

Windham-Tolland 4-H Camp

RESIDENT & DAY CAMP

326 Taft Pond Road
Pomfret Center, CT 06259



Nonprofit Organization
Presorted Standard
U.S. Postage Paid
Permit No. 15
Pomfret Center, CT 06259



TO:

2010
Windham-Tolland
4-H Camp

Camp Registrar - 860-974-3379
Camp Fax - 860-974-3327
Camp Nurse - 860-974-1889 SEASONAL
Web Site - www.4hcampct.org
E-Mail- windham4h@earthlink.net

WELCOME TO SUMMER 2010

The Windham-Tolland 4-H Camp has been serving area children and families since 1954. Located in Pomfret Center, CT, the camp's 270 acres contain woodlands, cabins, recreational areas, and scenic ponds. Our goal is to use cooperative activities to promote each camper's social and emotional development. Our caring, camper-centered staff is committed to providing safe, educational and fun experiences for every child. We are licensed by the State of Connecticut and are fully accredited by the American Camp Association.

OUR CAMP DIRECTOR



Camp Director, Heather Logee, returns to our camp with 18 years of experience starting as a camper, counselor and now as Camp Director for a fourth year. Heather has her Bachelor of Science Degree from Ferrum College, Ferrum, VA where she studied camp management and horticulture and was the recipient of the Arthur S. Owens Leadership Award.

A certified ropes instructor as well as certified in CPR and First Aid, Heather continues her professional development through yearly ACA workshops and conferences. She is involved year-round in 4-H Camp program and training.

Heather's goal for the 2010 camp season is to insure a memorable, fun, and safe camp experience for every child. Heather is looking forward to the campers having a terrific summer.

NOW IT'S TIME TO HAVE LOTS OF FUN!

Our final staff will include 40 college-age women and men with several international staff adding cultural enrichment. Our camper to staff ratio is 7 to 1. During the summer of 2009, over 950 campers enjoyed our camp. Our staff receives an intense 1½ weeks of training from national, state, and local experts in child education and safety. CT state license and ACA Accreditation guarantee that our staff is certified to instruct in their program areas and is highly qualified to work with children.

REGISTER EARLY!

CAMP CLUB DOLLARS

**Ask our Camp Registrar
(860) 974-3379
about our unique "Camp
Layaway" Plan.**

HEALTH AND SAFETY

- The Windham-Tolland 4-H Camp is licensed by the Connecticut State Department of Health and fully accredited by the American Camp Association.
- 24-Hour Medical Staff.
- Parents are notified promptly of a child's illness or injury.
- Parents must pay for medical services needed by their camper.
- Emergencies are handled by Day Kimball Hospital, 320 Pomfret Street, Putnam, CT 06260.

HEALTH CERTIFICATE STATE LAW

- Each camper **must** have a physical examination within two years of the camp session. A copy of that physical **must** be forwarded to camp **each year**.
- A copy of a school health form and immunization history with an attending physician's signature is also acceptable.
- **Form E is required for prescribed medications and must be signed by both a physician and parent/guardian.**

BUNKING POLICY

- At Windham-Tolland 4-H Camp your child will have the best camping experience bunking with 7 new friends. For this reason, we strongly prefer them to bunk with new friends. However, if you feel it necessary for him or her to bunk with a friend **of the same age**, please list **only one friend's name and age**. **Both friends must request each other. Priority given to those who request early.**

DAILY SCHEDULE Monday – Thursday

7:00 AM	Wake up
7:30 AM	Flag Raising
7:45 AM	Breakfast
8:00 AM	Day Camp Check-in
8:15 AM	Cabin Clean Up
8:45 AM	1 st Activity
9:45 AM	2 nd Activity
10:45 AM	3 rd Activity
11:45 AM	Free Time/Free Swim
12:30 PM	Lunch
1:30 PM	Rest Hour
2:30 PM	4 th Activity
3:30 PM	Snack
4:00 PM	5 th Activity
5:00 PM	Day Camp Check-out
5:00 PM	Cabin Activity Time
6:00 PM	Dinner
6:45 PM	Flag Lowering/Time for Thought
7:30 PM	All Camp Evening Program
8:45 PM	Snack
9:00 PM	Evening Cabin Time
9:45 PM	Lights Out - Taps

FRIDAY'S SCHEDULE

5:00 PM	Buffet supper; cleanup camp; flag lowering; "Time for Thought"
6:30 PM	Closing ceremony

**STARTING AGE FOR DAY CAMP –
AGE 6 at first day of camp session.**

**Look for "Budget Friendly Rates"
for weeks 1, 2 and 6.**

RESIDENTIAL CAMP

- Boys and girls ages 9 to 15.
- Weekly starting Sunday, June 27th, 2010 through Friday, August 13th, 2010.
- There are 5 activity periods per day. Campers choose their activities for the week on Sunday (after parents leave).
- **ACTIVITIES (see pgs. 4-5)** will each be 1-hour in length except horse riding will include 1-hour of riding and 1-hour of barn basics.

DAY CAMP

- Day campers are ages 6 to 15.
- These campers will enjoy the same fun-filled weekly 8:00 AM – 5:00 PM schedule as resident campers.
- **The 6, 7 and 8 year old day camp clovers will be integrated with overnight clovers which already has a set schedule of activities.**
- All camp facilities and day programs are available to day campers. This includes lunches, snack, Friday evening dinner & closing ceremonies starting at 6:30 PM.
- **All day campers must arrive on Sunday of their camp session between 3:00 PM and 3:45 PM for swim tests. Please bring swim wear and towel. Campers age 9 thru 15 will register for activities at this time.**

CLOVER CAMP

- Boys and girls ages 7 to 8 (at first day of camp session).
- With their own counselor, clovers will be able to sample regular camp activities as well as supper, evening program, and one or two overnights.
- These overnight sessions offer an exciting introductory

residential 4-H Camp experience for the younger camper.

EXPERIENCED CLOVER PROGRAM (CLOVER CAMP E & F) *Back by Popular Demand!*

- Boys and girls, ages 7 to 8, who have previously attended a Clover Program, are eligible.
- July 25-July 30, 2010 - \$390 Fee
- August 1-August 6, 2010 - \$380 Fee

TEEN LEADERSHIP PROGRAM

- Open to teens who have completed the 9th, 10th, or 11th grades.
- Teen leaders must attend training offered week #1 (6/27—7/2/10)
- **SEE TL RESPONSIBILITIES (pg. 13)**
- **FOR APPLICATION AND INFORMATION, VISIT THE WEBSITE: www.4hcampct.org**
Or contact the Camp Registrar windham4h@earthlink.net
Call (860) 974-3379

DETAILS **ARRIVAL & DEPARTURE** **TRANSPORTATION**

- Campers' parents or guardians are responsible for their transportation to and from camp. Plan to arrive on **Sunday of the camp session, between 2:30 and 4:00 PM.** Details will be sent in a confirmation letter.
- Day Campers **must** arrive on **Sunday of the camp session, between 3:00 PM and 3:45 PM,** for activity registration and swim tests. Monday morning, (arriving between 8:00 – 8:30 A.M.) day campers will then be “up and running”.
- Family and friends are invited to attend the closing ceremony each Friday at 6:30 PM followed by dismissal around 7:00 PM.

FUN-FILLED THEME WEEKS & ACTIVITIES

Campers will receive additional information on their theme week with their confirmation letter upon our receipt of an application and deposit.

Week 1 - Red Sox vs. Yankees

Week 2 - Childhood Movies

Week 3 - Board Games

Week 4 - Around the World Cuisine

Week 5 – Capture The Flag

Week 6 - Hollywood

Week 7 - Carnival

This year all residential and day campers will select 5 one-hour activities for the week – except horse activity campers who will select 3 others in addition to their two-hour horse activity. Clover campers will sample selected activities. The following activities are available each week/session at no additional cost. All equipment will be provided but campers are free to bring their own equipment (cameras, fishing poles, etc., properly labeled) if they prefer.

ARCHERY

Available to all campers, **ages 10 to 15**, campers are instructed by a certified archery instructor. Improve your archery skills and learn fun target games you can play.

ARTS and CRAFTS

During arts and crafts activities, young artists will learn to sharpen their 2-Dimension and 3-Dimension skills in a variety of media. Our goal is to have each camper bring home product(s) they are proud of.

CANOE

Campers **must be Red Cross certified level 3 swimmers** to participate in this activity. Basic canoe and safety skills will be taught by a certified instructor.

DANCE

Campers will learn a variety of dances and then will practice those steps for Thursday's dance.

DRAMA

With the help of the Drama Instructor, campers will prepare their original plays to be acted out.

EARTH AGENTS (WEEKS 3 & 7 ONLY)

Stop Dr. Thistle's plans for environmental chaos. Experience hands on activities and earn your Earth Agent badge to stop Dr. Thistle in his muddy tracks.

FISHING

In our "catch and release" program campers can practice casting and experimenting with different types of bait while fishing in different locations of our large property under the watchful eye of experienced counselors. Campers may bring their own fresh water pole (with your name on it) or one will be provided.

HISTORY REINACTON

Recreate historical events and battles in new and exciting ways.

KAYAKING

Campers **must be Red Cross certified level 3 swimmers** to participate in this activity. Basic kayaking and safety skills will be taught by a certified instructor.

NATURE

Campers explore the environment by investigating stream life, wildlife, forestry, plant life, and develop an overall appreciation of our Earth. Science curriculum and materials have been funded by Pfizer, Inc.

OUTDOOR SURVIVAL

Learn to build fires, shelters, and camp fire cooking.

ROPES/CHALLENGE COURSE

Low ropes is an interactive, team building activity that is sure to challenge you mentally and physically. Contains multiple elements and a horizontal climbing wall. Are you up to this challenge? Certified staff will instruct.

SELF-DEFENSE

Campers will learn different techniques to better handle themselves in different situations when appropriate.

SPORTS and RECREATION

Campers will select from a variety of activities and learn skills in local and international sports and cooperative games. Camp has a volleyball court, basketball court, playing field, and a four-square court.

SWIMMING

American Red Cross swimming lessons are given to campers who sign up for this activity. Red Cross certificates can be earned.

SPECIAL ACTIVITIES / EVENTS

(Additional Fees Charged)

HORSEBACK RIDING

(\$140 Additional Fee Per Week)

Join our experienced horse staff for summer fun at the stables. Campers, ages 9 to 15, will learn to groom and tack a horse, ride in English or Western lessons, play 'gymkhana' games on horseback and even enjoy a trail ride in our beautiful woods! Campers will have a two-hour horse activity class each day with one-hour of horseback riding instruction emphasizing safety and fun. For the second hour campers will learn and participate in barn basics, horse care and equipment. This activity averages out to only \$14/hr as compared to other riding programs. Horseshoeing demonstrations will also be offered.

CANOE PADDLE MAKING

(\$25 Additional Fee Per Week)

Using blank wooden forms, campers personalize and finish a unique wooden paddle to take home. **(Not available Week 3)**

INTRODUCTION TO DRAFT HORSES & DRIVING

(\$140 extra fee)

WEEK 7

For campers, **ages 9 – 15** this course will cover basic differences between draft and saddle horses including the key points in a working draft horse, the different motions, basic harnesses and hitching. Everyone will have the chance to drive a single horse and a team. Instructor **Doug Smith** of Canterbury, CT. has 40+ years work horses experience on the farm and in the woods.

ROCKETRY

(\$45 extra fee)

WEEK 3

Each camper will build and decorate their own Estes rocket and water bottle rocket as well as launch pre-built rockets. Taught by **David Emigh** who was part of the Mercury Space Program; is a science historian teaching physics, history of physics and astronomy at QVCC and who worked at Los Alamos and Brookhaven National Labs.

STAYOVER WEEKEND

(\$170 extra fee)

JULY 17–18

This year we will be day tripping on Saturday to **Plimouth Plantation, Plymouth, MA**. Available to campers enrolled in both weeks 3 and 4.

REGISTRATION PROCESS

- Please complete, sign, and return the pertinent forms and deposit:
 - **Camp Application & Pertinent Forms – Forms A, B, C, D, F, G**
 - **Teen Leadership Program – Teen Leadership Application & Forms B, C, D, F, G**

ADDITIONALLY,

- **Form E (Administration of Prescribed Medications) must be submitted, completed, and signed by a physician and parent/legal guardian if a camper has prescription medications.**

REGISTRATION INFO/FORMS AVAILABLE ON LINE – www.4hcampct.org

Download forms & send via mail with deposit.

- **A Medical Evaluation is good for two (2) years.**
- **A copy of a medical evaluation from your child's school, sports activity, Girl Scouts, Boy Scouts or any other youth-oriented organization is acceptable.**
- **Confirmation of your registration will be forwarded to you by the U.S. Postal Service.**

Any ADA special needs accommodation must be submitted to the Camp Director IN WRITING at least 15 days prior to the start of the camping session for which the camper is registering.

FINANCES

- Send Deposit of 50% per session for each camper with forms A, B, C, D, E, F, G.
- Balance in full is due as detailed in your acceptance/confirmation letter.
- Teen Leadership Fee - \$50 deposit per week session. Upon acceptance by director, the registrar will bill. Balance in full is due prior to Teen Leadership training and per details in acceptance/confirmation letter.
- For campership information, brochures, or questions, please call the camp registrar at (860) 974-3379 or e-mail at windham4h@earthlink.net
- One week camperships may be granted **only for either week 1 or week 2.**

REFUND POLICY

- Refund of deposit (**except for a \$50 processing fee**) will be given only if cancellation is made **10 days prior to check-in date.**
- **A \$50 processing fee** will be charged for each session change after your registration has been processed.
- No refunds for early dismissal due to homesickness, misconduct or medical reasons.

REGISTER EARLY FOR YOUR SPECIAL CHOICE!

- **All forms are included in this registration packet.**
- **Forms may be photocopied.**
- **Only original signatures are acceptable.**
- **Additional forms may be printed from our website, 4hcampct.org.**

REMINDER

Registrations are accepted from February, 2010 until the last week of camp, Monday, August 8th, 2010.

FORM A - RETURN WITH FORMS B, C, D, E, F, G

CAMP APPLICATION - 2010 - WINDHAM-TOLLAND 4-H CAMP

Camper's Name (Last Name) _____ (First Name) _____

Mailing Address _____, Town _____, State _____, Zip Code _____

Boy ____ Girl ____ Date of Birth (Month, Day, Year) _____ Age _____ School Grade in Sept., 2010 _____

Parent/Guardian's Name _____ Address (if different from above) _____

Home Phone (_____) _____ Work Phone (_____) _____ **E-MAIL ADDRESS:** _____

If parents cannot be reached in case of emergency, please contact: _____

Home Phone (_____) _____ Work Phone (_____) _____

Please circle your choice below:

RESIDENT CAMP		Sun 2:30 PM - 4 PM thru Fri 7 PM		(Boys & Girls, Ages 9-15)		
DAY CAMP		Mon thru Fri - 8-8:30 AM – 5-5:30 PM		(Boys & Girls, Ages 6-15)		
CLOVER CAMP A, B or C		Mon 8 AM thru Tues 5 PM		(All Clover Boys & Girls, Ages 7-8)		
CLOVER CAMP AA, BB, or CC		Wed 8 AM thru Fri 7 PM		(All Clover Boys & Girls, Ages 7-8)		
EXPERIENCED CLOVER CAMP		Same Schedule As Resident Camp		(All Clover Boys & Girls, Ages 7-8)		
RESIDENT CAMP June 27-July 2 (WK 1) <i>Red Sox vs. Yankees</i>	RES General \$380	DAY General \$200	CLOVER A 6/28 - 6/29 Mon - Tues \$140	CLOVER AA 6/30 - 7/2 Wed - Fri \$195	Canoe Paddle Making +\$25	(9+ Yrs Old) Riding + \$140
RESIDENT CAMP July 4-July 9 (WK 2) <i>Childhood Movies</i>	RES General \$380	DAY General \$200	CLOVER B 7/5 - 7/6 Mon - Tues \$140	CLOVER BB 7/7 - 7/9 Wed - Fri \$195	Canoe Paddle Making +\$25	Riding + \$140
RESIDENT CAMP July 11-July 16 (WK 3) <i>Board Games</i>	RES General \$390	DAY General \$200	CLOVER C 7/12 - 7/13 Mon - Tues \$140	CLOVER CC 7/14 - 7/16 Wed - Fri \$195	Rocketry +\$45	Riding + \$140
July 17-July 18 (RESIDENT CAMP ONLY)	Stayover Weekend - Available to campers enrolled for both weeks 3 and 4 + Fee: \$170 (Includes a FUN TRIP to "Plymouth Plantation, Plymouth, MA & weekend Laundry Service)					
RESIDENT CAMP July 18-July 23 (WK 4) <i>Around the World Cuisine</i>	RES General \$390	DAY General \$200	CLOVER D 7/19 - 7/20 Mon - Tues \$140	CLOVER DD 7/21 - 7/23 Wed - Fri \$195	Canoe Paddle Making +\$25	Riding + \$140
RESIDENT CAMP July 25-July 30 (WK 5) <i>Capture The Flag</i>	RES General \$390	DAY General \$200	Experienced Clovers E \$390		Canoe Paddle Making +\$25	Riding + \$140
RESIDENT CAMP August 1-August 6 (WK 6) <i>Hollywood (NEW 2010 FEE)</i>	RES General \$380	DAY General \$200	Experienced Clovers F \$380		Canoe Paddle Making +\$25	Riding + \$140
RESIDENT CAMP August 8-August 13 (WK 7) <i>Carnival</i>	RES General \$390	DAY General \$200	Intro to Draft Horses & Driving +\$140		Canoe Paddle Making +\$25	Riding + \$140

A CONFIRMATION LETTER TO EACH CAMPER WILL BE MAILED AFTER YOUR REGISTRATION IS PROCESSED.

I understand that a refund of my deposit (except for a \$50 processing fee) will be given only if my cancellation is made 10 days prior to check-in date and also that a \$50 processing fee will be charged for each/any session change. I also understand there are NO REFUNDS FOR EARLY DISMISSAL DUE TO HOMESICKNESS, MISCONDUCT OR MEDICAL REASONS.

PAYMENT METHOD: A 50% deposit for each camper per week per session is required.

- Check/ money order enclosed payable to: **Windham-Tolland 4-H Camp.** Amount: \$ _____
- VISA/MasterCard # _____ Exp. Date _____ Amount: \$ _____
- I authorize the balance to be charged to my credit card on May 31st, 2010. (Please check if desired.)

I wish to bunk with (MAXIMUM OF ONE CAMPER ONLY) _____, age ____ (MUST BE SAME AGE). Both friends must request each other on their applications. **Applications with more than one person requested for bunking will not be accepted.**

Signature of Parent/Guardian

Cardholder Signature/Parent/Guardian

Date

FORM B – RETURN WITH FORMS A, C, D, E, F

WINDHAM-TOLLAND 4-H CAMP

CODE OF CONDUCT AGREEMENT
FOR CAMPER, TEEN LEADERS AND PARENTS

I, the undersigned camper/teen leader and parent/legal guardian have read the basic rules for participation at the Windham-Tolland 4-H Camp program outlined below and agree to abide by the rules.

Campers will:

- Participate fully in the program.
- Be responsible for his/her own behavior and uphold standards for their peers.
- Follow all scheduled times, including curfew and wake-up.
- Will dress appropriately for a co-ed outdoor recreation experience.

Campers will not:

- Leave the camp premises without staff supervision and director permission.
- Disobey directives from camp staff or camp policies, rules and regulations.
- Be disrespectful or direct profanity, vulgar language, or obscene gestures towards other campers or camp staff or wear offensively worded or graphic clothing.
- Play with matches, fire, or commit arson.
- Partake in the theft or the unauthorized removal of camp property, staff property or camper property.
- Fight, provoke fighting or commit physical abuse to others or themselves.
- Commit extortion, coercion or blackmail that force an individual to act through the use of force or threat of force.
- Make derogatory statements that may substantially disrupt the camp program or insight violence.
- Engage in sexual harassment: any unwelcome sexual advance or conduct including lewd remarks, touches, or request for sexual favors that have the effect of intimidating individuals or disrupting the camp environment will not be tolerated.
- Sell, give, deliver, possess, use or be under the influence of drugs, alcohol or tobacco products. This includes the misuse of prescription and over the counter medications.
- Haze other campers.
- Possess a weapon or dangerous instrument to be used as a weapon.
- Violate local, state or federal laws.
- Intentionally damage camp facilities including graffiti; you will be billed for damages.
- Bring electronic equipment including but not limited to: cell phones, CD players, MP3 players, iPods, video games, or radios.

Failure to comply with these rules may result in but not be limited to a “time-out” from an activity, removal from a program area or expulsion from the camping program. Corporal Punishment is not permitted at the Windham-Tolland 4-H Camp. Violations in local, state or federal laws will be reported to the authorities.

I understand that a refund of my deposit (except for a \$50 processing fee) will be given only if my cancellation is made 10 days prior to check-in date and also that a \$50 processing fee will be charged for each/any session change. I also understand there are NO REFUNDS FOR EARLY DISMISSAL DUE TO HOMESICKNESS, MISCONDUCT OR MEDICAL REASONS.

PERMISSION FORM - Complete a separate application form for each child. A minimum 50% deposit is required for each camper per week per session. I hereby give permission for the named camper to attend the Windham-Tolland 4-H Camp and to participate in all activities, subject to the authority of the camp director. I further give permission for the named camper to participate in any planned out-of-camp outings or trips under the supervision of the director or assigned staff member. I will not hold the Windham-Tolland 4-H Camp responsible for the loss of money, jewelry, or personal articles brought to camp. I also give my permission for use of any photo of the named camper to be used by the Camp Committee for camp public relations.

BOTH CAMPER AND PARENT/ LEGAL GUARDIAN MUST SIGN THIS CODE OF CONDUCT.

Signature of Camper

AND

Signature of Parent/ Legal Guardian

Date _____

ATTENTION

PARENTS/LEGAL GUARDIANS

Did you know that if your child has an accident or illness in your absence - except in the case of injuries which threaten life or limb - patients under the age of 18 years old must have a parent or legal guardian sign a consent form before treatment can be given in a hospital emergency room?

You can save time and the concern of the person to whom you entrust the care of your child should this be necessary during your absence. It is important to include any allergy, illness history and medications that your child is taking as well as the name of the child's physician and last tetanus immunization. The Emergency Department staff at Day Kimball Hospital has devised a consent form for you to use. Just complete the form below and leave it with your Camp. Additional forms are available in the Emergency Department.

**DAY KIMBALL HOSPITAL
Emergency Department
PATIENT CONSENT FORM**

Camper's Full Name (patient) _____ Age _____
Address (home) _____
Date of Birth _____
Telephone Number (home) _____
Telephone Number (vacation) _____
Name (parent/guardian) _____
Employer (parent/guardian) _____
Health Insurance # _____ Health Ins. Carrier _____
Guarantor (person carrying insurance) _____
If possible, please attach copy of insurance card.
Family Medical Doctor _____
Address of Family Medical Doctor _____
Phone # of Family Medical Doctor _____
Current Medications _____
Allergies To Medications _____
Pertinent Medical History _____
Last Tetanus Immunization _____

In the event your efforts to reach me are unsuccessful, I, parent or legal guardian, consent to Emergency evaluation, treatment and/or admission to Day Kimball Hospital as determined by the physician in charge of the care of the above named person.

Expires: 08/13/10

Dated _____ Signature _____
(Parent or Guardian)

FORM E – RETURN WITH FORMS A, B, C, D, F

THIS FORM REQUIRES PHYSICIAN'S SIGNATURE
AND PARENT/GUARDIAN'S SIGNATURE
FOR PRESCRIBED MEDICATIONS

Camper's Name: Last _____ First _____ Middle _____

AUTHORIZATION FOR THE ADMINISTRATION OF MEDICATION BY YOUTH CAMP PERSONNEL

If a Youth Camp chooses to administer medications, the Connecticut State Law and Regulations require a physician's or dentist's written order and parent or guardian's authorization for a nurse, first aide, the director, alternate director or youth camp counselor to administer medications. Medications must be in pharmacy prepared containers and labeled with the name of the child, name of the drug, strength, dosage, frequency, physician's or dentist's name and date of the original prescription.

MEDICATIONS CURRENTLY BEING TAKEN (Meds brought to camp must be in their original labeled pharmacy container.)

Med #1 _____ Dosage _____ Specific times taken each day _____

Reason for taking _____

Med #2 _____ Dosage _____ Specific times taken each day _____

Reason for taking _____

Med #3 _____ Dosage _____ Specific times taken each day _____

Reason for taking _____

Med #4 _____ Dosage _____ Specific times taken each day _____

Reason for taking _____

ATTACH ADDITIONAL PAGES FOR MORE MEDICATIONS.

Identify any medications taken during the school year that participant does/may not take during the summer:

AUTHORIZATION FOR LICENSED MEDICAL PERSONNEL (PHYSICIAN OR DENTIST)

The person named herein may be administered the medications indicated above. In the event the camp nurse is unavailable, camper/staff member (check one) _____ may _____ may not self-administer this medication under the supervision of camp first aid personnel.

Signature _____ Title _____

Physician or Dentist Signature

Printed _____ License # _____

Address _____ City/State/Zip _____

Telephone # _____ Date _____

AUTHORIZATION FOR PARENT/GUARDIAN

I hereby authorize the camp nurse to administer the medications indicated above as ordered by my physician and the camp physician. In the event the camp nurse is unavailable, camper/staff member (check one) _____ may _____ may not self-administer this medication under the supervision of camp first aid personnel.

Signature _____ Relationship to Child _____

Printed Name _____ Date _____

Parent/Guardian Signature

- Camper
- Staff

FORM F – RETURN WITH FORMS A, B, C, D, E

MEDICAL EVALUATION

MEDICAL PRACTITIONER MUST COMPLETE AND SIGN

Name _____ Date of Birth _____ Phone _____

Guardian _____ Address _____

Emergency Contact _____ Phone _____

Date of Arrival at Camp: _____ Departure Date: _____

Date of Exam _____

_____ **May participate in all camp activities.**

_____ **May participate except for:** _____

Medical information pertinent to routine care and emergencies: _____

This camper/staff is up-to-date on all the following routine childhood immunizations currently recommended by the American Academy of Pediatrics and National Advisory Committee on Immunizations Practices:

	Yes	No		Yes	No
Measles			Hepatitis B		
Mumps			Diphtheria		
Rubella			Pertussis		
Chickenpox			Polio		
Tetanus			TB Test		Result:

Comments: _____

Health History: (Check any that apply)

- | | | | |
|-----------------------------|-------------------------------|--------------------------|---------------------|
| _____ Epilepsy or seizures | _____ Frequent ear infections | _____ Menstrual problems | _____ Asthma |
| _____ Frequent sore throats | _____ Headaches | _____ Bed wetting | _____ Heart Disease |
| _____ Back pain or strain | _____ Alcohol/drug addiction | _____ Diabetes | _____ Eye Glasses |
| _____ Heart Disease | OTHER: _____ | | |

Pertinent past medical treatment: _____

ALLERGIES

Medication Allergies

Describe reaction and management of reaction

Food Allergies

Other Allergies (include insect stings, hay fever, asthma, animal dander, etc.)

I have examined the person herein described and have reviewed the health history. It is my opinion that this camper is physically able to engage in camp activities, except as noted above.

_____, M.D.

Examining Physician

Telephone: _____ Date: _____

Return to: Windham-Tolland 4-H Camp, 326 Taft Pond Road, Pomfret Center, CT 06259

FORM G – OVER-THE-COUNTER MEDICATIONS
Return with Forms A, B, C, D, F

THIS FORM REQUIRES PARENT/GUARDIAN'S SIGNATURE
TO AUTHORIZE THE ADMINISTRATION
OF ANY OVER-THE-COUNTER MEDICATIONS

Camper's Name: Last _____ First _____

I DO WISH OVER-THE-COUNTER MEDICATIONS TO BE GIVEN TO MY CHILD.

I understand the Health Care Provider will administer the following over-the-counter medication or the generic version, if necessary, according to directions on the bottles unless a physician directs otherwise. The Camp provides over-the-counter medications.

Symptom:

- Athletes Feet
- Skin irritations
- Minor aches/pain/fever
- Minor cough/sore throat
- Minor Allergic Reactions/Allergies
- Poison Ivy/Rashes
- Bug Bites

- Indigestion/Heartburn
- Constipation
- Clogged Ears
- Open Areas/Cuts

Over-The-Counter Medication:

- Desenex
- Gold Bond Powder
- Tylenol/Advil/Ibuprofen
- Cough Drops/Chloraseptic Throat Spray
- Benadryl
- Calagel Lotion/Calamine Lotion
- Benzocaine Swabs/Dermoplast
- Hydrocortisone Cream/Benadryl Cream
- Antacid/Pepto Bismo/Tums
- Milk of Magnesia
- Auro-Dry
- Bacitracin

If any medication is not listed above, you must obtain a doctor's signature in order for the Camp Nurse to give said medication to your camper.

_____ Date: _____
Signature of Parent or Legal Guardian

Print Parent or Legal Guardian's Name _____

Parent's Home Telephone # or Cell Phone # _____

=====

I DO NOT WISH ANY MEDICATIONS TO BE GIVEN TO MY CHILD, _____
Camper's Full Name

_____ Date: _____
Signature of Parent or Legal Guardian

Print Name of Parent or Legal Guardian _____

Parent's Home Telephone # or Cell Phone # _____

Teen Leadership Program

Windham-Tolland 4-H Camp

The teen leadership program will focus on leadership development and preparing teens to become leaders in our camp and in their communities.

- Open to teen campers who have completed the 9th, 10th, or 11th grades.
- Teen leaders **must attend training** offered week #1, **June 27th thru July 2nd, 2010.**

Responsible to: The TL Coordinator and supervising senior staff.

Responsibilities:

1. Assist Senior Staff members in supervising cabin during rest hour, evening program, and meals.
2. Assist Senior Staff during activity periods. Teen leader members may be required to obtain supplies, help campers with activity, and clean area when activity has finished.
3. Participate in leadership training workshops.
4. Participate in overnight campouts with assigned cabin. It is his/her responsibility to walk to overnight sights with supplies, bring supplies to main camp when finished, and clean all supplies for use the following week.
5. Responsible for table setup for breakfast .
6. Required to act in a responsible manner, be a role model for campers, refrain from using profanity, and to notify Senior Staff members or Administration if any inappropriate activity is occurring.

Teen leaders help their assigned cabin counselor with the campers:

1. Accompany the camper to the nurse.
2. Help keep the cabin group together when they are moving about the camp.
3. Help campers get up in the morning.
4. Help campers who need extra attention.
5. Help with homesick campers.
6. May need to escort younger campers to the bathhouse at night.
7. Is still considered a camper.

Sunday responsibilities:

1. Help campers find their cabins.
2. Take cabin groups around to sign up for weekly activities.
3. Help cabin group create a skit for evening program.

During the day responsibilities:

1. May lead their campers in songs before meals.
2. Assist with supervision at meals.

Experienced teen leaders entering the 12th grade may qualify by Camp Director appointment to become Counselors-In-Training (CIT). CITs must attend staff training week plus all camp sessions.

Windham County 4-H Foundation, Inc.

56th Annual 4-H Auction and Tag Sale

Featuring a terrific variety of goods and services

Friday and Saturday, April 30th & May 1st

Auction viewing at 5:00 P.M.
With Sales at 6:00 P.M.

Tag Sale – Friday and Saturday

12:00 Noon – 6:00 P.M.

**PLUS: Bake sale, plant sale, raffles, food booth
And free admission!**

**To be held at our 4-H Camp Lodge
326 Taft Pond Road, Pomfret Center, CT 06259**

Your tax deductible auction or tag sale donations can be dropped off at the lodge beginning **Saturday, April 17th, 2010**. Adult and teen volunteers are welcome to help with sales both days. Call **860-974-1122** and leave a message for Eileen if you can help with our annual fundraiser in any way.

DIRECTIONS TO CAMP

Windham-Tolland 4-H Camp is located at 326 Taft Pond Rd, Pomfret Center, CT 06259. Check a Connecticut map for the shortest route to the junction of Routes #97 and #44 in Pomfret **or** get door-to-door directions on our website at **www.4hcampct.org/4HSum_Directions.html**. Taft Pond Road is the first left on Route #97 North from the junction. Follow the 4-H signs to the camp located approximately 1½ miles on the left on Taft Pond Road.

Cooperative Extension System
College of Agriculture & Natural Resources
University of Connecticut

To file a complaint of discrimination, write: Chairman of the Board of Directors, Windham-Tolland 4-H Camp, 326 Taft Pond Road, Pomfret Center, CT 06259 or call 860-974-1122.