



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

HOMESCHOOL PROGRAMS

Camp St. Croix 2018-2019

Join us for hands-on, multi-age, and cross-curricular programming. All programs are designed to fit your needs as a homeschool household. Bring the whole family to experience something new, connect with other families and discover the outdoors!

DAY PROGRAMS:

Ages 5-15, \$17/child, includes program & lunch \$8.50/adult (younger siblings are welcome) 10AM – 3PM

Our monthly day programs balance interactive instruction, discovery and play. Drop off your kids, or stay and learn.

LEADERSHIP DEVELOPMENT PROGRAM: Ages 12-16, \$20/child, includes program and lunch.

The Homeschool Leadership Development Program (LDP) is the first step in Camp St. Croix's camper leadership training progression. Your 12-16 year old will learn self-confidence, responsibility management, as well as group development through activity planning. Partnering with a Camp St. Croix staff, your student will learn the knowledge and skills necessary to organize and implement a lesson and activity for younger students.

OVERNIGHT FAMILY CAMP: \$120 per student, \$50 for adults

Bring the whole family on this overnight winter adventure filled with outdoor activities for all including taking part in maple syrup making. You and your family will stay overnight in our cabins while participating in the process required to get maple syrup from tap-to-table.



Visit our website for online registration and program details. campstcroix.org

Preregistration required one week prior to program date.

YMCA CAMP ST. CROIX

Hart Olson, Outdoor Education Director

hart.olson@ymcamn.org

532 County Road F, Hudson WI 54016

[P] 612 465 0569 [W] campstcroix.org

ADDITIONAL INFORMATION:

In order to provide greater quality of programming, participants will be split according to age into either the 5-8 year old group or 9-15 year olds. These two groups will provide greater tailoring to the learning and developmental stages of these students.

Additionally, parents with students 12-16 can choose to register them as a participant (for the normal \$17) OR for an additional \$3 (\$20 total registration fee) can register their student in the Homeschool Leadership Development Program. In the homeschool LDP program, students will spend the part of morning programming learning content and preparing an activity under supervision of an Outdoor Education Instructor. After lunch, the students will co-lead the lesson and activity alongside one of Croix's Outdoor Education Instructors allowing them to have more ownership over their learning experience and character development.

DAY PROGRAM DATES: Times for all programs are 10AM – 3PM (with the exception of the family camp week)

SEPTEMBER 21: BUG'S LIFE

Come and explore the exciting world of insects and spiders! Learn about their important role in an ecosystem. We will go on a hunt to find these critters and learn how to identify what we find.

OCTOBER 19: OUR FEATHERED FRIENDS (BIRDS)

Birds come in an amazing number of shapes, colors, sizes, and occupy important places within many ecosystems. Learn how bird adaptations are important to many of our own local bird species and the habitats in which they live. Maybe see a flock of birds on their migration route.

NOVEMBER 9: FUR TRADE

Learn firsthand the culture of the eighteenth-century Voyageurs and Native Americans. Practice skills and traditions like building a fire with flint & steel, pelt trading, hatchet throwing, stories and games. See how attitudes and behaviors during the fur trade era have affected today's environment.

DECEMBER 7: WINTER SURVIVOR: CAMP ST CROIX EDITION

Bad weather, getting lost, wild animals, unanticipated risks, injury, and sickness are just a few examples of the things that could dampen your hike or paddle. Learn valuable survival skills and strategies that will get you through the direst circumstances.

JANUARY 11: WINTER ANIMALS

Ever wonder what happens to animals in the winter? Not all animals decide not to hibernate. Explore the animal world in the wintertime. We will learn some tricks that animals do to survive the harsh Wisconsin winters.

FEBRUARY 15: SNOW SCIENCE

Snow forts, snowmen, snowballs, they are made up of millions and millions of individual flakes. Yet no two flakes are the same. Come play, investigate, and learn the science behind what makes each flake unique, and the season so important.

MARCH 6-8: HOMESCHOOL FAMILY CAMP – SAP TO SYRUP

Bring the whole family on this overnight winter adventure filled with outdoor activities for all including taking part in maple syrup making. You and your family will stay overnight in our cabins while participating in the process required to get maple syrup from tap-to-table.

MARCH 15: SPRING AWAKING (MAPLE SYRUP)

It is that time of year when we say good bye to the bitter winter season and say hello to spring! Learn what sweet changes are happening to our plants and trees at Camp St. Croix.

APRIL 12: THE AMAZING RACE: CAMP ST. CROIX EDITION (ADVENTURE CAMP)

On your mark, get set, go! And we are off on an amazing race through Camp St. Croix. Contestants will scale a climbing apparatus, race through the initiative's forest, learn to shoot a bow and arrow, and so much more!!

MAY 17: FARMING AND THE ENVIRONMENT

How does your garden grow? Come dig in the dirt and see what it takes to prepare the Camp St. Croix garden! Learn some different techniques to start your own eco-friendly garden at home.

YMCA CAMP ST. CROIX HOMESCHOOL PROGRAMS REGISTRATION FORM 2018-2019

Please register online or return this completed form with parental/guardian signature to:

YMCA Camp St. Croix, 532 County Road F, Hudson, WI 54016 • Phone 715-386-4380 • Fax 715-386-4382

info@campstcroix.org campstcroix.org

Parent/Guardian _____ DOB _____ Male Female

Parent/Guardian _____ DOB _____ Male Female

Home Phone _____ Alternate Phone _____

Address _____ City _____ State _____ Zip _____

Email (required for confirmation) _____

Please check programs attending

DAY PROGRAMS: Ages 5-16, \$17/child, includes program & lunch \$8.50/adult (younger siblings are welcome)

Registration is required one week prior to the program date. Space is limited. Walk-ins may be refused.

- | | | |
|---|---|--|
| <input type="checkbox"/> Bug's Life : Sept. 21st | <input type="checkbox"/> Our Feathered Friends (Birds) : Oct. 19th | <input type="checkbox"/> Fur Trade : Nov. 9th |
| <input type="checkbox"/> Winter Survivor : Dec. 7th | <input type="checkbox"/> Winter Animals : Jan. 11th | <input type="checkbox"/> Snow Science : Feb. 15th |
| <input type="checkbox"/> Spring Awakening (Maple Syrup) : March 15th | <input type="checkbox"/> The Amazing Race : April 12th | <input type="checkbox"/> Farming and the Environment : May 17th |

LEADERSHIP DEVELOPMENT PROGRAMS (LDP): Ages 12-16, \$20/child, includes program & lunch Program Date: _____

OVERNIGHT FAMILY CAMP, MARCH 6-8: \$120/child \$50/adult

Adults _____ # Children _____

Please list all participants attending

- | | | | | |
|---------------|-----------|-----------|---------------------------|--------------|
| 1. Name _____ | DOB _____ | Age _____ | Attended camp before? Y N | Amount _____ |
| 2. Name _____ | DOB _____ | Age _____ | Attended camp before? Y N | Amount _____ |
| 3. Name _____ | DOB _____ | Age _____ | Attended camp before? Y N | Amount _____ |
| 4. Name _____ | DOB _____ | Age _____ | Attended camp before? Y N | Amount _____ |
| 5. Name _____ | DOB _____ | Age _____ | Attended camp before? Y N | Amount _____ |

SUB TOTAL _____

***15% discount if Registering for 3 or more programs** Discount _____

TOTAL _____

Payment Information

Full payment for all programs is required.

Check enclosed amount: \$ _____ **Make payable to YMCA Camp St. Croix**

Please bill my: Visa MasterCard Discover Am Express Amount: \$ _____

Card # _____ Exp. Date _____ Name on Card _____

Signature _____

RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

EFFECTIVE 8/01/13

Please complete and return with registration. Please submit one waiver per family.

PARTICIPANT INFORMATION Please attach a separate page if needed.

ADULTS

Name	Age	Any medical condition or medications that may impact program participation
Name	Age	Any medical condition or medications that may impact program participation
Name	Age	Any medical condition or medications that may impact program participation

MINORS STAYING WITH THE ABOVE ADULT(S)

Name	Age	Any medical condition or medications that may impact program participation
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In consideration of participating in YMCA activities, and for other good and valuable consideration, I hereby agree to release and discharge from liability arising from negligence the YMCA of the Greater Twin Cities (hereinafter referred to as YMCA) and its owners, directors, officers, employees, agents, volunteers, participants, and all other persons or entities acting for them (hereinafter collectively referred to as "Releasees"), on behalf of myself and my children, parents, heirs, assigns, personal representative and estate, and also agree as follows:

- I acknowledge that participating in YMCA activities involves known and unanticipated risks which could result in physical or emotional injury, paralysis or permanent disability, death, and property damage. Risks include, but are not limited to, broken bones, torn ligaments or other injuries as a result of falls or contact with other participants; death as a result of drowning or brain damage caused by near drowning in pools or other bodies of water; medical conditions resulting from physical activity; and damaged clothing or other property. I understand such risks simply cannot be eliminated, despite the use of safety equipment, without jeopardizing the essential qualities of the activity.
- I expressly accept and assume all of the risks inherent in this activity or that might have been caused by the negligence of the Releasees. My/My child's participation in these activities is purely voluntary and we elect to participate despite the risks. In addition, if at any time I believe that event conditions are unsafe or that I or my child are unable to participate due to physical or medical conditions, then I will immediately discontinue participation.
- I hereby voluntarily release, forever discharge, and agree to indemnify and hold harmless Releasees from any and all claims, demands, or causes of action which are in any way connected with my/my child's participation in these activities, or our use of their equipment or facilities, arising from negligence. This release does not apply to claims arising from intentional conduct or conduct that constitutes greater than ordinary negligence. Should Releasees or anyone acting on their behalf be required to incur attorney's fees and costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs.
- I represent that I have adequate insurance to cover any injury or damage I or my child may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or damage myself. I further represent that I/my child have no medical or physical conditions which could interfere with our safety in these activities, or else I am willing to assume – and bear the costs of – all risks that may be created, directly or indirectly, by any such condition.
- In the event that I file a lawsuit, I agree to do so in the state where Releasees' facility is located, and I further agree that the substantive law of that state shall apply.
- I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

PARENT/GUARDIAN AUTHORIZATION SECTION — TRANSPORTATION/MEDICAL

- In the event that I/my child need immediate medical attention for injuries received while participating in a YMCA program, I authorize the YMCA staff to give me or my child reasonable first aid, and to arrange transport of myself or my child to a health care facility for emergency services as needed.
- I give permission for myself and/or my child to be transported by the YMCA as needed for field trips, inclement weather, or late pick up. I also give my permission to participate in walking field trips.
- I also give permission for myself or my child to enter Canada with the YMCA. I also understand that I/my child will need to bring our passport to camp if the trip involves such travel to Canada.
- I hereby acknowledge that the YMCA will assume that either parent of the child may pick up the child at any time during the program unless there is pertinent court documentation on file at the YMCA that indicates otherwise.
- I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. The YMCA receives medical information on campers/ participants that may need to be shared with medical providers.
- If I or my child requires use and administration of an epi-pen, prescription or over the counter medication, it is my responsibility to ensure that the epi-pen and/or medication are on me or my child or within our personal belongings every day of the program. If YMCA staff is required to administer and use the epi-pen and/or medication, I agree to forever release and discharge the YMCA and its directors, officers, and employees from any and all liability arising out of or resulting from use or administration of the epi-pen and/or medication.

GENERAL

- I hereby release all pictures of myself or my child taken by the YMCA for promotional purposes and programming materials including the YMCA website.
- I give my permission for the YMCA to administer sunscreen as needed and to change my child's diaper while my child is in their care.
- I acknowledge that certain sections of this waiver may not apply to me and/ or my child and the programs or activities that we have chosen but agree to be bound by any applicable language.

By signing this document, I agree that if I or my child is hurt or our property is damaged during participation in these activities, then I or my child may be found by a court of law to have waived our right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if the YMCA did not utilize waivers as a method to lower insurance and administrative costs. I have read and understood this document and I agree to be bound by its terms.

I agree to the volunteer or camper code of conduct.

Date	Signature Parent/Guardian	Date	Signature
Date	Signature Parent/Guardian Not Attending	Date	Signature
Date	Signature	Date	Signature