

Community Action Ministries' (CAM) annual
1 Night in a Box/ Poverty Simulation Experience
February 28-29, 2020

1 Night in a Box/Poverty Simulation is an educational program designed to enlighten participants about the plight of poverty and homelessness.

Location: Goodrich Memorial United Methodist Church 200 W Hayes St., Norman, OK 730769
We will be allowed to use their facility if there is precipitation or if it is below 32°.

Date/Time: Friday, Feb. 28 at 6:00 PM- Sat., Feb. 29 at 7:00 AM

Age limit: Participants must be in sixth grade or older.

Limited space is available; so to save your spot, email Donna Hooper at Donna.Hooper@cam-inc.net or call and leave a message at (405) 329-8041 to get your name on the list.

Things to bring on Friday:

- Permission slip/Press release form
- Money collected (**\$30.00 minimum to participate**) Money will go to non-profit organizations that work to prevent homelessness. Anyone that brings more than \$150.00 will have his or her name put in a drawing for a chance to win a gift card.
- ***It is not mandatory that you spend the night to participate in the poverty simulation. Just let us know your plans ahead of time.***
- A large cardboard box or individual tent to sleep in - *Don't wait until the last minute to find your box.*
- Suggested, one roll of duct tape to put your box together
- One canned vegetable, which will be combined with everyone else's to make stone soup for the night's meal
- Sleeping bag or blankets
- Wear layers of clothes, gloves & a hat

Things not to bring:

- Pillow
- Bring phones at your own risk

Tentative agenda:

6:00-6:30 PM Registration & set-up boxes/tents

6:30-7:00 PM Orientation

7:00-7:25 PM Guest Speakers from Bridges & Pivot

7:25-7:35 PM Bathroom break

7:35-8:20 PM Orientation of Poverty Simulation- Receive new identity

8:20-10:00 PM Poverty Simulation

10:00-10:30 PM Debriefing

10:30-11:00 PM Soup Line

11:00-11:30 PM Personal testimony

11:30 PM-6:30 AM sleep in the boxes

6:30-7:00 AM clean up & pick up time

7:00 AM- Please make sure your ride home is on time!!!

Option:

Many times the homeless will be able to eat only one meal a day, which might be provided by a non-profit organization or from a dumpster. **If participants would like to get a true feeling of what it might be like to be homeless, we ask that they refrain from eating on Friday, until they are served the soup line.**

Please feel free to visit CAM's website (www.cam-inc.net) to see all the other volunteer projects we have available on a monthly basis. A few days after this event, you may go to the website and view pictures that may be downloaded.

Please contact Donna Hooper if you have any questions:

Donna.Hooper@cam-inc.net

405-887-1787

Community Action Ministries (CAM) to present its annual
1 Night in a Box Experience/
Poverty Simulation

To Parents and Participants:

Press Release:

Welcome and thank you for being willing to participate in *1 Night in a Box/Poverty Simulation*. Participants may be videotaped and /or photographed. Would you be willing to allow us the privilege of using your photo/video of *this event* through rebroadcast via television, radio, or through our website at www.cam-inc.net? Please sign below:

Name of Participant: _____ Age: _____

Signature: _____

*Must be signed by a parent if younger than 18 years.

Consent Form for *1Night in a Box*

I, the parent, or legal guardian of _____

Name of participant

understand that, by attending an educational program hosted by CAM he/she is being provided with an opportunity to learn about a unique community of individuals with a wide variety of experiences and backgrounds.

I understand the inherent risk that may be associated with my child's attendance at a drop-in. I am confident in the ability of the CAM leaders, as the sponsor/leaders/supervisors of this education program, to keep my child under their direct supervision, and to take all reasonable precautions while he/she is in the drop-in.

I release Community Action Ministries' leaders from any liability during this event.

I understand that there is to be no pillows.

Participant's signature Date: _____

Parent/Guardian Signature Date: _____

* Under 18 years old must be signed by a parent

Emergency name & phone number: _____

Church attending: _____

Please bring this form, as well as a minimum \$30 funds to the event.

If you have had a background check within the last year and would be willing to submit a copy to replace this form that would be appreciated.

Anyone over the age of 18 please complete:

I hereby request the Oklahoma State Bureau of Investigation (OSBI) to release any information, which pertains to any record of convictions contained in its file maintained on me whether local, state, or national. I hereby release Community Action Ministries, Inc. (CAM) and the Norman Network of Youth Ministries from any and all liability resulting from such disclosure.

Print First Middle and Last Name

Print maiden name of applicant

Print all aliases, including all married names

Place of Birth

Social Security Number

Current Address: Street apt # city zip

e-mail address

Signature Today's Date

Background check completed: Date: ___/___/___ clear record ___yes ___no