# CAMP OLYMPIA PARENT PACKET CLP 2021



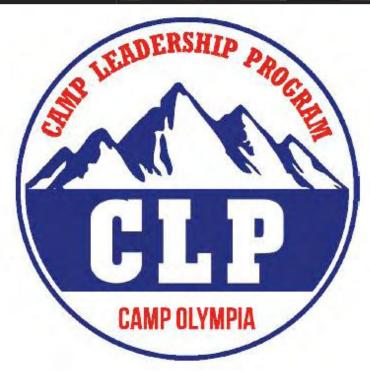




# **2021 TERM DATES**

**CLP 1:**JUNE 13 - JULY 3

**CLP 2:** JULY 4 – JULY 24









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www.campolympia.com

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# **OVERVIEW**



Dear Camp Olympia Parents,

Summer is right around the corner, and we are so thrilled to have you and your camper here this summer! Before all the fun can begin, there is important information and required forms in this packet that will help you get ready for the BEST SUMMER EVER! We encourage you to use this "Parent Packet" as a resource, but complete all required forms ONLINE by logging in to the <a href="Forms Dashboard">Forms Dashboard</a> from our website. Please take time to review the list of forms below, their deadlines, and how to complete them. In order for your camper to receive his/her cabin assignment, we must have his/her full tuition AND all required forms on file.

We understand that due to COVID a lot has changed, but we want to ensure you that we have planned and are continuing to prepare an O-Mazing summer for your camper. Please continue to check our website for <u>COVID related updates</u>. We can't wait for you to be here!

Campfully,

Camp Olympia Staff

ONLINE FORMS DASHBOARD - The "PARENT LOGIN" link is found at the very top of our website, campolympia.com

Once you log into your account, you will be able to view:

- · FORMS DASHBOARD Complete forms online and print important documents for the summer
- UPDATE ADDRESSES/PHONE NUMBERS Review and update contact information
- FINANCIAL MANAGEMENT Review and update your financial information for tuition and other payments to camp

DUE DATE

· CAMP INTOUCH ONLINE COMMUNITY - View photos, send emails to your camper, and read daily news during the summer

TO COMPLETE

· LOGIN DETAILS - Change your e-mail or password

CAMP OLIMPIA FORMS	DUEDATE	10 COMPLETE
Health History	June 1	Online - Forms Dashboard
Parent Insurance Card	June 1	Paper form in the "Parent Packet" - page 18
Physician's Examination Form	June 1	Paper form in the "Parent Packet" - page 19
Camper Policy Agreement	June 1	Online - Forms Dashboard; also found on page 20
Parental Authorization for Camper Pickup	June 1	Online - Forms Dashboard
Permission to Attend, Release, and Indemnity	June 1	Paper form in the "Parent Packet" - page 23
Special Participation Agreement In Relation		
to Risk of Coronavirus Exposure	June 1	Paper form in the "Parent Packet" - page 25
Additional Options Form	June 1	Online - Forms Dashboard; Additional Options; also found on page 28
ADVENTURE EXPERIENCE FORMS	DUE DATE	TO COMPLETE
ADVENTURE EXPERIENCE FORMS  Adventure Experiences Registration Form	<b>DUE DATE</b> June 1	TO COMPLETE  Paper form in the "Parent Packet" - page 29
Adventure Experiences Registration Form	June 1	Paper form in the "Parent Packet" - page 29
Adventure Experiences Registration Form Adventure Experiences Agreement to Participate	June 1 June 1	Paper form in the "Parent Packet" - page 29 Paper form in the "Parent Packet" - page 30
Adventure Experiences Registration Form Adventure Experiences Agreement to Participate Adventure Experiences Health History Colorado Dept. of Health & Environment	June 1 June 1 June 1	Paper form in the "Parent Packet" - page 29 Paper form in the "Parent Packet" - page 30 Paper form in the "Parent Packet" - page 31
Adventure Experiences Registration Form Adventure Experiences Agreement to Participate Adventure Experiences Health History Colorado Dept. of Health & Environment Certificate of Immunization	June 1 June 1 June 1 June 1	Paper form in the "Parent Packet" - page 29 Paper form in the "Parent Packet" - page 30 Paper form in the "Parent Packet" - page 31 Paper form in the "Parent Packet" - page 32
Adventure Experiences Registration Form Adventure Experiences Agreement to Participate Adventure Experiences Health History Colorado Dept. of Health & Environment Certificate of Immunization Health Statement by Licensed Medical Personnel	June 1 June 1 June 1 June 1 June 1	Paper form in the "Parent Packet" - page 29 Paper form in the "Parent Packet" - page 30 Paper form in the "Parent Packet" - page 31 Paper form in the "Parent Packet" - page 32  Paper form in the "Parent Packet" - page 33

\*Completed paper forms may be uploaded as a PDF in the Forms Dashboard.\*



CAMP OLYMPIA FORMS



#### We want to welcome you to the Olympia family!

We have been the Girls' and Boys' Camp Directors at Camp Olympia for over fifteen years. Being parents ourselves of one camper and one staff member, we know you will be entrusting us with your most precious possession. We do not take that responsibility lightly. We are committed to providing the best possible camping experience for your child. We love camp and the benefits that it gives to children, and this year in particular, we appreciate this experience even more. Camp Olympia is a special place where children learn responsibility and cooperation, as well as gain independence and self-esteem. Camp builds character and values in children that help them achieve success in life. If you ask our longtime campers and staff what they cherish most about the camp experience, most will tell you it is connecting with others and developing true, long-lasting friendships. We are blessed to work in an environment where such friendships are formed.

We understand how important it is for you to be a part of your child's camping experience. Each day, we will write an update called "The Camp Connection" and post it on our website so you can stay connected with what is going on at camp. Also, you will

hear from our CLP Director, Nick Deckert during the term. In this packet, we want to share with you information to help you prepare for camp as well as answer the specific questions parents ask most often.

However, if you have further questions, please don't hesitate to call us at 936-594-2541 or send us an email: <a href="mmauldin@campolympia.com">mmauldin@campolympia.com</a> or <a href="mmauldin@campolympia.com">cmauldin@campolympia.com</a>. We'd love to hear from you.

Campfully,

Michelle and Cody Mauldin



#### **OUR MISSION:**

# Camp Olympia is dedicated to having fun together, helping people grow in body, mind and spirit.

We believe it is of the utmost importance that you know our values. Below are descriptions of the key words from our mission statement.

**DEDICATED.** We're sold on the value of camping. The real life experience that camping provides cannot be matched for educational value. Preservation of this opportunity for future generations is a must. As we offer a program promoting adventure, challenge, fun, and growth to people of all ages, we will continue to affirm the value of camping and its many benefits.

**FUN.** Fun keeps people coming back for more. We want our facility and program to be enjoyable for everyone who comes through our gates. We create a family atmosphere where FUN begins as an attitude and becomes a way of life. At Olympia, fun is second only to safety.

**PEOPLE.** There is nothing of greater value than human life. We consider safety our top priority in evaluating, planning, and programming for any individual or group at Camp Olympia.

**GROW.** The physical, mental, and spiritual growth of every person at Olympia is important. We want people to leave Olympia with more esteem for God, others, and themselves, and to feel positively challenged to work and plan for a successful life. Our program and facilities have been designed with the positive growth of people in mind.

**BODY.** We encourage physical activity and new challenges throughout our daily schedule, allowing time to rest and reflect on the day's events.

MIND. We provide a safe haven for working through real life situations and resolving conflict with the help of peers and counselors.

**SPIRIT.** Growth at Camp Olympia is encouraged daily with a wholesome Christian atmosphere, and non-denominational Christian Vespers are offered on Sundays.



#### THE OLYMPIA SUMMER TEAM

Hello from Camp O! I'm Debbie Stubblefield and I serve as the Administrative Director for camp. I was fortunate to have been a camper at Olympia starting at age seven, then worked as a counselor while attending Texas A&M University, and have been on the year-round director staff since 2004. My husband, David, and I met at Olympia as counselors and have two sons, who currently are campers here at Olympia. We are truly a camp family believing in the benefits that the camp experience provides is unlike anything else!

Camp Olympia is blessed with an outstanding year-round staff. All have a passion for camping and are dedicated to the Olympia team. We are all always here to help you and can be reached at any time by phone or email.



dstubblefield@campolympia.com



LaMarc started his camping career with Olympia in 2016. He has worked as a Counselor, Summer Assistant Director, Intern, and has been a year-round Assistant Director since 2019. LaMarc is part of our media team, overseeing our videography department and is also in charge of our challenge course. Throughout the school year, he helps recruit and interview counselors for the summer.

lbroussard@campolympia.com



worked as a Summer Assistant Director and as an Intern, and now as an Assistant Director on our year-round team! Keegan is in charge of billing for camp, activities, and our fabulous pool! Throughout the year, Keegan is in charge of tours for potential camp families, as well as recruiting our awesome summer staff!



as a Summer Assistant Director and Intern before joining our year-round staff as an Assistant Director in the summer of 2017. Nick is now in charge of our O'Crew (staff program for 17-year-olds) and our Counselor Leadership Program. Nick also runs our year-round Retreats Program, ensuring that all groups attending have a great time.

ndeckert@campolympia.com

kcallahan@campolympia.com



selor in 2014, worked as a Summer Assistant Director from 2015 - 2018, and now has joined the year-round staff as an Assistant Director. He is in charge of our waterfront, where he oversees extensive lake activities. During the school year,

**Andy Hatcher** 

Andy started at Camp Olympia as a Coun-Andy also is responsible for staff recruiting and transportation.



Madison started at camp as an intern in 2016. She then joined our year-round staff as an Assistant Director in the summer of 2017. Madison oversees many aspects of camp including leading our photography team, marketing efforts, horsback program, Jr. Golf Academy, nightly programs, and Sunday Vespers.

mflowers@campolympia.com



Jasie joined our year-round staff as an Assistant Director this year, with 4 years of summer camp experience. She heads up all summer activitiy scheduling. During the year Jasie also manages the scholarship program and coordinating camper parties in various cities.

jhatcher@campolympia.com

ahatcher@campolympia.com



#### INFORMATION PARENTS WANT TO KNOW

#### **OPENING DAY ARRIVAL**

Camp's opening days are on **SUNDAYS!** We will begin opening our gates by **12PM** and ask that families arrive in their allotted time as we will stagger check-in times alphabetically. We will email you your check-in time in the week prior to Opening Day. Our goal in the process is to create a clean "bubble" inside of camp. We also ask that you and your family **stay in your car** unless otherwise directed by a Camp Olympia staff member.

Upon arrival at camp, we will check-in your camper and conduct an initial health screening, including a temperature check. At this time, you will present a copy of your negative PCR test upon entry. Following the health screening, we will direct you to your cabin.

Once you get to your camper's cabin, a staff member will meet you at your car and unload your camper's belongings. *Please do* <u>NOT</u> exit your vehicle. You and your camper will say your goodbyes and the counselor will escort your camper to the cabin. All camper belongings will be disinfected prior to being moved into the cabins.

If you have **medications** to drop off or need to speak with a **nurse** before leaving, there will be an area to stop your car and speak to a nurse while staying in your car and while practicing safe social distancing. There will also be an opportunity to purchase a few items from our outdoor Country Store kiosk prior to leaving our gates.

We will have our annual **car decorating contest** so don't forget your car paint, balloons, streamers, and other fun decorations.

We ask that you use the **bathroom** before getting to camp as bathroom availability will be limited.

#### **CLOSING DAY DEPARTURE**

Camp's closing days are on **SATURDAYS!** Our gates will begin opening at **9:30AM**, and your pick-up time window will be emailed to you in the week prior to closing day. We also ask that you and your family **stay in your car at all times** unless otherwise directed by a Camp Olympia staff member.

Upon arrival, at your designated pick-up time, you will drive through Camp's front gate and be greeted by a staff member. This staff member will ask for identification which we ask you will put against your car window, keeping a barrier between you and our staff. That staff member will cross-check your identification with the approved names you listed on the Parental Authorization for Camper Pickup Form (found within the online Forms Dashboard), which indicated who you have specified to be allowed to pick up your camper. Once cleared to proceed, you will then drive down the Cabin Loop to your camper's cabin. Here, you will remain in your car and your camper will meet you at your vehicle while the counselors load your camper's belongings into your vehicle.

Once you have your camper and belongings, you will drive the rest of the loop following traffic to head out of camp. Note, any camper **medication** will be placed within the camper's trunk prior to pickup thus eliminating the need to stop by the Nurses' Station.

#### **CLOSING DAY PROGRAM**

We will <u>NOT</u> be hosting our traditional Closing Day Program and lunch this year. We will, however, email our slideshow and term video after camp for you to enjoy with your camper. Additionally, official camper/cabin pictures will not be available to purchase while at camp. Instead, these will be available through our online photo service.

#### **COVID PROTOCOLS**

Our COVID Prevention Plan is <u>online</u>. This plan will continue to evolve as more guidance from the State, CDC and the American Camping Association is provided leading up to camp. Please review all of camp's prevention protocols as well as preventative measures for you and your family to take prior to camp.

# TRANSPORTATION & TRAVEL RESTRICTIONS TO & FROM CAMP

Camp Olympia will NOT be providing bus transportation for pick up or drop off this summer (from the airport as well as our other Houston/The Woodlands area pick-up locations) in an effort to limit COVID exposure. All campers must be driven to camp by parents/guardians. If you have a camper who lives out of state or country and requires flying in to attend camp, we require that you make arrangements to fly in at least 72 hours prior to camp's opening day. A COVID test must be conducted within 72 hours of opening day, with a negative test result presented at arrival. We also ask that during your travels, you practice social distancing, mask wearing, safe cleaning practices, and quarantining as best as possible.





#### INFORMATION PARENTS WANT TO KNOW

#### PARENT CONTACT INFORMATION

Please confirm the accuracy of the parent contact information listed in our system by logging in via the <u>Parent Login</u> on our camp website and accessing the Update Addresses/Phone Number link. For divorced families, please include contact information for the parent(s) who has custody of the camper. Please contact the camp office at 936-594-2541 or <u>campinfo@campolympia.com</u> with any questions or concerns.

Camp's closing day procedure requires an indentification check, to confirm that the camper is only released to the authorized parent/gaurdian noted on the Parent Authorization for Camper Pickup form found within the online Forms Dashboard. You must also identify on this Parent Authorization for Camper Pickup form if a particular parent/guardian is NOT to pick up your camper on closing day due to custody reasons.

#### MEDICAL CARE

We have two registered nurses on site during each term. They treat minor illnesses and injuries, provide a little TLC, and decide who needs to see the doctor in Trinity. Depending on the attention needed, campers may be taken to an urgent care or hospital in Huntsville, which are approximately thirty-two miles from camp. You will be contacted if your camper needs outside medical attention. It is an American Camp Association accreditation standard and a Camp Olympia policy!

Any camper or staff member exhibiting symptoms of illness will be seen by one of our nurses. If determined that the person has symptoms of a contagious illness, the person will be taken to our isolation area until such time that the symptomatic person can be evaluated by a doctor, tested for COVID or other contagious illnesses, and/or transferred off of camp, if needed. We are enhancing our standard protocol for when to send a camper or staff member home, based on current government directives and recommendations. We anticipate having COVID testing available in our nurses' station if the need for testing arises. Temperature checks and overall health screenings will be done each morning by cabin counselors and recorded in each camper's cabin book.

Please encourage your camper to communicate with his/her counselors if he/she feels ill while at camp. Campers feeling ill will be taken to the Nurses' Station and evaluated. If your camper exhibits symptoms of a contagious illness, he/she will be quarantined. If it is determined that your camper has coronavirus or influenza-like symptoms, parents will be contacted so arrangements can be made for the camper to go home until cleared by a doctor to return.

Parents are responsible for any doctor, hospital, and/or pharmacy charges that might be incurred by their camper from illness or injury.

Your child will not be allowed at camp unless his/her Medical Forms have been completed and received. Your camper will not receive his/her cabin assignment OR check-in pass until all required forms have been received by camp.

#### CABIN ASSIGNMENTS

Cabin assignments will be emailed to you approximately one week prior to the start of your term if your camper tuition has been paid in full AND all of your camper forms have been submitted. During CLP, activities and programs are scheduled for the CLP group as a whole instead of specifically by cabin. CLP campers are encouraged to bond with others in the program beyond just their cabin mates.

#### REGARDING PHONES

We want to create an unplugged environment for our campers while at camp. Campers do not have access to a phone and are not permitted to bring cell phones to camp. Instead, campers are encouraged to write home as often as possible. Please feel free to call and talk with our staff or your camper's counselor at any time for information, concerns, or suggestions about your camper's stay. When requesting to speak with a counselor, a message will be taken and the call returned at a specific time. You can reach us by phone at 936.594.2541 or by email at <a href="mailto:campinfo@campolympia.com">campinfo@campolympia.com</a>.

#### VACATIONING PARENTS

Please leave your vacationing address and phone number if the need arises for us to reach you. We require at least one emergency contact who can pick up your camper within a reasonable time window. If you have additional names to be notified in case of an emergency, please leave this with the office - we recommend more than one.

#### **CLP PREPARATION**

These three weeks will be very challenging for your camper. It is strongly encouraged to be physically active at least 30-45 minutes three to five days a week leading up to your CLP term. Recommended exercises include: walking, running, swimming, cycling, climbing stairs, push-ups, and stretching. Arriving to camp in good physical condition will help make your camper's experience even better!



# INFORMATION PARENTS WANT TO KNOW

#### **FOOD**

Camp Olympia takes pride in providing healthy and delicious meals for children to enjoy. Our well-balanced meals offer several food choices. Campers are encouraged to drink a lot of water and to eat salad and fruit at meals. Please indicate any allergies or dietary needs on the Health History Form within the online Forms Dashboard. If needed, our Chow Hall Manager can talk with you prior to opening day to discuss your specific dietary needs.

#### ITEMS TO LEAVE AT HOME

To provide campers with the best camping environment we can, we ask that campers <a href="NOT">NOT</a> bring the following items with them to camp: money, candy, food items, guns, knives, firecrackers, silly string, radios, iPods/MP3 players, video cameras/GoPros, laptop computers, diffusers, iPads/Tablets/Kindles/Nooks, video game players, cell phones, Apple watches/smart watches, or hoverboards. Also, we discourage bringing expensive clothing and jewelry or valuable equipment. Since Olympia takes over 100 photos daily, posts them online, as well as gives you a picture of your child with his/her cabin, we recommend not bringing cameras to camp. Digital cameras that are brought to camp may only be used at designated times deemed appropriate by counselors. If not used in an appropriate manner, digital cameras may be taken up and returned to the camper on Closing Day.

#### **CANCELLATION POLICY**

If cancellations occur within seven days prior to your camp term, half of the tuition will be refunded. No deductions will be made for late arrivals or early departures. In cases where a camper is withdrawn upon doctor's orders, a refund of \$100 for each remaining day will be refunded upon request. Please note that if your camper tests positive for COVID and/or has direct exposure to COVID within the week prior to camp, tuition will be refunded.

Camp Olympia reserves the right to dismiss any camper whose behavior is detrimental to other members of the camp community and reserves the right to not invite the dismissed camper back to camp. Any camper bringing illegal drugs, alcohol, cigarettes, e-cigarettes, Juuls, vapes, or smokeless tobacco to camp will be subject to dismissal. Any camper that leaves his/her cabin without a counselor or counselor permission after lights out will be dismissed from camp. Please refer to the <a href="Camper Code of Conduct">Camper Code of Conduct</a> for other conduct violations that could lead to a dismissal from camp and a refusal of future admittance. In the case of misconduct or rules violation, there will be no refund of camp fees.

#### SPENDING MONEY

Camp Olympia will provide all CLP campers with snacks for the trip to Colorado as well as the mountain hike. However, if your child needs to purchase any essentials prior to the Colorado trip, please provide cash for your camper. We recommend campers bring \$50 - \$75 to cover expenses, additional snacks, and incidentals. Additionally, there is an opportunity to purchase a souvenir from the Adventure Experiences' camp store. Credit and debit cards are generally accepted but having some cash is advised.

#### ADVENTURE EXPERIENCES

While in Colorado, CLP will be staying at Adventure Experiences Base Camp located in Taylor Park, CO near Almont. To learn more, please visit their website at <a href="https://www.aeibasecamp.com">www.aeibasecamp.com</a>.

Adventure Experiences #2 Illinois Creek Almont, CO 81210 970-641-4708

Below is a general schedule of what the campers will do while at Adventure Experiences.

Day 1	Arrive at Adventure Experiences
Day 2	Low and High Rope Elements
Day 3	Adventure Race
Day 4	Depart for Mountain Hike
Day 5	Peak Ascent

Day 6 Return to Adventure Experiences
Day 7 White Water Rafting

Day 8 Depart for Camp Olympia

#### **TRAVEL**

Summer 2021 CLP will be traveling to and from Colorado via charter bus.

TERM 2: June 23rd - June 30th.

Wednesday, June 23rd: Depart for AEI

Wednesday, June 30th: Depart for Camp Olympia

TERM 3: July 14th - July 21st

Wednesday, July 14th: Depart for AEI

Wednesday, July 21st: Depart for Camp Olympia





#### STAY IN TOUCH WITH YOUR CAMPER!

#### HAVE FUN WITH YOUR CAMPER

Parents, you have an opportunity to experience what is going on at camp each day through our online photos, email and news!

There is no separate registration process or additional password to remember. *To log in*:

Click: "Parent Login" at the very top of our website

Enter Your: Username and Password.

Click on: Online Community options: **Email**, **News** & **Photos**! Note: There is also a "Guest Accounts" option that allows you to add family members/friends to the account so they can be connected too. Follow the instructions on this "Guest Accounts" page for this feature.

#### PICTURES, YEARBOOKS AND VIDEO

Camp Olympia will be filming and taking photographs during the camping term. Unless otherwise notified in writing, Camp Olympia reserves the right to use photographs and/or video of your camper for promotional purposes.

Each day we will post over 100 pictures in a password protected area so you can see camp in action! Additionally, Camp will create a video so campers can relive the best moments of the summer throughout the school year. Pictures of your camper in their "camp uniform" as well as a cabin photo with their cabin mates and counselors will be posted online by the end of the term. Our 2021 "Here Comes the Fun!" Yearbook is available for purchase through the Additional Options Form online. Yearbooks will not be completed or published until after summer and will be available mid-November.

You will have FREE, unlimited access to our password protected Photo Gallery. We strive to have the prior day's photos posted by noon the following day. This Photo Gallery allows you to look through all of camp's photos for the day and tag, download or purchase a print of the favorites photos of your camper. While you might not see your camper everyday, you are likely to see your camper's smiling face several days during the term. Olympia will post *OVER 100 PHOTOS* online every day! Encourage your camper to get in front of the camp cameras!

Along with the option to view photos through your <a href="CampMinder Login">CampMinder Login</a>, you can also view them within <a href="WALDO">WALDO</a>! We have partnered with Waldo Photos which has the option for a free password protected gallery or a purchased version with facial recognition. Both options are easily sharable with friends and family that you may want to share with. If you decide to purchase the facial recognition package, photos of your camper will be sent directly to your phone once they are uploaded! No more searching through ALL of camp's photos for hours to find your camper. Find out more about this through our <a href="website">website</a>.

You can also scroll through and view all the photos for free on the Waldo Gallery <a href="here">here</a>.

Due to our photographer not being present with the group in Colorado, photos will be delayed and posted after their return. Please be aware that there will be significantly less photos of this program compared to the rest of camp due to the different schedules.

Cost Per Camper:



1 Week Session (SPARK): \$9.99 2 Week Session (Terms 1,2B,3B,&4): \$14.99 3 Week Session (Terms 2&3): \$19.99

#### MAIL CALL & PACKAGE INFO

Mail Call is one of the highlights of the day! Campers enjoy receiving mail from their family and friends. However, please note that we have a "NO OUTSIDE PACKAGE" POLICY so parents and friends are asked NOT to send OUTSIDE PACKAGES to camp. Any package will be returned to sender. Please help us in notifying other family members and friends of this policy.

Please note that this year, due to state guidelines regarding COVID, we will be holding outside letter/postcards for 24 hours prior to distributing to the cabins. We strongly encourage emailing this year! Your camper will still be able to send out mail to you so make sure you pack writing material and stamps!

Camp Olympia will continue to offer its <u>Special Delivery Care Packages</u>. Information for ordering these fun, camp approved packages is found later in this packet and can be ordered online through your Forms Dashboard on the Additional Options Form.

#### **EMAIL - PARENT TO CAMPER**

Emailing your camper will be key this summer! *There is no cost to send plain text emails to your camper*; however, there are "Email Enhancements" that you may choose to include in your email, which do require the use of a CampStamp (see CampStamp details on the next page). The Olympia staff will print off your email to your camper and include it in the day's mail distribution if the email arrives **prior to 11 AM.** Please note that your camper will not be able to send a reply email, nor have access to use a computer.

#### TO EMAIL YOUR CAMPER

Send to <u>campermail@campolympia.com</u> and put your camper's FIRST & LAST NAME and CABIN in the subject. There is also an option to email your camper within your online Parent Account. This email service provides various email enhancements as well as a reply feature.

#### **EMAIL ENHANCEMENTS**

From the email feature within your Parent Account, you have the option to make your emails more fun for your camper. These "Enhancements" require the use of a CampStamp, which can be purchased from the email screen.

 SmartWords (age-appropriate vocabulary words), Sudoku, Email Stationery (fun, digital stationery), E-letter Reply (so your camper can send back a handwritten letter). See details for "E-Letter Replies"



#### STAY IN TOUCH WITH YOUR CAMPER!

#### **E-LETTER REPLIES**

E-letter Replies allow your camper to quickly respond to your emails or letters without using a computer. It is the fastest way for a camper to get a letter to you! This service is particularly beneficial if you plan to travel while your camper is at camp or if standard mail from camp takes more than a day or two to arrive to your home. Your camper writes a handwritten letter on a special bar-coded piece of stationery and turns it in with his/her cabin's mail. Our office staff will scan this bar-coded letter to the Camp InTouch system, where it will appear in your online account. You will receive an email alerting you when you have received an E-letter Reply, and you can then view the handwritten letter from your camper in your online account! This feature does require CampStamps to view the letters (see CampStamp details).

If you decide to attach these to the email you send your camper or send them with your camper to camp, please remind them to use these! Also, let them know that only black or blue ink will show up on the scans and if they use another color, you will not be able to see what they send.

# In order to use the E-letter Reply feature, you can either:

- Send E-letter Reply stationery with your child to camp (Note: it does not cost anything to print the stationery so you will not have to commit to paying for something that your camper may not utilize.)
- 2) Attach E-letter Reply stationery to one of your emails by checking the checkbox "I would like a handwritten E-letter reply to this email." This checkbox is located just above the "Send Email" button within the Email page.

#### WHAT ARE CAMPSTAMPS?

CampStamps are credits you can purchase to enhance communication with your camper. To add CampStamps to your account, click on the "CampStamps" link at the top of the Email page. Then, select "Buy More" to make your purchase. There is also an option to "Give Some" of your CampStamps. If you have created Guest Accounts for friends or family, you can give CampStamps to them.

#### CampStamps are offered in the following packages:

- 10 for \$10
- 15 for \$14
- 20 for \$18
- 30 for \$25

#### Cost in CampStamps

- Plain text email to camper = 0 CampStamps
- SmartWords or Sudoku = 1 CampStamp
- Email Stationary = 1 CampStamps
- Send E-letter Reply Request = 0 CampStamps
- View E-letter Reply = 1 CampStamp

#### **NEWS**

Stay up-to-date with everything happening at camp during your camper's stay! Each day, one of our directors will post "The Camp Connection" to inform you of the events occurring at camp!

#### **IMPORTANT TIPS**

- Stationery and other enhancements will not appear until you preview the email.
- Emails are limited to 50 printed lines. Stationery and word games further limit the number of lines you can type.
   Please make sure to add any stationery or word games
   BEFORE you start writing your email; if you do so after, you may have to shorten your message.
- CampStamps carry over from season to season, so any unused stamps will be available for future use.
- Please note that you must enter credit card information to purchase CampStamps. This CampStamps account is separate from your Camp Olympia account, and therefore, we are unable to use your card on file for this purchase.

#### **NEED ADDITIONAL HELP?**

Within each of the Email, News, and Photos pages, there is a "Help" link in the top right area. This "Help" section has answers to many of the most common questions. If you are unable to find an answer to your question, select the "Help Ticket" option and type in your question/issue to have a customer service representative respond.





### HIGH ALTITUDE AND HEALTH

#### **HIGH ALTITUDE**

Elevations in AEI Base Camp's area can range from 9,000 to 14,000 feet. Elevations above 8,000 ft. are considered "high altitude," where the air is "thinner" and contains less oxygen.

Each step up in altitude corresponds with a decrease in air pressure. At 9,000 ft. the pressure is approximately 3/4 what it is at sea level.

Translated: Every time you suck in a lung full of air at sea level you get all the bang for your buck. At 9,000 feet you are only getting \$0.75 worth of that buck.

High altitude affects almost everyone who climbs high. Most people will not feel the effects, but for those who do, this information will be helpful and encouraging. Some of the discomforts of climbing high include headache, nausea, fatigue, lassitude, loss of appetite, and loss of sleep. More serious signs and symptoms are loss of coordination, chest pain, difficulty breathing, and a productive cough. If you are suffering from symptoms of altitude illness, be sure to let someone on staff know right away.

Acclimation is the process your body goes through to adjust to living at a high elevation where there is less oxygen. The body needs time to acclimate, but this process varies from person to person. A healthy person should acclimatize to a given altitude within 24 to 48 hours. During this process you will increase your ventilations or breathe heavier, and your heart rate will increase significantly. After 3 to 5 days your heart rate should return to normal.

#### **CHANGE YOUR DIET**

Maintain a diet of 70% or greater carbohydrates and drink plenty of water (96 oz/day) and get plenty of rest 3 days prior to your arrival and during your stay.

Avoid sleeping pills and narcotic pain medications. These can escalate the symptoms of altitude illness.

Restrict salt, sugar, and caffeine intake.

As a program, we help members throughout CLP with these guidelines while encouraging healthy portions and plenty of water during meal times.

#### **SUNSCREEN**

Wear a sunscreen (SPF 15 or above), and proper eyewear or sunglasses that filter out 100% UVB 99% UVA. The chance for severe sunburn increases at higher elevations because of decreased oxygen.







# **CLP AT OLYMPIA**

#### **IN GENERAL**

While at Camp Olympia, the CLP groups will participate in many of the programs they know and have loved through the years. Some of these include COLOCO, Overnight, Movie Night, and Carnival. In addition to these, the CLPs will enjoy some new experiences as a group that are outside the program and schedule of the rest of camp. Please make yourself familiar with the unique aspects of CLP by reading the following descriptions.

Should you have any questions about the program, you may contact Nick Deckert (<a href="mailto:ndeckert@campolympia.com">ndeckert@campolympia.com</a>) who is our Assistant Director in charge of CLP.

#### LIFEGUARDING

During the first week here at Olympia, the CLP group will be led in lengthy training and preparation for certification tests. Participants who successfully complete the Lifeguarding course receive an American Red Cross certificate for Waterfront Lifeguarding/First Aid/CPR/AED, valid for 2 years. With these certifications, they are eligible to apply for our O-Crew program the following year and lifeguard for Olympia. They may also choose to obtain other lifeguarding jobs outside of camp.

#### **SOLO TIME**

Solo time is a 15 minute time that is built into the CLP schedule each day. During this time, the CLPs are encouraged to find a quiet place, while still visible in the main part of camp. Solo time is meant to be spent alone to process their experience through a silent activity such as reading, writing letters, and journaling.

#### CONDITIONING

It is important in the time leading up to the trip to Colorado that the group participates in some conditioning exercises. Physical fitness can help develop the endurance for the backpack trip up the mountain. It can also help them get acclimated to the higher altitude. Some of the fitness activities that the CLP group may participate in are jogging, yoga, aerobics, and core strengthening workouts. They will also play games like Ultimate Frisbee and Speed Softball while wearing their hiking boots in order to break them in before the big hike!

#### **ACTIVITIES**

While CLP campers do not have individual activity schedules like the rest of camp, they will get to participate in certain camp activities as a CLP group, as well as individually during some free time. These activities include but are not limited to blobbing, rocketing, pool activities, field sports, court sports, and challenge course activities. It should be noted here that all activities include some degree of risk and many of these risks are included in each activity's description here to help you make an informed decision about what activities are right for your camper. There are unforeseen risks such as wildlife indigenous to East Texas, inclement weather conditions, and rough terrain. Also, heat factors in Texas during summer months are usually high. Heat, along with increased activity levels, may affect anyone who is not maintaining proper hydration. Water breaks are scheduled each day. Please talk with your camper about the importance of drinking plenty of water during his/her stay with us.



# **CLP IN COLORADO**

#### **IN GENERAL**

The Colorado trip takes place from the second Wednesday of the term to the third Wednesday of the term. For Term 2 these dates are June 23rd - June 30th; for Term 3, the dates are July 14th - July 21st. On travel days, you will receive emails from Nick Deckert throughout the day keeping you updated as the group arrives at their destination. The days spent in Colorado at Adventure Experiences are explained below.

#### **DAY 1: TRAVEL DAY**

The group will be picked up at Camp Olympia via charter bus and travel throughout the day to arrive in Almont, Colorado at AEI Base Camp. Once campers arrive at Base Camp, parents will be notified of their safe arrival.

#### **DAY 2: LOW & HIGH ELEMENTS**

In the morning, the group will participate in low elements, which are team building activities led by the Adventure Experiences guide staff and on AEI Base Camp's property. They will strategize and problem solve as a group while encouraging each other. In the afternoon, each CLP camper will have the opportunity to traverse the team ropes course with a partner and complete the course by riding the double zip line. The power pole is another high elements available to enjoy!

#### **DAY 3: ADVENTURE RACE**

The CLP group will stay on site at AE and race through an adventure/compass course while passing "challenges" and working together as a group. There will be AE guides leading the different challenges as well as helping along the way.

#### **DAYS 4-6: BACKPACKING**

On the first day of the backpacking trip, the mountain groups get organized by packing the group food and group gear before beginning their hike. Then they hike most of the day, stopping for lunch. Once they arrive at the base camp of the mountain (near the tree line), they set up the tents and have dinner. Weather permitting, they will wake up and hike to the peak of the mountain the next morning. After peaking, they make their way back down to their camp site. On the third day of the backpack trip, the groups will have the opportunity to use a map and compass to orienteer their way back to Adventure Experiences.

#### DAY 7: WHITE WATER RAFTING

On the last full day in Colorado, the group will go white water rafting on the Taylor River in the morning guided by Scenic River Tours. They are joined by both AE staff and Camp Olympia leaders. Before returning to Adventure Experiences, the group will stop and have a scenic lunch at the Taylor Park Reservoir.

#### **DAY 8: TRAVEL DAY**

Much like the first travel day, the group will be picked up by charter bus at AEI Base Camp and travel throughout the day to arrive back at Camp Olympia to finish out the last few days of the term.







## WHAT TO BRING TO CAMP

#### LABEL EVERYTHING!

# MARK YOUR CAMPER'S FULL NAME ON EVERYTHING

Your camper's clothes will be laundered during camp. FYI ... we discourage bringing expensive outfits, jewelry or equipment to camp. Below is a minimum suggested needs list of items for your time at Camp Olympia. The following page provides what to pack for Colorado.

Campers should bring their belongings to camp in a FOOTLOCKER/TRUNK NO MORE THAN FOURTEEN INCHES TALL in order to fit underneath your camper's bed. It is recommended to pack some items in a labeled laundry or duffel bag.

OLYMPIA NEEDS LIST
laundry bags
towels (for showers and pool/lake use)
washcloths
pillow
sets of twin sheets (flat & fitted)
lightweight blanket
pair of socks
shorts
t-shirts / tanks
long sleeved shirt
underwear
pajamas
jeans / long pants
raincoat poncho
lake shoes
pair of tennis shoes
shower shoes / flip flops
swimsuits
swim shirts
swim shorts
sports bras (for older girls)
flashlight
cap / visor
insect repellent
sunscreen SPF 15 +
NOSE CLIPS
WATER BOTTLE WITH FLIP TOP
stationery/ stamps
shower caddy / toiletry bag
bandana / buff / face mask
bottle of hand sanitizer

#### **DRESS CODE**

In keeping with a wholesome safe environment, we encourage all campers to wear well-fitted, appropriate clothes, shoes, and swimwear. Camp is a very active environment, and at times, boys and girls will be participating together in activities.

Swimwear should provide complete coverage, fasten securely, and be designed for active wear. We encourage female campers to wear a one-piece swimsuit, however two-pieces are allowed if they have only one tie accompanied by another fastener. (Triangle bikini tops and bottoms that tie are prohibited.) Also, swim shorts are required when participating in lake activities such as blobbing and rocketing, wakeboarding, and waterskiing. Colored sports bras provide adequate coverage and support, and therefore, are acceptable tops for water activities. However, in all land activities, a tank-top or t-shirt needs to be worn over a sports bra or swimsuit.

Tank tops and sleeveless shirts should fit appropriately and not have large, gaping arm holes that hang down past a sports bra or to the middle of the ribs. Shorts should be of a modest length. Closed-toe shoes are needed for all land activities, and lake shoes are recommended for our lake activities.

Our staff reserves the right to ask campers to change clothes or put on additional clothing if deemed not appropriate for the active, co-ed camp environment.

Your camper can help prevent injuries or embarrassing situations by arriving to each activity dressed appropriately.

#### **DO NOT PACK**

money, candy, food items, guns, knives, firecrackers, silly string, radios, iPods/MP3 players, video cameras, go pros, tablets, laptops, video games, cell phones, smart watches, hoverboards, or diffusers.

#### \*\*TOILETRY ITEMS:

- · LIQUID SOAP
- SHAMPOO
- 2 TOOTHBRUSHES
- HAIRBRUSH
- AND ALL OTHER NECESSSARY ITEMS

#### Please pack 2 NOSE CLIPS

for use during certain lake activities

PLEASE BRING A MINIMUM OF 5 FACE COVERING

\*GIRLS\*
AT LEAST ONE SWIMSUIT
SHOULD BE A ONE-PIECE

## WATER BOTTLES WITH A STRAW OR FLIP-TOP

(WE DO NOT WANT ANY AREA OF THE
WATER BOTTLE THAT HAS TOUCHED
SOMEONE'S MOUTH TO MAKE CONTACT
WITH OUR REFILLING STATION)

BE SURE TO
BREAK-IN
HIKING BOOTS
BEFORE SUMMER





AEI Base Camp provides most of the necessary wilderness equipment for your trip. You will provide the personal items listed below. Please keep in mind that the weather in Colorado can change rapidly. Rain or snow showers are likely and temperatures can vary from 25 degrees to 80 degrees on any day in May through August. This means that wool and synthetic blends are preferred. Please try to AVOID bringing COTTON clothing. Try to bring "layering" clothes that are wool/synthetic. Synthetic means polyester, polyproylene, polartec, fleece, synchilla, capilene, etc. Storage space is limited so please keep this in mind when packing. You can wear clothing multiple times and/or for multiple days as our environment is dry and on the cooler side. Our Base Camp is around 10,000 ft. in elevation and altitude sickness is a common occurrence. Drink plenty of WATER prior to arriving, as it combats altitude sickness.

DDING.

<u> BKI</u>	<u> 10.</u>	
2 Water Bottles (1 liter capacity each)		Swimsuit(s) (if rafting, 2 needed)
Rainwear (jacket with hood or poncho, pants preferred)		Sunscreen and Chapstick
T-shirts (some can be cotton, at least 1 synthetic)		Sunglasses
Shorts		Insect Repellent
Long Pants / Insulate Pants (NO JEANS)		Bible, notebook, pen/pencil
Long Sleeved Shirt or Wool/Synthetic Sweater		Bandana
Flannel/Sweat Shirt		Camera (optional)
Socks (wool/synthetic, NO COTTON)		Moleskin/Blister Care (optional)
Underwear		Sleeping Bag (M:25-30 degrees; W:0-20 degrees) Mummy Sleeping Bag (if backpacking)
Insulated Jacket		Stuff Sack for Sleeping Bag
 Hat/Beanie (wool/synthetic) Sun Hat/Baseball Cap		Flashlight/Headlamp (extra batteries)
 Athletic Shoes		Toiletries
 Long Underwear (wool/silk/synthetic, NO COTTON)		Towel and Washcloth
 Mid-Height Hiking Boots		Alarm Clock (optional)
 Rafting Shoes (must have HEEL strap)		Pillow
 ·		Watch
 Prescribed Medication (if applicable - in ORIGINAL container/bottle ONLY)		Portable Charging Device (no outlets in cabins, <i>optional</i> )

#### DO NOT BRING:

Jeans, cell phones, iPods/MP3 players, illegal drugs, over-the-counter medication, marijuana, THC edibles, vapor pens/e-cigarettes, tobacco products of any kind, guns/explosives, weapons/knives, fireworks, blow-dryers, curling irons, electronic games, pets, personal harness/rock climbing equipment, valuables/personal prized possession

#### **WE PROVIDE:**

Backpacks\*\*

Cooking/Eating Utensils\*\*

Tents\*\* First Aid Kits\*\*
Cooking Stoves/Fuel Compasses/Maps\*\*

Sleeping Pads\*\* Water Purification (Filters, etc.)

\*\*Note: Please feel free to bring PERSONAL items listed above (optional)





## **FORM: MEDICAL FORMS**

**Due** — June 1, 2021

There are several health related forms, some from Camp Olympia and others from Adventure Experiences, that are necessary to be completed for CLP campers.

- 1. OLYMPIA HEALTH HISTORY This is an online form found within your Forms Dashboard through your Parent Login. In completing your camper's Health History Form, you will need his/her immunization history, medications, health care providers, and health insurance. Once you begin the History Form, you will have the option to "Save for Later" for up to six weeks. A great feature to the online Health History Form is that, after you initially complete your camper's Health History Form, you will be able to review and update annually.
- PARENT INSURANCE CARD Make sure to input your CURRENT medical insurance information in the space provided and check that it matches the copies of your insurance card that you provide.
  - Include a readable copy of the front and back of your primary insurance card on the <u>Parent</u> <u>Insurance Card Form</u>
- 3. PHYSICIAN'S EXAMINATION A Physician's Examination form, completed and signed by your physician within the last 12 months, is necessary to attend. Camp has provided a Physician's Examination Form within this packet. MyChart, or similar Well-Check report from your doctors office or a school/sports physical, signed by a doctor, will also be accepted.
- 4. ADVENTURE EXPERIENCES HEALTH HISTORY FORM - This is a paper form with specific health history questions needed for the Colorado experience. This should be completed by the parent/guardian.
- 5. COLORADO CERTIFICATION OF IMMUNIZATIONS
  -This is a paper form required by the state of Colorado.
  Though immunizations are required on Camp Olympia's
  Health History Form, it is also required to document them
  on this seperate form as well.
- 6. HEALTH STATEMENT FOR ADVENTURE EXPERIENCES - This paper form must be completed by a physician/nurse practitioner.
- 7. MEDICATION PERMISSION FOR ADVENTURE EXPERIENCES - This paper form is required by Adventure Experiences.
- 8. SUNSCREEN WAIVER This paper form is required by Adventure Experiences.

All required paper forms are found within this packet and should be uploaded to your Forms Dashboard within your <u>Parent Login</u>. Please contact Karen Hatter at <u>khatter@campolympia.com</u> with any questions regarding your CLP forms.

#### **HEALTH PRACTICES**

Camp Olympia is committed to providing the best possible camping experience for YOU! We are doing our best to create a healthy, symptom-free environment for our campers. We are asking for all parents, campers, and staff to be aware of any medical conditions or symptoms that could spread to members of our camp community.

Please do <u>NOT</u> bring your camper to camp if they are sick or exhibiting any COVID symptoms including:

Fever
 Runny/Stuffy Nose
 Headache
 Diarrhea
 Cough
 Chest Tightness
 Body Aches
 Fatigue
 Shortness of breath

In the two weeks leading up to Opening Day, if your camper has tested positive for/been exposed to COVID, you must notify camp. Additional arrangements will be made regarding your camper's attendance. If your camper has been exposed to COVID, he/she must follow the quarantine protocols outlined by the CDC.

- 10 days without testing
- 7 days after receiving a negative test result (test must occur on day 5 or later)

Per current state requirements, campers who have previously tested positive for COVID may only attend camp if they meet ALL 3 criteria below:

- At least 3 days (72 hours) have passed since recovery (resolution of fever without the use of feverreducing medications)
- 2. The individual has *improvement* in symptoms (e.g., cough, shortness of breath)
- 3. At least 10 days have passed *since symptoms first* appeared

Additionally, please keep your camper home if he/she is exhibiting any symptoms of Influenza-Like Illness. Many of those symptoms mirror the COVID symptoms above, but also include runny or stuffy nose, fatigue, and/or vomiting. If your camper exhibits Influenza-Like Illness symptoms prior to camp, he/she must be symptom-free and fever free for a minimum of 72 hours (3 days) without the aid or any fever-reducing medication prior to attending camp.



## MEDICAL FORMS

Prior to camp, we ask that your camper self-quarantines for 10 days. If face-to-face interaction with individuals outside your household is necessary (ex. attending school), physical distancing must occur and masks must be worn. Please do not schedule trips or social gatherings in the 10 days leading up to camp.

#### Upon arrival to camp, our medical staff will be screening for:

- · Fever while a parent is present at camp
- Signs/symptoms of illnesses or injury (including check of ears and throat)
- · History of exposure to communicable disease
- Head lice If your camper is found to have head lice, you will be given the option to pick-up your camper for treatment OR Lice Clinics of America will provide treatment to your camper here at camp for \$190. Please be proactive and check your camper for head lice before his/her arrival to camp.

Please be aware that the incidence of bed bugs has affected the camping and hospitality industries. While we are proactive with inspections of our cabins, the possibility of bed bugs exists.

We have an action plan in place for immediate extermination if they are detected or suspected. Keeping this possibility in mind, we recommend that families bag up campers' belongings for departure and, once home, wash all items and use the high heat setting on your dryer. If bed bugs are detected in your camper's cabin, you will be notified.

Please encourage your camper to follow good hygiene practices while at camp. Keeping hands clean is one of the best ways to keep from getting sick and spreading illnesses. It is important to wash hands with soap and water for 20 seconds. REMEMBER: If soap and water are not available, use an alcohol-based wipe or hand gel! There will be MANY available hand sanitizing stations around camp.

Additionally, we ask that you <u>NOT</u> share toiletry items such as hairbrushes, combs, toothbrushes, razors, and personal items such as hats, water bottles, and swimsuits.





# FORM: PARENT INSURANCE CARDS

This form can be found through your Parent Login within your Forms Dashboard Female Applicant's Name Term Birth Date PARENT INSURANCE CARDS PRIMARY INSURANCE - FRONT PRESCRIPTION CARD - FRONT Place your Medical Insurance card here Place your Prescription card here **FACE UP FACE UP** & & Photocopy Photocopy PRIMARY INSURANCE - BACK PRESCRIPTION CARD - BACK Place your Medical Insurance card here Place your Prescription card here **FACE DOWN FACE DOWN** & & Photocopy Photocopy

Please make sure that the Insurance Cards you provide match the Insurance information you previously submitted on the Health History form.

#### THIS FORM IS REQUIRED. PLEASE COMPLETE AND SUBMIT FOR YOUR CAMPER TO ATTEND.

This form may be uploaded as a PDF in the Forms Dashboard.



723 Olympia Drive ★Trinity, Texas 75862 phone 936.594.2541 ★ fax 936.594.8143 campinfo@campolympia.com ★www.campolympia.com



# FORM PHYSICIAN'S EXAMINATION

This form can be found through your Parent Login within your Forms Dashboard

Applicant's Name	Session		Birth Date	☐ Male ☐ Female
Physician's	Examination			HEALTH FORM
	performed within 12 months o			other purpose within this
Height Weight	Heart Blood Pres	ssure Hct/Hgb	Test (if appropriate)	Urinalysis (if appropriate)
Health Assessment				
Please rate the following: V – Satisfactory X – Not satisfactory O – Not examined	Eyes Ears Nose Throat  Date of last tetanus shot	Extremities Glasses	Lungs Genitalia Abdo	
General Appraisal Please address any concerns from above.				
Allergies				
List any allergies the applicant may have, including:  Food Insects Medicine Seasonal/Environmental				
Recommendations				
List restrictions on the applicant at camp, including:  Special Diets Current Medications Swimming/Diving Strenuous Activity				
× × × × × × × × × × × × × × × × × × ×	I have examined the person h	erein described and	d have reviewed the	health history. It is my
Please mail completed form to:	opinion that this person is phy I examined the applicant today	vsically able to enga	ge in camp activities  If no, date of examir	
Camp Olympia 723 Olympia Drive	Name of Doctor	Signatur	e	Date
Trinity, TX 75862 Tel: 936.594.2541	Contact Information			







# FORM: CAMPER POLICY AGREEMENT

This form can be found through your Parent Login within your Forms Dashboard

Please indicate through the online form that you have read and agree to this Camper Policy Agreement below.

At Camp Olympia, we're sold on the value of camping! The real life experiences that camping provides cannot be matched. As we offer a program promoting adventure, challenge, fun, and growth to people of all ages, we want to help teach our campers responsibility. In order to create a positive and fun community for all, campers must accept consequences for their choices and actions that can hinder the Olympia experience for other campers and staff members. Any camper dismissed for disciplinary reasons will not be invited to attend camp the following year.

The physical, mental, and spiritual growth of every person at Olympia is important. We want people to leave Olympia with more esteem for God, others, and themselves, and to feel positively challenged to work and plan for a successful life. Our program and facilities have been designed with the positive growth of people in mind. We want

everyone who enters our "Positive Zone" to have a positive, fun, and memorable experience at Olympia.

Our Code of Conduct policies are important to help create a harmonious community where everyone is a part of the Olympia family. We believe that these policies will contribute importantly to producing a quality camp experience where your camper and others at camp can have an O-mazing summer. Camp Olympia requires that every parent and camper thoroughly read, understand, and agree to abide by our camper policies. It is important to discuss this agreement carefully with your camper(s). This Camp Policy Agreement is an online form that requires a digital signature from both the camper and parent. Please login to the Forms Dashboard to access the online Camper Policy Agreement Form.

#### CAMPER CODE OF CONDUCT AGREEMENT

- I will not, at any time, be in possession of tobacco products, e-cigarettes/vapes, Juuls, drugs, alcohol, or any illegal substance. I understand that if any of these items are found on me or with my belongings that they will be assumed to be mine unless I can prove otherwise.
- 2. I will not, at any time, go into the cabin of the opposite sex for any reason whatsoever, nor will I go through cabin areas of the opposite sex without authorization from a counselor or staff member.
- 3. I understand that for my safety, it is important for a counselor to know my whereabouts at all times, and therefore, I will not leave my cabin group, cluster, activity, or camp programs/ events without approval in order to meet up with others.
- 4. I will keep myself from physical conflicts/fights at camp.
- 5. I will not be a part of any form of bullying physical, verbal, or relational. (Bullying covers a wide spectrum of actions and language, and it is Camp Olympia's discretion to apply appropriate disciplinary action based on the severity of a camper's bullying.)
- 6. I understand that profanity and vulgarity have no place at camp.
- 7. I will not damage Camp Olympia property or the property of others.





# FORM: CAMPER POLICY AGREEMENT

8. I understand the Camp Olympia dress code and agree to abide by the guidelines in order to help prevent injuries or embarrassing situations. The dress code is as follows:

In keeping with a wholesome safe environment, we encourage all campers to wear well-fitted, appropriate clothes, shoes, and swimwear. Camp is a very active environment, and at times boys and girls will be participating together in activities.

Swimwear should provide complete coverage, fasten securely, and be designed for active wear. We encourage female campers to wear a one-piece swimsuit, however two-pieces are allowed if they have only one tie accompanied by another fastener. (Triangle bikini tops and bottoms that tie are prohibited.) Also, swim shorts are required when participating in lake activities such as blobbing, rocketing, and wakeboarding/waterskiing. Colored sports bras provide adequate coverage and support and, therefore, are acceptable tops for water activities. However, in all land activities, a tank-top or t-shirt needs to be worn over a sports bra or swimsuit.

Tank tops and sleeveless shirts should fit appropriately and not have large, gaping arm holes that hang down past a sports bra or to the middle of the ribs. Shorts should be of a modest length. Closed-toe shoes are needed for all land activities, and lake shoes are recommended for our lake activities.

Our staff reserves the right to ask campers to change clothes or put on additional clothing if deemed not appropriate for the active, co-ed camp environment.

- 9. I understand that to fully appreciate the Camp Olympia experience, which involves interacting with my cabin mates and gaining independence, I will not bring my cell phone, Apple watch/smart watch, tablet, or iPod/MP3 Player with me to Camp Olympia. Camp Olympia has the right to take up these items if found, as they are not allowed at camp. If they are taken up, Camp Olympia does not assume responsibility for these items.
- 10. I understand that it is a privilege to bring my digital camera to camp. With this privilege comes responsibility in taking appropriate pictures. I will only take pictures during times that are deemed appropriate by staff, such as all camp events, and I will NOT take any pictures in the cabin or bathroom. I also agree that shooting any video with my camera is not allowed. I understand that using my camera in an inappropriate manner will result in my camera being taken up and returned on closing day and may result in my dismissal from camp. I also understand that filming video and/or bringing video cameras/GoPros is not allowed at camp.
- 11. Finally, I understand that the consequences of not abiding by any of the above mentioned policies may result in immediate dismissal from camp and jeopardizes the opportunity to return to camp in the future. In addition to these stated camper policies, I understand that I may be dismissed from camp for any conduct that negatively affects the camp experience for another camper or reflects unfavorably on Camp Olympia.





#### **FORM: CAMPER POLICY AGREEMENT**

#### SOCIAL NETWORKING POLICY

We have always taken the safety and well-being of our campers –your children– very seriously. After all, giving your children over to the care of other people is perhaps the greatest act of trust in which you as a parent can engage. We aim to do everything we reasonably can to earn and keep that trust. We also know we cannot do this without your help. With more and more children using the Internet, cell phones, and other technologies at younger ages, we appeal to you as parents to partner with us as child advocates to ensure that your children continue to have the safest, most wholesome childhood experience as possible. We would encourage you not only to consider the following in relationship to camp, but for your family as a whole since your children are exposed to a variety of people everyday.

At Camp Olympia, our pledge is to put your children in the company of the most trustworthy and appropriate young adults we can hire—counselors who are well-suited to the task of caring for campers. The effort we put into screening and selecting our staff is part of that pledge. During camp, our staff works with your child in the context of a visible, well scrutinized community that has many built-in checks and balances. Counselors are supervised by senior staff and are guided by clear, firm policies regarding behavior. Their actions are also visible to a community full of co-workers and campers. Our staff is hired for the camp season and is under contract at that time. After camp we cannot take responsibility for their off-season behavior since we cannot supervise it. It is the responsibility of the parent to interview and research any staff member if you want to hire him/her as a baby-sitter, nanny, or child companion outside of camp. We have great young people working at Olympia, but we want you to be an informed decision maker regarding contact between staff and campers outside of camp.

We recognize that campers and counselors develop close, trusting relationships with one another at camp and that these relationships are healthy, wholesome, and beneficial to campers and staff alike. We are aware that many campers will naturally want to keep in touch with their favorite counselors after camp. With new technologies and social networking capabilities, it is easy for campers to track down counselors outside of camp and to communicate with them. We want you as parents to be aware of this.

Therefore, our recommendation is simply for you as parents to be aware of your child's online activities, including social media (Facebook, Twitter, Instagram, Snapchat, TikTok etc.), instant messaging, video websites (ex., YouTube), apps and email. Also, be aware of phone activities including calls, text messages, and video chats through Skype and other services. Supervise your child's phone and computer use as you would any other aspect of his/her life in your home. Likewise, we request that you as a parent or legal guardian talk with your child about what contact information you would allow them to exchange with a camp staff member or other campers. In sharing contact information with a staff member or camper, you understand that you accept full responsibility for overseeing whatever contact occurs as a result.

We want to partner with you, the parent, in keeping children safe by being proactive in communicating our policies and offering advice on how to address this important topic with your child.





# FORM: PERMISSION TO ATTEND, RELEASE, AND INDEMNITY

This form can be found through your Parent Login within your Forms Dashboard

NAME OF PARTICIPANT(S): (print) _	
PARENT/GUARDIAN NAMES: (print)	

I hereby request that my child be accepted to attend Camp Olympia. I am aware that during my child's stay at Camp Olympia, my child will be participating in many physical activities and may encounter certain risks and dangers. These risks and dangers include, but are not limited to, serious bodily injury or death due to the hazards of being in a wilderness area, the forces of nature, and other risks and dangers because of the activities offered, and the nature of the grounds and facilities, at Camp Olympia. I am aware that Camp Olympia is located on a lake and has a swimming pool on the premises, and that my child will have the opportunity to participate in aquatic activities, including, but not limited to, swimming, boating, canoeing, and any other activity arranged for my child. I am aware that Camp Olympia offers challenge course activities with high elements up to 35 feet high for which a belay system is used as well as low elements approximately three feet high for which ground spotters are used. I am also aware that Camp Olympia offers other activities including, but not limited to, team and individual sports, miscellaneous games, archery, riflery, horseback riding, and all aspects of camping. Furthermore, I am aware that my child will be interacting with individuals from all around the world, and although certain precautions will be taken to ensure the health of all campers. Camp Olympia cannot guarantee my child will not be exposed to certain viruses, bacteria, and other potentially dangerous diseases. I understand it is my sole responsibility to decide on and implement any activity restrictions which I deem necessary for my child's personal welfare and safety. I understand that Camp Olympia will be filming and taking photographs during the camping term which will include my child, and that Camp Olympia might use such filming and photographs in promotional materials. Individually and on behalf of my child, I consent to my child being filmed and photographed and to use such filming and photographs for promotional purposes. I hereby give my permission for my child to ride in camp buses and vehicles.

AS ADDITIONAL CONSIDERATION FOR MY CHILD BEING PERMITTED TO ATTEND CAMP OLYMPIA AND PARTICIPATE IN ANY OF THE ACTIVITIES OFFERED BY CAMP OLYMPIA, I, INDIVIDUALLY AND ON BEHALF OF MY CHILD, HEREBY RELEASE, DISCHARGE, INDEMNIFY, AND HOLD HARMLESS CAMP OLYMPIA, INC., CAMP MANAGEMENT, INC., CAMP MANAGEMENT FOODS, INC., WP REALTY, L.P. DBA WHISPERING PINES GOLF CLUB, OLYMPIA REALTY CORPORATION, THE SPIRIT GOLF ASSOCIATION AND RC HILCREST, L.P., AND THEIR RESPECTIVE SHAREHOLDERS, DIRECTORS, OFFICERS, EMPLOYEES, AGENTS AND REPRESENTATIVES (ALL SUCH ENTITIES AND INDIVIDUALS BEING REFERRED TO COLLECTIVELY HEREINAFTER AS THE "RELEASED PARTIES") FROM ANY AND ALL LIABILITY TO ME FOR LOSS OR DAMAGE ON ACCOUNT OF INJURY TO MY CHILD OR MY PROPERTY AND ANY AND ALL COSTS AND EXPENSES. INCLUDING WITHOUT LIMITATION ATTORNEY'S FEES, WHETHER CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE (WHETHER SOLE, JOINT OR CONCURRENT) OR GROSS NEGLIGENCE OF THE RELEASED PARTIES, AS A DIRECT OR INDIRECT RESULT OF MY CHILD'S ATTENDANCE AT CAMP OLYMPIA AND/OR MY CHILD'S PARTICIPATION IN ANY OF THE ACTIVITIE OFFERED BY CAMP OLYMPIA.

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# PERMISSION TO ATTEND, RELEASE, AND INDEMNITY

I have read and voluntarily signed this Release and Indemnity, and I further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made. I understand this document includes a full and final release and indemnification of all claims.

#### PARENTS' AUTHORIZATION TO PROVIDE NECESSARY TREATMENT:

I hereby give permission to the medical personnel selected by the camp director to order X-rays, routine tests, treatment, to release any records necessary for insurance purposes, and to provide or arrange related transportation for my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for my child. I understand the information on this form will be shared on a "need to know" basis with camp staff. I agree to provide health history that is correct and complete as far as I know, and my child has permission to engage in all camp activities except as noted. I give my permission to photocopy all forms related to health history and medical treatment. In addition, the camp has permission to obtain a copy of my child's health record from providers who treat my child, and these providers may talk with the camp staff about my child's health status. I acknowledge and understand that the cost of any such medical care is my financial responsibility. I have read and understand the foregoing terms and conditions, including without limitation the release provision, and knowingly agree to each and every term and condition.

Date	Signature of Parent/Legal Guardian
Date	Signature of Parent/Legal Guardian





# FORM: SPECIAL PARTICIPATION AGREEMENT IN RELATION TO RISK OF CORONAVIRUS EXPOSURE

This form can be found through your Parent Login within your Forms Dashboard

#### Special Participation Agreement In Relation to Risk of Coronavirus Exposure

Thank you for reading this Agreement carefully. It includes important information about Camp Olympia activities and describes certain protections sought by Camp Olympia if you, your child, or another family member becomes ill or suffers some other loss due to infection of the CoronaVirus (COVID-19) that may have been caused from being at Camp Olympia or from being exposed by someone else who was at Camp Olympia.

#### PROCEDURES BEFORE CAMP:

Camp Olympia asks that your camper self-quarantines for 10 days leading up to the start of the camp term. If face-to-face interaction with individuals outside your household is necessary (ex. attending school), physical distancing must occur and masks must be worn. Please do not schedule trips or social gatherings in the 10 days leading up to camp.

Parents must monitor the health of their children and NOT send them to camp if they exhibit any symptom of COVID-19 in the 10 days leading up to camp.

If your camper requires flying in to attend camp, we ask that you arrange to fly in at least 72 hours prior to camp's opening day. A negative PCR test following your air travel, in the 72 hours leading up to camp, is required.

Camp Olympia will require each camper and counselor to take a COVID PCR test within 72-hours of opening day and have proof of a negative result in hand on arrival to camp.

#### PROCEDURES DURING CAMP:

Camp Olympia and its staff will be taking more health precautions this summer. On Opening Day, check-in of campers will be staggered throughout the day. All campers must be driven to camp by parents/guardians, who will be required to stay in their car during drop-off on camp property. Any camper who arrives to camp with COVID-19 symptoms, including, but not limited to, a fever, cough, shortness of breath, chills, muscle pain or sore throat WILL NOT be allowed into camp. Also, if a camper has been exposed in the past two weeks to a friend or family member who has/had COVID-19, the camper WILL NOT be allowed into camp. Other precautions during camp include: wearing of face coverings while inside buildings when with others outside of pod, encouraging and enforcing more handwashing, more use of hand sanitizers, more disinfecting of doorknobs and high use areas, and daily temperature and health checks of campers, etc. The nurses on site, as always, will be monitoring the health and safety of all campers and staff, and they will determine if someone requires isolation and/or transferred from camp.

However, despite the best efforts of Camp Olympia, exposure to COVID-19 cannot be completely eradicated while attending camp. COVID-19 is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a means to prevent the spread of the virus. COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in Camp Olympia programs or accessing its facilities could increase the risk of contracting COVID-19. Camp Olympia in no way warrants that COVID-19 infection will not occur through participation in its programs or accessing its facilities. The activities of Camp Olympia include a variety of traditional sports, games, activities, and events that will make it impossible to consistently implement any social distancing of 6 feet or less that may be recommended by any known government authorities. Camp is a place where campers, counselors, and staff are often in contact and near each other every day and every night. This includes but not limited to: eating at the table together at meals in the dining hall, playing sports where direct or indirect contact is made with one another, and sleeping inside the cabins where bunk beds are often less than six feet apart.



NAME OF PARTICIPANT(S): (print)
PARENT/GUARDIAN NAMES: (print)

#### Acknowledgement and Assumption of Risks:

I, Parent, have read and understand SPECIAL PARTICIPATION AGREEMENT. I acknowledge and assume the risks and dangers described above with my child being enrolled at Camp. I have discussed the activities and risks with my child, who understands them and wishes to participate in the activities of the Camp community, and I agree to the Release and Indemnity Agreement below:

#### RELEASE AND INDEMNITY AGREEMENT:

I, INDIVIDUALLY AND ON BEHALF OF MY CHILD, HEREBY RELEASE, DISCHARGE, INDEMNIFY, AND HOLD HARMLESS CAMP OLYMPIA, INC., CAMP MANAGEMENT, INC., CAMP MANAGEMENT FOODS, INC., WP REALTY, L.P. DBA WHISPERING PINES GOLF CLUB, OLYMPIA REALTY CORPORATION, RC HILLCREST, L.P., AND THE SPIRIT GOLF ASSOCIATION AND THEIR RESPECTIVE SHAREHOLD-ERS, DIRECTORS, OFFICERS, EMPLOYEES, AGENTS AND REPRESENTATIVES (ALL SUCH ENTITIES AND INDIVIDUALS BEING REFERRED TO COLLECTIVELY HEREINAFTER AS THE "RELEASED PAR-TIES") WITH RESPECT TO ANY AND ALL CLAIMS RELATED TO CONTRACTING THE CORONAVIRUS (COVID-19) AND ANY LOSS, BODILY INJURY, OR DAMAGES ASSOCIATED FROM IT WHICH I OR MY CHILD MAY SUFFER, ARISING OUT OF OR IN ANY WAY RELATED TO MY CHILD BEING ENROLLED IN THE CAMP, AND ON OR OFF THE CAMP PREMISES. I FURTHER AGREE TO INDEMNIFY (THAT IS DE-FEND AND PAY, INCLUDING COSTS AND ATTORNEYS FEES) THE RELEASED PARTIES FROM CLAIMS BROUGHT BY OTHER MEMBERS OF MY OR MY CHILD'S FAMILY, AND CLAIMS BROUGHT BY OTH-ERS, INCLUDING OTHER CAMPERS, WHO CLAIM A LOSS CAUSED BY MY CHILD. THESE AGREE-MENTS OF RELEASE AND INDEMNITY INCLUDE CLAIMS CAUSED OR CLAIMED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE (WHETHER SOLE, JOINT OR CONCURRENT) OR GROSS NEGLIGENCE OF THE RELEASED PARTIES.

Any dispute between Camp Olympia or another Released Party and me or my child shall be governed by the substantive laws (not including the laws which might apply the laws of another jurisdiction) of the State of Texas, and any mediation or suit shall occur or be filed and maintained exclusively in Trinity County, Texas, to the jurisdiction of which court or courts I hereby consent, for myself and my child.





If any part of this agreement is found by a court of competent jurisdiction to be invalid, the remainder of the agreement nevertheless will be in full force and effect.

This Agreement and Waiver of Liability does not supersede, circumvent, or cancel the CAMP OLYMPIA PERMISSION TO ATTEND, ASSUMPTION OF RISK, AND RELEASE, but instead works together in conjunction with it.

I, Parent or legal guardian, have read and accept the terms and conditions of this Agreement, and acknowledge and agree that it shall, to the fullest extent allowed by law, be effective upon me and my child, and our respective heirs, personal representatives, estates and family members.

Date	Signature of Parent/Legal Guardian
Date	Signature of Parent/Legal Guardian



# **ADDITIONAL OPTIONS**

Please complete the Additional Options form online. It is this form that you can chose to participate in Paid Activities, select Special Delivey care packages, or pre-order a 2021 Yearbook.



# SPECIAL DELIVERY CARE PACKAGE

order your camper a care package stamped....

### **SPECIAL DELIVERY**

Camp Olympia has specially designed a "Survival Kit" for the CLP's as they set out on their new adventures in this O-Mazing program! Each "Kit" will be delivered to your child during their first week of camp.

Included will be a: CLP Water Bottle – to help stay hydrated, CLP Beanie – to keep their head warm on the mountain, Camp Olympia LED Head Lamp – to help them find their way, CLP Hiking Socks – to keep their feet in shape for climbing the mountain, and a CLP Journal – to help remember and reflect on their experience!

# SUMMER 2021 YEARBOOK

2021 Yearbooks will be completed after summer and will include cabin photos, pictures from activities, nightly programs, and fun moments from each term.

Yearbooks are **\$40.00** each and will be mailed to you once published, or you can pick yours up at our Reunion Party in the Fall!



#### **FORM: ADVENTURE EXPERIENCES REGISTRATION**

#### **AEI Base Camp**

#2 Illinois Creek Road, Almont, CO 81210 (970) 641-4708

#### **CAMP REGISTRATION FORM**

Group Name: Trip Date: Participant Name: Date of Birth: Ht. Address: Gender: Wt. City: Zip: Wt. Zip: Phone # Home: Parent Email: Parent Email: Phone # Home: Phone # Phone # Phone: Phone # Phone: Phone # Phone: Phone: Phone: Phone: Phone: Address: Phone: Address: Phone: Address: Unauthorized Name: Phone # Cell Phone #: Phone # Phone # Cell Phone #: Phone # Phone Phone # Phone # Phone Phone Phone # Phone Phone Phone # Phone	PLEASE COMPLETE (print clearly or type)		
Participant Name:  Address:  Gender:  Wt.  Zip: Phone #Home: Parent Cell Phone #:  Authorized to take camper from camp:  Name: Address: Name: Address: Name: Address: Unauthorized Name:		Trip Date:	
Address: Gender: Wt. City: Zip: Phone # Home: Parent Cell Phone #: Parent Email:  Authorized to take camper from camp: Name: Phone: Address: Name: Phone: Address: Unauthorized Name: Un	Participant Name:	Date of Birth:	Ht.
City:	Address:	Gender:	Wt.
Parent Email:  Authorized to take camper from camp: Name: Address: Name: Address: Unauthorized Name: Unautho	City:	Zip:	
Parent Email:  Authorized to take camper from camp:  Name:	Phone # Home:	Parent Cell Phone #:	
Name: Phone: Address: Phone: Address: Phone: Address: Unauthorized Name: Phone: Address: Unauthorized Name: Unauthorized Name: Unauthorized Name: Phone #: Parent/Guardian/Spouse: Home Phone #: Place of Employment: Work Address: Place of Employment: Phone #: Phone Phone #: Phone Phone #: Phone Phone #: Phone	Parent Email:		
Name: Phone: Address: Phone: Address: Phone: Address: Unauthorized Name: Phone: Address: Unauthorized Name: Unauthorized Name: Unauthorized Name: Phone #: Parent/Guardian/Spouse: Home Phone #: Place of Employment: Work Address: Place of Employment: Phone #: Phone Phone #: Phone Phone #: Phone Phone #: Phone	Authorized to take camper from camp:		
Address: Name: Address: Unauthorized Name: Unauthorized Name: Unauthorized Name: Unauthorized Name: Unauthorized Name:  In Case of EMERGENCY Notify: Parent/Guardian/Spouse: Home Phone #: Home Address: Place of Employment: Work Address: Work Phone #:  If NOT available, notify: Home Address: Place of Employment: Work Phone #:  Health Care Information: Name of Physician: Date of last physical examination Oyou carry family medical/hospital insurance? YES NO Carrier: Policy or Group # Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.) Please describe:		Phone:	
Name: Phone: Address: Unauthorized Name: Unauthorized Name: Unauthorized Name: Unauthorized Name: Unauthorized Name: Unauthorized Name: Search (Guardian/Spouse: Home Phone #: Cell Phone #: Home Address: Place of Employment: Work Address: Work Phone #: Cell Phone #: Cell Phone #: Home Phone #: Cell Phone #: Ce	Address:		
Address: Unauthorized Name: Unau	Name:	Phone:	
Unauthorized Name: Unauthorized Name:  In Case of EMERGENCY Notify:  Parent/Guardian/Spouse: Home Phone #: Home Address: Place of Employment: Work Address: Work Phone #:  If NOT available, notify: Home Phone #: Home Address: Place of Employment: Work Address: Work Phone #:  Home Phone #: Home Address: Work Address: Work Address: Work Address:  Work Address: Date of Information: Name of Physician: Address: Date of last physical examination Do you carry family medical/hospital insurance? Policy or Group # Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.) Please describe:	Address:		
In Case of EMERGENCY Notify: Parent/Guardian/Spouse: Home Phone #: Home Address: Place of Employment: Work Address: Work Phone #:  If NOT available, notify: Home Phone #: Home Address: Place of Employment: Work Address: Work Phone #:  If NOT available, notify: Relationship: Home Phone #: Home Address: Work Address: Work Address: Work Address: Work Phone #:  Health Care Information: Name of Physician: Address: Date of last physical examination Ob you carry family medical/hospital insurance? YES NO Carrier: Policy or Group # Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.) Please describe:	Unauthorized Name:		
Parent/Guardian/Spouse: Home Phone #: Home Address: Place of Employment: Work Address: Work Phone #: Home Phone #:  If NOT available, notify: Home Phone #:  Home Address: Work Phone #:  Home Address: Place of Employment: Work Address: Work Address: Work Phone #:  Health Care Information: Name of Physician: Address: Date of last physical examination Do you carry family medical/hospital insurance? Work Phone #:  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.) Please describe:	Unauthorized Name:		
Parent/Guardian/Spouse: Home Phone #: Home Address: Place of Employment: Work Address: Work Phone #: Home Phone #:  If NOT available, notify: Home Phone #:  Home Address: Work Phone #:  Home Address: Place of Employment: Work Address: Work Address: Work Phone #:  Health Care Information: Name of Physician: Address: Date of last physical examination Do you carry family medical/hospital insurance? Work Phone #:  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.) Please describe:	In Case of EMERGENCY Notify:		
Home Phone #:			
Home Address: Place of Employment: Work Address: Work Phone #:  If NOT available, notify: Home Phone #: Home Address: Place of Employment: Work Address: Work Phone #:  Work Address: Work Phone #:  Health Care Information: Name of Physician: Date of last physical examination Do you carry family medical/hospital insurance? Work Phone #:  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.) Please describe:	Home Phone #:	Cell Phone #:	
Place of Employment:  Work Address:  Work Phone #:  If NOT available, notify:  Home Phone #:  Home Address:  Place of Employment:  Work Address:  Work Phone #:  Work Address:  Work Phone #:  Health Care Information:  Name of Physician:  Date of last physical examination  Do you carry family medical/hospital insurance?  Policy or Group #  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.)  Please describe:	Home Address:	<del></del>	
Work Phone #:  If NOT available, notify:  Home Phone #:  Home Address:  Place of Employment:  Work Address:  Work Phone #:  Health Care Information:  Name of Physician:  Date of last physical examination  To you carry family medical/hospital insurance?  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.)  Please describe:	Place of Employment:		
If NOT available, notify:	Work Address:		
Home Phone #: Cell Phone #:	Work Phone #:		
Home Phone #: Cell Phone #:	If NOT available, notify:	Relationship:	
Home Address:  Place of Employment:  Work Address:  Work Phone #:  Health Care Information:  Name of Physician:  Date of last physical examination  Do you carry family medical/hospital insurance?  Policy or Group #  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.)  Please describe:	Home Phone #:	Cell Phone #:	
Work Address:  Work Phone #:  Health Care Information:  Name of Physician:  Date of last physical examination  Do you carry family medical/hospital insurance?  Carrier:  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.)  Please describe:	Home Address:	<del></del>	
Work Phone #:  Health Care Information:  Name of Physician:  Date of last physical examination  Do you carry family medical/hospital insurance?  Carrier:  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.)  Please describe:	Place of Employment:		
Health Care Information:  Name of Physician: Phone:	Work Address:		
Health Care Information:  Name of Physician: Phone:	Work Phone #:		
Name of Physician: Phone:			
Address:  Date of last physical examination (within the last 24 months for those under age 18  Do you carry family medical/hospital insurance? YES NO  Carrier: Policy or Group #  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.)  Please describe:		Phone:	
Date of last physical examination (within the last 24 months for those under age 18 Do you carry family medical/hospital insurance? YES NO Carrier: Policy or Group # Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.) Please describe:	Address:		
Do you carry family medical/hospital insurance? YES NO  Carrier: Policy or Group #  Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.)  Please describe:		(within the last 24 months	for those under age 18)
Carrier: Policy or Group # Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.) Please describe:	Do you carry family medical/hospital insurance?		101 111020 1111101 1180 10)
Do you have any special dietary restrictions, food needs, allergies? (ie: vegetarian, gluten free, etc.)  Please describe:			
Please describe:		s. allergies? (ie: vegetarian, gluter	n free, etc.)
		z, urrergress (res vegeturrum, gruser	2 22 33, 333.)
List any activities guardian DOES NOT want child to participate in:			
List any activities guardian DOES NOT want child to participate in:			
List any activities guardian DOES NOT want child to participate in:			
List any activities guardian DOES NOT want child to participate in:			
	List any activities guardian DOES NOT want child to	participate in:	



#### FORM: ADVENTURE EXPERIENCES AGREEMENT TO PARTICIPATE



Please read carefully: This document must be signed by all Participants, including the Parent or Guardian (each referred to as "Parent") of a Participant who is a minor (under 18 years of age.) The Parent is signing on behalf of himself or herself and on behalf of the minor child.

#### Agreement to Participate: Including Assumption of Risks and Agreements of Release and Indemnity

In consideration of being allowed to stay on premises and/or participate in an AEI trip, organized and conducted by Adventure Experiences, LLC (DBA AEI Base Camp and AEI Outfitter), I, for myself and for any minor child of mine who participates, acknowledge and agree as follows:

The adventure experience in which I or the child will participate includes backpacking, camping, orienteering, hiking, rafting, kayaking, paddle boarding, challenge course activities (a network of cables, ropes, swings and platforms, as high as 50 feet off the ground, over which I or the child may walk and swing, with or without the assistance of other persons), rock climbing, fly fishing, horseback riding, outdoor games and others. These activities involve risks and hazards, including, among others, the following: those associated with traveling and camping in mountainous terrain; exposure to the natural elements, which may include heat, extreme cold and altitude, snow, sleet and rain, falling rocks and timber; and river crossings; dependence on other participants and staff; accidents or illness in remote places which may be many hours or days away from medical facilities; accidents associated with travel, by air, train, boat, ATV, horse, and automobile; the carelessness of other participants and staff; and the failure of equipment. These and other risks and hazards are inherent in the activities of AEI and cannot be eliminated without significantly changing the nature of the activities.

I understand that these and other hazards and risks may result in loss or damage to personal property, and personal injuries, including falls, abrasions, sprains, breaks, cold water immersion, and other emotional and physical injuries, and, in extreme cases even death, including by drowning.

I represent that I, or the child, have no medical or emotional conditions which may adversely affect my or the child's participation in this adventure experience, or which may cause me, or my child to be a danger to ourselves or others. I have listed on the Health History Form provided by AEI any and all medical conditions of which I believe AEI should be aware. I understand that it is my responsibility, and mine only, to determine my or the child's suitability, medical or otherwise, for participation in the activities.

#### Acknowledgment and Assumption of All Risks

For myself and on behalf of a child of mine who participates, I assume all risks of onsite presence and the activities, inherent or otherwise and whether or not described above. If my child is the Participant, I have discussed the activities and risks with him or her and the child understands both and wishes to participate nevertheless. The child has signed below to reflect his or her understanding of the activities and risks, assumption of them and desire to participate.

#### Agreements of Release and Indemnity

For myself and on behalf of a child of mine who participates, I agree to release and hold harmless AEI, its shareholders, directors, officers, employees, agents and contractors ("Released Parties") from any and all claims which I or the child may now have or acquire in the future, **including claims of negligence but not claims of gross negligence and intentionally wrongful conduct**, as a result of or arising from my or the child's onsite presence, enrollment or participation in any guided or unguided activities.

I further agree to protect and indemnify (that is pay any judgment and costs, including attorney's fees) AEI and the other released parties from any claim of the child or of any third party, including rescuers, other participants in the activities of AEI and members of my or the child's family, arising from my or the child's onsite presence, enrollment or participation in any guided or unguided activities.

#### Other

I certify that I am completely healthy (both physically and emotionally) and capable of participating in this Adventure Experiences, LLC trip/program. I understand that it is solely my responsibility to determine whether there is any medical reason that I should not participate in the program. I also understand that AEI and all of its representatives are in no position to determine whether I'm capable to participate in this program. My participation in this program is based on my decision to do so.

I agree to reimburse or pay any and all costs of AEI or any other released party associated with defending a claim brought by me or the child, to the extent that claim is dismissed or otherwise found to be without merit.

In the event of a dispute between me or the child and AEI or any released party, I agree to engage in good faith efforts to mediate that dispute. Unless otherwise agreed in writing, any mediation or suit may be conducted or filed only in Gunnison County, Colorado, and the laws of Colorado will apply to any such dispute, excepting only the laws of the State of Colorado which may apply the laws of another jurisdiction.

I authorize AEI to provide or obtain medical care for me or the child in the event of an incident requiring medical attention, and I further authorize AEI to exchange with any third-party medical care giver such information regarding my or the child's medical history or condition as may be deemed important to either of them.

I agree that I, or the child, will not consume or be under the influence of any chemical substance, including alcohol, during the activity. I, and the child, understand further that the activity and all aspects of it are purely voluntary and I or the child may choose not to participate. I agree that I, or the child, will follow all safety instructions. I agree to allow AEI to use photographic or other images of me or the child for marketing or any other purpose deemed reasonable by AEI.

Should any part of this agreement be deemed not enforceable by a Court of competent authority, the remainder of the agreement shall nevertheless remain in full force and effect.

Printed Name of Participant	Signature of Parent or Guardian of Minor Participant
Signature of the Participant	 Date





## **ADVENTURE EXPERIENCES HEALTH HISTORY**

#### AEI BASE CAMP HEALTH HISTORY FORM

#### (Please Print Neatly)

The proposed program by AEI Base Camp requires participation in physical activities, which are, by their nature, physically demanding. Many of the activities as well as being at high altitude will challenge you, both of which can cause surges in blood pressure and heart rates. It is also imperative that you are free of any heart related or other diseases. Therefore, all participants must be free of medical or physical conditions, which might create undue risks to themselves or any others who depend on them. Good physical condition will increase your enjoyment of the outdoor activities. As required by the State of Colorado, participants under the age of 18 must submit a statement confirming a physical examination within the last 12 months by a physician or nurse practitioner.

Name\_\_

Birth Date\_\_\_\_\_ Age\_\_\_\_

Health History: (Circle the appropriate response and describe any yes answers)		
Have you had or do you currently have any heart problems, i.e., strokes, heart attacks, and/or heart related diseases?	YES	NO
If YES, Explain:		
Do you frequently suffer from pains/pressure in your chest?	_ YES	NO
Do you often feel faint or have spells of severe dizziness?	_ YES	NO
Has a doctor ever told you that you have high blood pressure?	_ YES	NO
Are you a smoker?	_ YES	NO
(NOTE: If you have had any heart related problems you will need to have a release from a physician in order	to particij	oate in
any camp activities.)		
Do you have arthritis, joint or back problems that might be aggravated by exercise?	YES	NO
Have you had any operations or serious injuries? (dates)	_ YES	NO
Do you have any disabilities or chronic recurring illness?	YES	NO
Are there any activities to be limited/discouraged by physician's advice?	YES	NO
Are you allergic to any medicines, insects or pollen?	YES	NO
Do you have Asthma?	YES	NO
Do you have Epilepsy?	_ YES	NO
Do you have Diabetes?	YES	NO
Do you have any prescribed meal plan or restrictions?	YES	NO
Are you currently sick and/or using a medication not listed above?	YES	NO
Do you carry family medical/hospital insurance?	YES	NO
Carrier:Policy or Group #		
Suggestions or health related information for AEI Personnel:		
General Health Statement:		
<b>REPRESENTATION AND EMERGENCY AUTHORIZATION</b> This health history is correct so far as I know, and the person herein described has permission to engage in all prescribe except as noted.	ed camp ac	ctivities
I hereby give permission to the medical personnel selected by AEI Base Camp, or it's agents to order x-rays, routine tests well as injection and/or anesthesia and/or surgery for me or my child as named above. Such authorization for emergence also include, but not be limited to, charges incurred for the providing of aid and arranging evacuation if AEI Base Cand determine that such evacuation is necessary or desirable. I further agree to assume responsibility for the costs of any special evacuation and of any medical care and acknowledge that these costs are the financial responsibility of the undersigned, and agree to abide with the restrictions placed on my camp activities.	cy treatment p, or it's ecialized me	nt shall agents, eans of
Signature of Participant:		
	e:	
Witness:	:	

# **FORM: CERTIFICATE OF IMMUNIZATION**

#### COLORADO CERTIFICATE OF IMMUNIZATION



www.coloradoimmunizations.com

This form is to be completed by a health care provider (physician (MD, DO), advanced practice nurse (APN) or delegated physician's assistant (PA)) or school health authority. School required immunizations follow the ACIP schedule. Note: Final doses of DTaP, IPV, MMR and Varicella are required prior to kindergarten entry. Tdap is required at 6<sup>th</sup> grade entry.

Student Name:					Date of birth	n:	
Parent/guardian:							
Required vaccines	Immunization	n date(s) MM/D	D/YY				Titer date*
Hep B Hepatitis B							
DTaP Diphtheria, Tetanus, Pertussis (pediatric)							
Tdap Tetanus, Diphtheria, Pertussis							
Td Tetanus, Diphtheria							
Hib Haemophilus influenzae type b							
IPV/OPV Polio							
PCV Pneumococcal Conjugate							
MMR Measles, Mumps, Rubella							
Measles							
Mumps							
Rubella							
Varicella Chickenpox							
Varicella - date of disease		Varicella - po	ositive screen	1		ratory titer report document immun	t must be provided nity.
					*The shaded are	a under "Titer dat ptable proof of in	te" indicates that a
Recommended vacci	nes <sub>Imr</sub>	nunization dat	te(s) MM/DD/YY		vaccine.	pcable proof of in	nmunity for this
Recommended vacci	nes <sub>Imr</sub>	nunization dat	e(s) MM/DD/YY			pcable proof of in	nmunity for this
	nes <sub>Imr</sub>	munization dat	e(s) MM/DD/YY			prable proof of in	nmunity for this
HPV Human Papillomavirus	nes <sub>Imr</sub>	nunization dat	te(s) MM/DD/YY			prable proof of in	nmunity for this
HPV Human Papillomavirus Rota Rotavirus	nes <sub>Imr</sub>	nunization dat	te(s) MM/DD/YY			peane proof of in	nmunity for this
HPV Human Papillomavirus  Rota Rotavirus  MCV4/MPSV4 Meningococcal	nes <sub>Im</sub>	nunization dat	te(s) MM/DD/YY			peane proof of in	nmunity for this
HPV Human Papillomavirus  Rota Rotavirus  MCV4/MPSV4 Meningococcal  Men B Meningococcal	nes <sub>Im</sub>	nunization dat	te(s) MM/DD/YY			peable proof of in	nmunity for this
HPV Human Papillomavirus  Rota Rotavirus  MCV4/MPSV4 Meningococcal  Men B Meningococcal  Hep A Hepatitis A	nes <sub>Imr</sub>	nunization dat	te(s) MM/DD/YY			peable proof of in	nmunity for this
HPV Human Papillomavirus  Rota Rotavirus  MCV4/MPSV4 Meningococcal  Men B Meningococcal  Hep A Hepatitis A  Flu Influenza		nunization dat	te(s) MM/DD/YY			peable proof of in	nmunity for this
HPV Human Papillomavirus  Rota Rotavirus  MCV4/MPSV4 Meningococcal  Men B Meningococcal  Hep A Hepatitis A  Flu Influenza  Other	r stamp:			Yes No	vaccine.	peable proof of in	nmunity for this
HPV Human Papillomavirus  Rota Rotavirus  MCV4/MPSV4 Meningococcal  Men B Meningococcal  Hep A Hepatitis A  Flu Influenza  Other  Health care provider signature o	r stamp:			Yes No	vaccine.	peable proof of in	nmunity for this
HPV Human Papillomavirus Rota Rotavirus MCV4/MPSV4 Meningococcal Men B Meningococcal Hep A Hepatitis A Flu Influenza Other  Health care provider signature of Student is current on required in	r stamp:	s for age (ci	rcle one):		vaccine.	peable proof of in	nmunity for this
HPV Human Papillomavirus  Rota Rotavirus  MCV4/MPSV4 Meningococcal  Men B Meningococcal  Hep A Hepatitis A  Flu Influenza  Other  Health care provider signature of Student is current on required in OR	r stamp: nmunization	s for age (ci	rcle one):		vaccine.	peable proof of in	nmunity for this
HPV Human Papillomavirus Rota Rotavirus MCV4/MPSV4 Meningococcal Men B Meningococcal Hep A Hepatitis A Flu Influenza Other  Health care provider signature of Student is current on required in OR Immunization record transcribed School health authority signature	r stamp: nmunization l/reviewed be or stamp:	s for age (ci	rcle one):	y:	Date:		
HPV Human Papillomavirus Rota Rotavirus MCV4/MPSV4 Meningococcal Men B Meningococcal Hep A Hepatitis A Flu Influenza Other  Health care provider signature of Student is current on required in OR Immunization record transcribed	r stamp: nmunization //reviewed be or stamp: school to share em, the state's	s for age (ci	rcle one): alth authority	y: n records with st	Date:		



# FORM: ADVENTURE EXPERIENCES HEALTH STATEMENT

#### Health Statement by Licensed Medical Personnel

Participant's Name	Birth Date	_
Гrip Dates		
'high altitude" (9,000 to 13,000+ feet) and pressure and heart rates as well as other con	ed participant requires participation in activities, which are physical din a remote, wilderness environment. These factors can caunditions. Therefore, all participants must be free of medical or places or others. Your response to these questions will aid in the	se surges in blood physical conditions,
have examined the above participant within	in 12 months of program date. Date of examination	
In my opinion, the above participant is /	is not able to participate in the described program.	
Description of any limitation or restriction of	on program activities	
The participant is under the care of a physic	cian for the following conditions	_
Current treatment at the time of this report	includes	-
Prescribed medications being used by partic	cipant	-
Over-the-counter medications used by parti		-
		-
Known allergies or drug reactions		
		-
•	r	
	Title	_
AddressPhone	Date	
. 110110	Date	

\*\*Please fill out attached Colorado Certificate of Immunization. DO NOT staple another State's Immunization form. The CO Certificate must be filled out for consistency per Child Care Regulations.



#### **FORM: ADVENTURE EXPERIENCES MEDICATION PERSMISSION**

#### Permission to Administer Medication at AEI Base Camp

To be completed by PARENT	'/GUARDIAN
I hereby give my permission for	to take the medication listed below at
Child's Name AEI Base Camp, as ordered by the health care provider with prescriptive understand that it is my responsibility to furnish the medication.	authority at the bottom section of this form. I
<b>Prescription medication:</b> must come in ORIGINAL container labeled is to be given, dosage, route, date medicine is to be stopped, and licensed phone number must also be included on the label.	
Over-the-Counter Medicine: must be labeled with child's name. Dosagauthorization, and medicine must be packaged in ORIGINAL container.	
AEI Base Camp agrees to administer medication prescribed by a licensed unused or expired medication will be given to the adult group leader to b of the trip. All medication(s) left at AEI Base Camp will be discarded accrecommendations for safe medication disposal.	e given back to the parent/guardian upon completion
By signing this document, I give permission for my child's Health administration of this medication with AEI Base Camp staff delegation	
Parent/Legal Guardian's PRINTED Name Parent/Legal Guard	dian SIGNATURE Date
Health Care Provider Aut	horization
Child's Name:	Date of Birth:
**Medication:	Dosage:
Route:	To be given at the following Times:
State Date:	End Date:
Special Instructions:	
Purpose of Medication:	
Possible Side Effects:	
SIGNATURE of Health Care Provider with Prescriptive Authority	Date
PRINTED Name of Health Care Provider with Prescriptive Authority	
Name of Health Care Facility/Medical Office	Phone #

\*\*If Child has MULTIPLE medications, this form needs to be filled out for EACH medication.



# FORM: ADVENTURE EXPERIENCES SUNSCREEN WAIVER

#### Sunscreen Waiver

Please provide the instructions for appl	ication of sunscreen or other approved sun protection product(s):
Every Minutes/Hours (Pl Please list sunscreen ** that participant	First and Last Name
Brand	SPF Protection
**Make sure you write the participant's	s first and last name on his/her sunscreen prior to arrival.
	your participant to wear sunscreen or other sun approved protection lealth, religious reasons or any reason not otherwise specified, please g space provided:
supply the participant with Banana Boo	s to use AEI Base Camp's sunscreen. I authorize AEI Base Camp to at Sport Sunscreen. The participant will apply sunscreen or approved sunprior to going outside. Sunscreen will be used and re-applied as directed
PRINTED NAME of Parent/Guardian	1
SIGNATURE of ParentGuardian	 Date

The following Sunscreen Waiver is required by the **Division of Child Care Licensing**. Thank you for filling out this form completely.

