



Excellence in K-12 Public Education

Reed-Custer Community Unit School District #255

August 26, 2011

Dear Student and Parents:

Students in the seventh grade class are participating in a variety of team building activities. As a final activity, we are taking the students to the Manitoqua Outdoor Education Center for a day of additional team building activities. The outdoor setting is an ideal place to reinforce ideas taught in the classroom through a hands-on approach. We will strive to make the students' visit a fulfilling, thought-provoking, educational, and fun experience.

Students will be attending Camp Manitoqua with their Panther Time group on one of two days. **Your child will be attending Camp Manitoqua on**

Monday, September 26 / Friday, September 30.

Students and faculty will depart from Reed-Custer Middle School at 7:45 A.M. **All students need to bring a sack lunch on the day of the trip.** The students will arrive at Manitoqua at 8:30 A.M. Listed below is the tentative outdoor education program schedule the students will follow.

PROGRAM 1:	8:30 - 10:05 A.M.
PROGRAM 2:	10:05 - 11:40 A.M.
LUNCH BREAK	11:40 A.M. - 12:10 P.M.
PROGRAM 3	12:10 - 1:45 P.M.

DEPART FROM CAMP-	1:45 P.M.
ARRIVE AT R.C.M.S. -	2:45 P.M.

Students will arrive back at Reed Custer Middle School at 2:45, in time for **NORMAL DISMISSAL PROCEDURES**. Information about the items students need to bring on the trip, such as snacks, water, sun screen is included in this packet. In order to attend the Manitoqua Outdoor Education Center, students must return four signed papers: a permission slip, the completed medical form, the Adventure Zone release, and the signed statement of conduct. Please include a **check for \$20.00**. The check should be made payable to **Reed Custer Middle School**. Please make certain that the check and permission slips are returned to **Mrs. Whittington by Monday, September 16, 2011**.

Students must maintain their eligibility for the Manitoqua trip by exhibiting proper behavior at all times. We will begin **monitoring the students' behavior beginning on August 29, 2011**. If the student experiences **three incidents of misbehavior**, he or she will be **disqualified** from the trip. If you have any questions, please feel free to contact the seventh grade team or Mrs. Surprenant.

Sincerely,
Pam Suprenant, Principal
Seventh Grade Team

Principal
Pamela Surprenant

Assistant Principal
Kevin Young

Manitoqua Outdoor Education Center Permission Slip

_____ has my permission to participate in the Reed-Custer Middle School Seventh Grade trip to the Manitoqua Outdoor Education Center in Frankfort, Illinois on **Monday, September 26 / Friday, September 30**. My child and I understand that students will be expected to follow all conduct rules in the Student Handbook, as well as those requested by chaperones, bus drivers, and the staff at the Manitoqua Outdoor Education Center. Serious discipline problems may result in your child being returned to school for further discipline. I understand the information on this form and do hereby grant my child permission to participate. I have also included a check of \$20.00, which will pay for the day's activities.

This permission slip, along with a check for \$20.00 made out to R.C.M.S., must be returned by Friday, September 16 to Mrs. Whittington.

Please list two emergency phone numbers where you can be reached:

NAME/NUMBER

NAME/NUMBER

I also understand that by granting permission for my child to participate in this outdoor education experience, I am authorizing the Reed-Custer Middle School personnel to take action for me, in my absence, should any medical emergency occur.

Signature of Parent _____ Date _____

***Please also complete the health information sheet on the back of this form.**

Adventure Zone

Medical Statement:

I recognize that Adventure Zone activities can be a strenuous endeavor requiring me to be in good physical condition. I hereby certify that I do not suffer from any physical infirmities or illnesses which would affect my ability to engage in the Adventure Zone activities, and that if I am now under the treatment for any of the following, I will circle the proper heading and discuss them with the Manitoqua Ministries course instructor:

Cardiac or Pulmonary Condition or Disease
Diabetes
Recent Injuries
Fainting Spells or Convulsions
Alcoholism
Drug Addiction or Dependency
Back, Neck Injury or other Orthopedic Problem

Nervous Disorder
High or Low Blood Pressure
Pregnancy
Kidney Related Diseases
Shortness of Breath
Insect Allergies
Mental Distress

I further certify that I have not taken any alcoholic beverages or non-prescription drugs within the last 12 hours; and the drugs I have used within the last 12 hours are:

Acknowledgment of Risk and Assumption of Personal Responsibility:

I understand that during my participation in the Adventure Zone activity I may be exposed to physically and psychologically stressful and challenging situations.

I understand, too, that although the program has taken precautions to provide proper organization, supervision, instruction and equipment for each activity it is impossible for the program to guarantee absolute safety. Also, I understand that I share responsibility for safety and I assume that responsibility. Further, I waive any claim that may arise against Manitoqua Ministries and/or its employees as a result of my participation in the program, except those which are the direct result of the negligence of Manitoqua Ministries and/or its employees.

I have accepted responsibility for verifying my personal health and my medical history as stated above and that I have no physical or psychological problems that would prohibit my participation in this program. I agree to comply with all instructions and directions of the Manitoqua Ministries staff during my participation.

Student Signature: _____ Date: _____
Age: _____

I/we acknowledge that there can be no guarantee of safety against risk and unforeseen accident, as detailed above, and consent to the participation of the above named participant in the Adventure Zone activities. I also authorize the treatment of my son or daughter by a licensed medical doctor in the event of any emergency. This authority is granted only after a reasonable effort has been made to reach me.

Parent Signature (if under 18): _____ Date: _____
Emergency Phone Number: _____



Camp Manitouqua & Retreat Center

Statement of Conduct

Welcome to Manitouqua!

Thank you for choosing our facility we are looking forward to serving you. Please read the following guidelines; they are in keeping with our purpose and will be helpful for you in planning your retreat.

Outdoor Education/Adventure Zone Program:

- Each group (for Adventure Zone, 8 – 12 participants) will have a trained Manitouqua facilitator who has been given information regarding your organization's needs. It is necessary that the rules given by the facilitator are followed in order to minimize risk.
- Recommended attire: comfortable and modest clothing, shorts and pants are acceptable, tennis shoes are a **must** (no sandals). With outdoor activities, be prepared for weather. Dress in layers on cooler days. Wear older clothes as you may get dirty.

Please take care when...

- using facilities and grounds. Please be respectful of our facilities. There may be an additional charge for mistreatment and/or destruction of facilities.
- building fires. Use only designated fireplaces or fire pits. Please do not chop down trees, branches or remove bark from standing trees.
- eating or drinking. Food is not allowed in the cabins or Retreat Center bedrooms. Trash should be disposed of in containers provided.
- leaving a building. Shut doors & turn off lights.

For your safety keep...

- your group leader informed of any breakage or malfunction of the facility. Notify hosts immediately so we can take care of it promptly.
- your vehicles in the designated parking lot. **Driving on the grounds is prohibited.**
- your shoes on except for showers, pool areas or sleeping.
- your group leader informed if you see an activity that can injure a fellow guest or camper.
- off of camp vehicles and out of maintenance areas-this includes furnace rooms, shop area west of the Adventure Zone, kitchen, pond, railroad tracks, high tension wires and highway. **IF IN DOUBT - ASK!**

Please be considerate of others by...

- **NOT SMOKING IN ANY OF THE BUILDINGS.** Smoking areas are designated by appropriate disposal containers.
- having plenty of adult supervision. We recommend a 1 to 8 ratio.

Please ask permission before you...

- use the game room, adults must be present to supervise the fun you will have.
- enter the pool area. A lifeguard must be on duty for ANY swimming activities. (Summer Retreats only)

Please...

- leave all **ALCOHOL, DRUGS, FIREWORKS, FIREARMS & PETS AT HOME.** If a group is found with any of the above, we have the right to ask you to leave the premises and cancel your retreat without a refund.
- enjoy the trees, flowers, and animals. Leave them right where they are so everyone may enjoy their beauty.
- leave the fire extinguishers on the wall (unless there is a fire). Your group will be charged for every discharged extinguisher.
- be aware that Cabin's M & N and the Adult Retreat Center have a fire signaling system tied directly to the local Fire Protection District. This system is sensitive to candle burning and match lighting. A \$200.00 fee (or current Fire Department fee) will be charged if the system is set off intentionally or unintentionally by prohibited activities.
- **KEEP ALL AREAS FREE OF GRAFFITI.** Any vandalism will be charged to your group.

Before you leave...

- check the grounds for personal articles. Turn off lights & shut doors.
- return all recreation equipment to the host or lead facilitator.
- you may give your payment to the lead facilitator.

Accident Insurance as provided by your sponsoring body or accident insurance carried by individual retreat person is considered primary coverage. I have read, understand and agree to the above statement of conduct.

Signature: _____ Date: _____

THINGS TO BRING IN A BACKPACK

Sack Lunch

SUN SCREEN

Snack for the afternoon

Sealed bottles of WATER

CLOTHING TO WEAR AND BRING: sweatpants or jeans, light shirts or sweat shirts, sneakers, hats gloves, light or heavy coat and rain gear (if needed).

***NO SHORTS OR FLIP FLOPS ALLOWED**

THINGS NOT TO BRING

NO ELECTRONIC DEVICES

ANYTHING PROHIBITED AT SCHOOL IS IN EFFECT

****OPTIONAL**

Camera

Cell phone

****WE ARE NOT RESPONSIBLE FOR ANYTHING LOST**