

JROTC RAIDER CHALLENGE

USACC G-1 Personnel In/Out-processing Checklist

In-Processing Checklist:

School Name: _____

- Coach must write names of all Cadets plus the Coach Name on Sign-in Sheet and Input the Gender by each name and date*
- Have all Cadets fill out the Emergency Data*
- Parent signed Waiver Liability Worksheet*
- Take a Clear Group Photo of all Cadets**

Coach has verified and completed all above tasks:

Print Full Name, Rank (if applicable)

Signature

Date: _____

Cell Phone in case of emergency

Out-Processing Checklist:

Coach has accounted for all Cadets and is signing out:

Print Full Name, Rank (if applicable)

Signature

Date: _____

*Return this checklist and all above documents to G-1 Cell

**One Cadre/Coach will take a clear picture on their mobile device of their JROTC team in case of emergencies.



EMERGENCY DATA WORK SHEET
JROTC Raider Challenge Event – Site Code FKKY
26th Calvary Drive, Building 5942
Fort Knox, KY 40121

CADET Last Name:		CADET First Name:		CADET Middle:		AGE:	
JROTC HS Name:							
USACC Brigade #:		Gender:		Date of Birth:		Place of Birth:	
Brigade Commander:		Brigade JROTC POC:					
Blood Type:	Ethnicity:		Last 4 SSN:		Height/Weight:		
Eye Color:			Hair Color:				
Home Address:							
CADET Cell Phone:							
History Of:	Heat Injury:			Cold Injury:			
<u>PARENT (GUARDIAN) INFORMATION:</u>							
1) First, Last Name:				Relationship:			
Email Address:							
Home Address:							
Phone Number:							
Military Service (circle one): Active Duty? Y or N Reserve/National Guard? Y or N Retired Military? Y or N							
2) First, Last Name:				Relationship:			
Email Address:							
Home Address:							
Phone Number:							
Military Service (circle one): Active Duty? Y or N Reserve/National Guard? Y or N Retired Military? Y or N							
3) First, Last Name:				Relationship:			
Email Address:							
Home Address:							
Phone Number:							
Military Service (circle one): Active Duty? Y or N Reserve/National Guard? Y or N Retired Military? Y or N							
<u>COACH/CADRE INFORMATION:</u>							
1) First, Last Name:				Relationship:			
Email Address:							
School Address:							
Phone Number:							
2) First, Last Name:				Relationship:			
Email Address:							
School Address:							
Phone Number:							
3) First, Last Name:				Relationship:			
Email Address:							
School Address:							
Phone Number:							
<u>REMARKS/NOTES:</u>							

INDIVIDUAL RELEASE OF LIABILITY/HOLD HARMLESS AGREEMENT ("AGREEMENT")

PRIVACY ACT STATEMENT

This information is collected pursuant to 5 USC 301. The purpose of this information is to form a legally binding release agreement. The information will be used to evaluate and defend potential claims against individuals concerned and the United States Government. The information could ultimately be used in civil litigation and in the course of preparation for litigation. Supplying this information is voluntary; however, failure to provide the information could result in a denial of permission to participate in the events stated below.

I, the undersigned, acting in my own capacity and on behalf of myself, my heirs, children, wards, guardians, executors, administrators, subrogees and assigns and estate, under the authorities Army Regulation 145-2 grants the the Commanding Generals of U.S. Army Cadet Command and Fort Knox, Kentucky, while participating in the event(s) stated below, do hereby release the United States; U.S. Army; the Commanding Generals of U.S. Army Cadet Command and Fort Knox, Kentucky, and their officers, agents, and employees of and from any liability, claims, court actions, or causes of action for personal injury or property damage which I may suffer while participating in said events, during my transportation to and from the site, or while using facilities at Fort Knox. This release from liability covers any injury or damage resulting from my visit to Fort Knox to specifically include, but not be limited to, participation in those events.

Law Governing: The terms of this Agreement shall be governed and interpreted in accordance with the statutes and regulations of the United States, including but not limited to the regulations of the Department of Defense, Department of the Army, and U.S. Army Cadet Command, federal law, including but not limited to federal common law, and, when state law is incorporated as federal law, by the applicable laws of the Commonwealth of Kentucky.

Forum Selection: The parties agree that any dispute concerning participation in and/or claim and/or case (howsoever termed or denominated) arising from or pertaining to participation in the Raider Challenge and associated activities shall be brought before and resolved before the appropriate administrative and/or judicial forum in the Commonwealth of Kentucky, except to the extent applicable federal law vests subject matter jurisdiction in another forum.

Medical/Hospitalization Insurance: The Signatory to this Agreement represents that to the best of his or her knowledge he or she is covered by medical and hospitalization insurance or other financial assurance mechanism which will cover medical care and/or treatment and/or hospitalization and/or emergency medical transportation which may arise during the Raider Challenge event. The Signatory (and his or her Guardian(s) and/or parents) acknowledge that participation in the Raider Challenge and associated activities does not entitle the Signatory or any others to medical and/or hospitalization care, treatment and/or costs coverage at the cost and/or expense of the United States, Department of Defense, Department of the Army and/or U.S. Army Cadet Command.

Area of Activities: The Signatory to this Agreement acknowledges receipt of information which delineates the areal extent of the Raider Challenge and associated activities and that there is no invitation or permission extended to other areas, facilities and/or activities, and agrees to remain within said areal extent of the Raider Challenge and associated activities. This limitation does not apply to such person who has a right to visit and/or utilize other areas, facilities and/or activities such as military retirees, active duty and reserve component military service members, and their respective dependents. Should the Signatory wish to visit other areas, facilities and/or activities, he or she shall obtain a Temporary Visitors Pass at the Welcome Center before visiting such other areas, facilities and/or activities.

Waiver and Hold Harmless: The Signatory to this Agreement and his/her children, wards, guardians, heirs, executors, administrators, subrogees and assigns agree to and accept being allowed to participate in the Raider Challenge and associated activities in consideration for a full and complete release of any and all claims, demands, rights, and causes of action of any kind, whether known or unknown, including without limitation any claims for fees, costs, expenses, survival, or wrongful death, arising from and all known or unknown, foreseen or unforeseen bodily injuries, personal injuries, death, or damage to property, which they may have or hereafter acquire against the United States, its agencies, its agents, servants, or employees, on account of the subject matter of any administrative claim or suit, or that relate or pertain to or arise from, directly or indirectly, the participation in the Raider Challenge and associated activities. Each Signatory to the Agreement and his/her children, wards, guardians, heirs, executors, administrators, subrogees and assigns further agree to reimburse, indemnify, and hold harmless the United States, its agencies, its agents, servants, and employees, from and against any and all claims, demands, rights, and causes of action of any kind, whether known or unknown, including without limitation claims for subrogation, indemnity, contribution, or lien of any kind, or for fees, costs, expenses, survival or wrongful death that relate or pertain to or arise from, directly or indirectly, any act or omission that relates to the participation in the Raider Challenge and associated activities and/or being a spectator thereto.

I make this Individual Release of Liability/Hold Harmless Agreement voluntarily and realizing the consequences of said waiver and release.

PARTICIPANT NAME

EVENT(S):
RAIDER CHALLENGE 2023
AND ALL ASSOCIATED ACTIVITIES

PARTICIPANT SIGNATURE

DATE(S) OF EVENT:
O/A 02-05 NOVEMBER 2023

PARENT/GUARDIAN NAME
(IF PARTICIPANT IS UNDER AGE OF 18)

LOCATION(S) OF EVENT:
A/N FORT KNOX, KENTUCKY

PARENT/GUARDIAN SIGNATURE
(IF PARTICIPANT IS UNDER AGE OF 18)

ADDRESS

CITY STATE ZIP

WITNESS NAME

WITNESS SIGNATURE

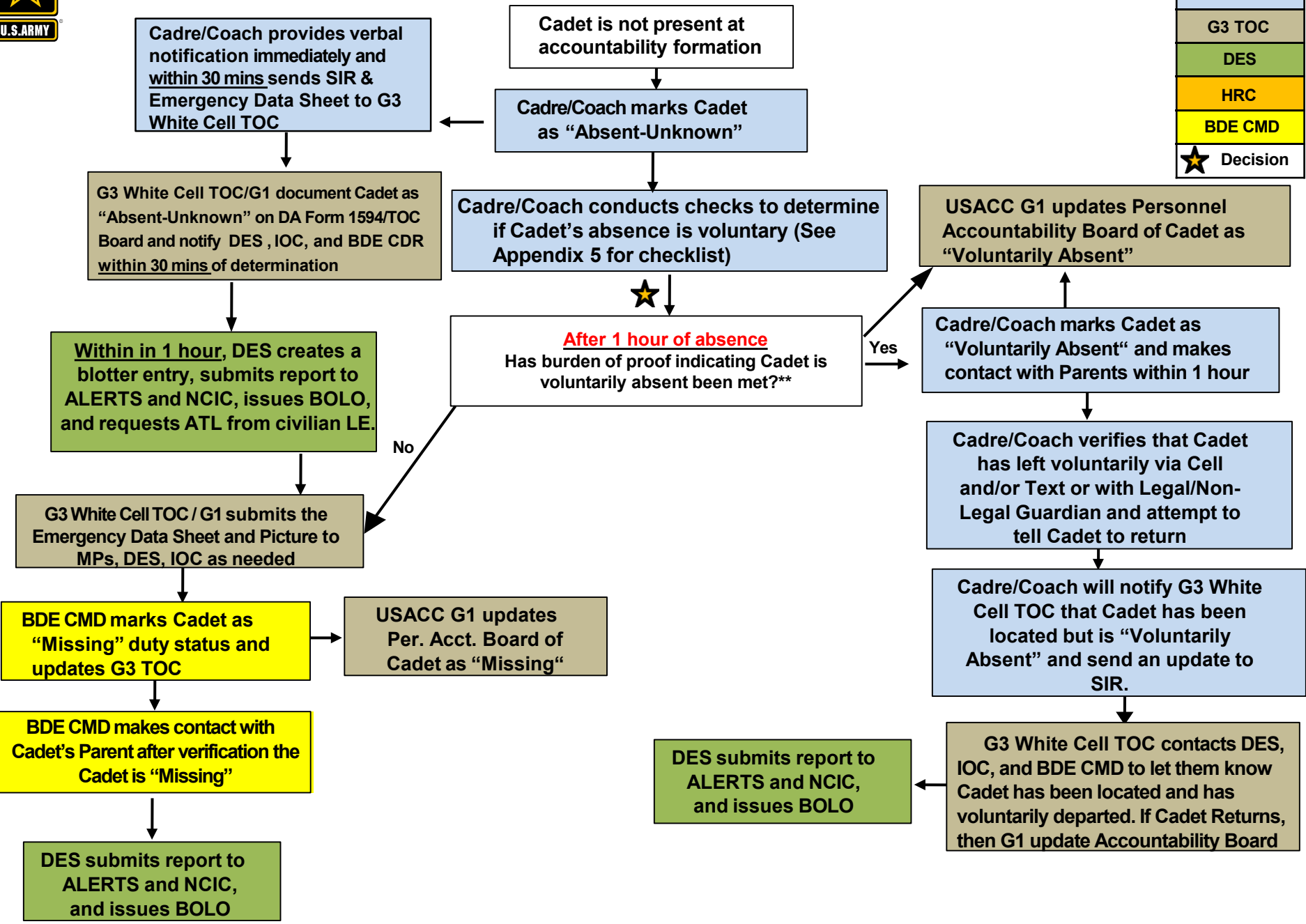
DATE



Absent Cadet Flowchart

Legend

Cadre/Coach
G3 TOC
DES
HRC
BDE CMD
★ Decision



Operations Guide to a Absent and Missing Persons on Fort Knox during a JROTC Event

I. For Absent and Missing Cadets

1) Prior to arrival to Fort Knox, Cadre/Coaches are to ensure that each JROTC Cadet fill out the Enclosure 1: Emergency Data Sheet. In an event of emergency, Cadre Coaches will send this Emergency Data sheet along with a copy of a photo and CCIR of the Cadet to G3 TOC within 30 mins of the Cadet being missing.



ENCL 1. JROTC EMERGENCY DATA SHEET (Template) to Fort Knox



Annex H (CCIR

2) Cadre/Coaches/G3 TOC will review the “Absent Cadet Flowchart” and Battle Drills in the event of a death or missing JROTC Cadet and initiate a CCIR.



TAB B - Absent or Missing JROTC Cadet

3) Cadre/Coaches will use Enclosure 2 – (Cadre/Coach Checklist in Searching for a Missing JROTC Cadet) to start the initial search of a missing JROTC Cadet and submit a copy to the G3 upon completion.



ENCL 2. Cadre-Coach Checklist

4) Within 1 hour of the missing Cadet, the Cadre/Coach will notify G3 TOC giving a reasonable determination (if applicable) whether the Cadet is Missing or has voluntarily departed without permission.

5) See flow chart for the steps to take after 1 hour.

6) Cadre/Coach will use the below call G3 White Cell TOC @ _____, their lead Brigade JROTC Chief, and their respective Brigade Commander:

Name of Directorate	POC/BDE CDR	Phone Number
CID	Duty Agent	931-503-6922
Military Police	Desk SGT	911 or 502-624-6016
1st Brigade Commander	COL Jason Wayne	502-994-4807
2nd Brigade Commander	COL Allen Kehoe	910-728-6036
3rd Brigade Commander	COL Austin Cruz	270-300-1109
4th Brigade Commander	COL Michael Farmer	910-257-3762
5th Brigade Commander	COL Philbert Palmore	210-837-8710
6th Brigade Commander	COL Anthony Marante	912-604-7382
7th Brigade Commander	COL Edwin Chilton	502-994-4385
8th Brigade Commander	COL Curtis Proffitt	253-376-9659
Lead Brigade JROTC Chief	School or BDE POC	Coach/Cadre

II. For a Missing Adult – Not a Soldier or Civil Servant

- 1) Refer to the Fort Knox SOP on Absent and Missing Person Response Plan, ANNEX D (Missing Adult-Not a Soldier or Civil Servant).



Annex D (Missing Adult) to Fort Knox At

III. For a Missing Civil Servant

- 1) Refer to the Fort Knox SOP on Absent and Missing Person Response Plan, ANNEX B (Missing Civil Servant) and Appendix 1 (Checklist for Missing Civil Servant) to ANNEX B (Missing Civil Servant for procedures on missing DoD Civilians).



ANNEX B (Missing Civil Servant) to Fort Knox



ANNEX I (N-Sequence Hour Ch

IV. For a Missing Soldier

- 1) Refer to the Fort Knox SOP on Absent and Missing Person Response Plan, See Appendix 2 (Flowchart #1) to ANNEX A (Missing Soldier) and Appendix 3 (Flowchart #2) to ANNEX A (Missing Soldier).
- 2) Examples for Investigation Officer (IO) letters are located under Appendix 4 (Sample 15-6 Investigation Officer Appointment Memo) to Annex A.
- 3) Appendix 5 gives examples of DA Form 4187s for duty status changes. (This HR Action is now done in IPPS-A as a Duty Status HR PAR to change the duty status of a Soldier. An HR Professional in G1/S1 will conduct this task.)
- 4) Annex A (Missing Soldier) outlines the steps taken by the Soldier's unit, the unit PAO, DES, and IOC if the Soldier is AUN, Missing or AWOL.



Annex A (Missing Soldier) to Fort Knox



ANNEX I (N-Sequence Hour Ch

V. Below is the Published Fort Knox Absent and Missing Person Response SOP with all Annex & Appendices):



Fort Knox Absent & Missing Person Respc

ANNEX M: Cadre/Coach Checklist for a Missing JROTC Cadet

Name of Cadre/Coach: _____

Date/Time: _____

_____	Has an initial assessment been conducted to determine if the cadet's absence is involuntary? (Missing person or Absent Unknown)
_____	Has a cadre member conducted a headcount and checked all exits, vehicles, empty rooms, and offices?
_____	Has a cadre member verified the name of the missing cadet?
_____	Has a cadre member/supervisor notified the MP's about the situation? What time? Last known location? Last time cadre members saw the cadet. MP Time: Last know location: Last time seen/date: _____ Video? Y or N
_____	Were the cadet's parents notified?
_____	Where did the cadre member(s) check for the cadet? Locations below:
_____	(Once cadet is located) When and where was the cadet located? When: Where:
_____	(Once cadet is located) Where the MP's notified? They have to be notified in order for the cadet to be taken out of NCIC. Did they conduct a Health and Welfare check?