If the participant fails to do so, he/she will not be eligible to apply for any assistance for an entire year.

11. Participating in any sport can be a dangerous activity, including many risks of injury, and hereby release the R.E.Sp.E.C.T. Program and its employees, and the Cheyenne & Arapaho Tribes, of any responsibilities for accidents of injuries that may occur while participating in the camp or clinic.

I have read and agree to the terms of the R.E.Sp.E.C.T. Program Camp & Clinic Assistance Guidelines.

__________________________________________  ____________________________
Signature                                      Date

R.E.Sp.E.C.T. Program
P.O. Box 143 Concho, OK 73022
Phone: 405-422-7570 Fax: 405-422-8264
R.E.Sp.E.C.T. Program
Camp & Clinic Assistance Application

<table>
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<th>Details</th>
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<td>Full Name</td>
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<td>Male / Female</td>
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<td>Tribe</td>
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<td>CDIB #</td>
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<td>Date of Birth</td>
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<td>Address</td>
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<td>City, State, Zip</td>
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<td>E-mail</td>
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<td>Parent/Guardian</td>
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<td>School</td>
<td>Grade</td>
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<tr>
<td>Camp or Clinic</td>
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<tr>
<td>Type (circle one)</td>
<td>Day Camp</td>
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<tr>
<td></td>
<td>Overnight Boarding Camp</td>
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Camp & Clinic Fees
Make Check Payable to:
Vendor Name & Address:

Amount Requested:

R.E.Sp.E.C.T. Program
P.O. Box 143 Concho, OK 73022
Phone: 405-422-7570 Fax: 405-422-8264
Sportsmanship Creed

I recognize that being a member of the community carries with it responsibilities and rewards, and that as an athlete in the community I must not only embrace those responsibilities, but also conduct myself both on and off the playing field in a way which exhibits respect for myself and others. I, therefore, resolve to conduct myself with dignity as an athlete and as a citizen of the community recognizing and accepting that I:

- Must accept accountability for my behavior and its outcomes.
- Must honor my obligations and promises.
- Must exercise self-control.
- Must be willing to be fair with others in my dealings on and off the playing field.
- Must take pride in myself and my accomplishments, but never at the expense of demeaning another person or group.
- Must respect the efforts of others.
- Must respect authority.

_________________________  ______________________
Signature                  Date

Parent/Guardian Creed

I hereby pledge to provide positive support, care and encouragement for my child participating in youth sports and activities by following this Parent/Guardian Creed:

- I will encourage good sportsmanship by demonstrating positive support for all players, coaches and officials at every game, practice or other youth sports event.
- I will place the emotional and physical well-being of my child ahead of my personal desire to win.
- I will insist that my child play in a safe and healthy environment.
- I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- I will demand a sports environment for my child that is free of drugs, tobacco and alcohol and will refrain from their use at all youth sports events.
- I will remember that the game is for youth not adults.
- I will do my very best to make youth sports fun for my child.
- I will ask my child to treat other players, coaches, fans and officials with respect regardless of race, sex, creed or ability.
- I promise to help my child enjoy the youth sports experience by doing whatever I can such as being a responsible fan, assisting with coaching or providing transportation.

_________________________  ______________________
Signature                  Date