



2019 Summer Troop Camp

Camper Information Packet



Welcome!

We are so glad your troop will be joining us this summer! This packet is filled with information to help prepare your troop for camp and to make your experience safe, fun and fulfilling! We look forward to providing you and your troop the PREMIERE Girl Scout camp experience that will include care from the highest-quality staff, and leadership and personal development like no other, all located in one of the best locations to instill a great sense of appreciation for the outdoor world!

Camp is a pathway for girls to experience the Girl Scout program. Girl Scouts is girl driven and girls have the CHOICE of how they want to participate! Our primary mission for summer day camp is the same as the overall mission of our organization. We are building girls of courage, confidence, and character who make the world a better place.

In addition to the Girl Scout Leadership Experience, we will strive this summer to:

- Promote the physical, mental and spiritual well-being of every girl and adult.
- Develop resourcefulness, initiative, self-reliance, and recognition of the worth and dignity of each individual.
- Provide opportunities for practice in democratic living.
- Develop a sense of responsibility, qualities of leadership, and an awareness of the capacities of all people.
- Provide an inner satisfaction, a sense of awe and wonder, and a deep enjoyment for both girl and staff.
- Provide a sense of accomplishment.
- Stimulate each girl's awareness of the scope of the natural world.
- Develop the individual's sense of responsibility to conserve the natural world.

Even if you have been to a Girl Scout camp before, please read through this thoroughly as some things may be different. If you have any questions that are not answered here, please visit our website:

hngirlscouts.org/summercamp or contact one of our Camp Team members at 704-731-6500.

Camp Information

Dale Earnhardt Environmental Leadership Campus at Oak Springs

1919 Turnersburg Highway
Statesville, NC 28625

Phone Number: 704-731-6500 (for general questions before your camper's session, or technical help)

704-546-2192 (for questions during your camper's session)

Website: www.hngirlscouts.org/summercamp

Email Address: customercare@hngirlscouts.org

these contact emails and numbers are for business only, not for camper contact lines

Important Notes

Paperwork Procedures:

- Please **COMPLETE SECTIONS 1-3** of the health form.
- Troop Campers do not need to fill out the physical information in section 4.
- **DO NOT mail the Health Form in early.** Bring a copy of the health form and physical (if required) to the first day of every session. The health form and physical can be found at the end of this document.

DO NOT mail the Health Form in early.

Camp Information:

- For Rookie level troop campers without a designated first aid trained adult: Medications for both girls and adults will need to be housed in the infirmary with our healthcare summer staff. All medications must be in its **original packaging**. This includes all over-the-counter medications, even vitamins and topical creams. We also can only dispense it according to the labeled directions unless we receive a note from the camper's physician.
- For Intern & Rock-Star level troop campers: Medications will need to be stored and administered by your designated first aid trained adult troop member. All medications must be in its **original packaging**.
- If your camper has any specific medical or dietary needs or allergies, please make sure this is noted in their camp registration. If necessary, you can go back into your registration online and edit your camper's form to be sure we have the necessary information. If you have any concerns, please contact our Camp Team at customercare@hngirlscouts.org or 704-731-6500.
- Campers are covered by a supplemental insurance for accidents and sickness that may occur while participating in activities; pre-existing conditions are not covered.
- At check-in, campers will be screened for lice/nits. Campers will not be allowed to stay if they have lice/nits and parents/guardians are responsible for treatments. No refunds are given for lice/nits. Campers' feet will also be checked for athlete's foot, and their temperature taken to ensure your camper is not ill.
- Campers, families, and troops can tour our camp properties and ask questions during our spring information events. Please check our website for details and to RSVP: www.hngirlscouts.org/summercamp
- **No visitors are allowed while camp is in session. This includes parents who are not registered for the troop camp session.**
- Girl Scouts, Hornets' Nest Council reserves the right to cancel or modify any program if insufficient registrations or any extenuating circumstances should occur.
- Refunds will only be given if: 1) The camp session is cancelled by GSHNC due to lack of minimum participation or other extenuating circumstances, in which case all registered participants will receive a full refund, or 2) A request for cancellation is received in writing (or via e-mail) no later than 3 weeks prior to the event; this refund will be minus a 25% processing fee.

Program Planning

- The week before your troop arrives at camp, your designated camp staff member will be in touch to confirm program requests and work with you to make a plan for your troop. When you arrive at camp, you'll be given a schedule for your troop's stay.
- **Interns & Rock-Stars:** During your pre-camp phone call with your camp staff, plans can be made for specific program areas and free time.

Check-In and Check-Out

- **Check-in** for is either Sunday from 4-5pm, or Thursday 9-10am.
- **Check-out** is on Tuesday from 6pm-7pm, or Saturday from 10-11am.
- If you have a conflict with these times, email customercare@hngirlscouts.org or call 704-731-6500.
- It is preferred that your troop arrive and depart in a condensed number of vehicles—which remain onsite throughout the session. If your troop needs parents of individual campers to drop-off or pick-up campers—please email customercare@hngirlscouts.org or call 704-731-6500 to supply the names and contact information of parents that will picking campers up. Anyone picking campers up, separate from the vehicles that stayed onsite, will need to provide **photo ID** upon arrival.

Check-In Procedures

- Please do not plan to arrive more than 15 minutes earlier than your scheduled check-in time as overnight camp will already be in session, and staff will have responsibilities during that time.
- Please be sure to follow all posted signs to the Dining Pavilion.
- At the Dining Pavilion you will turn in your troop's paperwork, and all campers will undergo a health check. The only things that need to leave your cars at this stop are **you, your troop, any medications (for Rookie campers), and all campers' health forms.**
- Once everyone in your troop has completed their health checks, you will drive to your cabins/tent site to unload your vehicles. Please unload your vehicles as quickly as possible, and move all vehicles remaining onsite to our designated parking lot by the Dining Pavilion.
- Your designated staff member will help your troop get settled, escort your group to dinner, and host a unit meeting to discuss your groups' plan for the duration of your stay.

Check-Out Procedures

- It will not be possible to move your vehicle back to the cabin/tent areas before 6pm for troops departing on Tuesday, or before 10am on Saturday.
- Your designated camp staff member, will assist your troop in packing up, closing down your unit, and departing camp.
- Please follow the signs back to the main road, and enjoy the rest of your summer!

Camp Details

Telephone and Electronics Policy:

Girls are not allowed to have cell phones and other communication devices at camp, and we strongly encourage adult participants to turn their cell phones off and embrace the experience that camp has to offer.

Having these devices on camp can create a lot of homesickness and issues in the units amongst girls. Camp is an opportunity for everyone to be unplugged and become active members of our camp community. Additionally, the environments at camp are not suitable for the safe storage of these devices.

- Please communicate to the parents in your troop, that campers cannot have or use cell phones during your stay.
- While adults are allowed to keep cell phones, let parents know that service may be sparse, and should they need to communicate with you or their camper they should contact the camp directly: (704) 546-2192.

Packing List and Health Form:

Please distribute the attached packing list (or your troop's variation of it) and Health Form to all the participants who will be camping with your troop. Be sure to make any additions of specific activity supplies you might want your troop members to bring for the activities your troop might do on your own.

Pre-Camp Meeting: Your designated camp staff member will contact you by e-mail by Monday of the week before you are set to arrive at camp in order to arrange a time during the week to call you and/or your troop to solidify the details of your experience: including cabin/tent area assignments, meal planning, activity, and schedule plans. You will receive a complete schedule for your troop when you arrive for your session.

Packing List

Clothing:

- T-shirts – one per day; no spaghetti straps
- Shorts – one per day
- Socks – one per day plus 2 extra
- Shoes – tennis shoes (closed toe & heel)
- Shower shoes – flip-flops
- Water shoes – old tennis shoes, sporty sandals, mesh slip on shoes
- Raincoat or poncho
- PJs
- Long pants – only one pair
- Underwear – one per day plus 2 extra
- Hat or visor
- Sweater, sweatshirt, or jacket
- Swimsuit

Personal Care:

- 2 washcloths
- 2 bath towels and 1 swimming towel
- Sunscreen AND chapstick –SPF 15 or higher
- Bug repellent
- Shampoo, conditioner
- Brush, comb
- Soap and deodorant (no spray cans)
- Toothpaste, toothbrush
- Shower caddy - plastic bag or bucket
- Sanitary items (if appropriate)

Gear:

- Sleeping bag and twin fitted sheet or twin sheets and blankets
- Pillow
- Daypack (backpacks work well)
- Laundry bag with name on it (mesh bags provide the best air flow)
- Flashlight and extra batteries
- Plastic cup, plate and silverware for cookout (does not need to be a mess kit.)
No Glass
- Reusable Water bottle – **labeled with camper's name**
- Item to tie-dye, like a t-shirt or pillowcase

Nice to Have:

- Camera (nothing valuable or a cell phone)
- Stuffed animal
- Book
- Stationery, pen, stamps (store stamps in a Ziploc bag to prevent them from sticking.)
- Bandana

Please DO NOT BRING:

- ❖ Radios, MP3 players, iPods, etc.
- ❖ Cell phones
- ❖ Video Games, Tablets/iPads, E-Readers
- ❖ Video cameras
- ❖ Gum/candy/snacks/food of any kind
- ❖ Tobacco, illegal drugs, alcohol
- ❖ Money of any kind
- ❖ Expensive name-brand articles
- ❖ Matches or candles
- ❖ Irreplaceable Items
- ❖ Personal sports equipment
- ❖ Firearms or weapons of any kind
- ❖ Pets/Animals, even to check-in/out

Important Notes:

Campers are responsible for all items brought to camp. **Label everything!** Especially sleeping bags and luggage. This will help us get her gear to her unit. We recommend that you leave at home any items you consider to be irreplaceable or valuable.

Girl Scouts Hornets' Nest Council, Inc. is not responsible for lost, damaged or stolen items.

Lost and Found:

Parents may pick up items left at camp by appointment only. **No items can be mailed.** Items not claimed by **September 1, 2019**, will be donated to an appropriate agency. To prevent large amounts of Lost & Found, girls **must** write their first and last name in **all** of their clothing for identification purposes.

Girl Scouts, Hornets' Nest Council
2019 Summer Camp Health/Permission Form

Please Note: NO girl will be allowed to attend any camp without a completed and signed Summer Camp Health/Permission Form

1. This form will need to be brought with you on the first day of your daughter session. **DO NOT MAIL IN EARLY!**
2. Overnight Campers who **WILL NOT** be traveling off site in an add-on trip, please **COMPLETE SECTIONS 1-3** of the health form
3. **PLEASE make a copy of this form and keep it for your records and bring it with you on the first day of camp for EACH session she is attending. We need a separate copy for each session your camper is attending for our records.**

SECTION ONE (must be completed every year for ALL campers)

CAMPER INFORMATION

Camp Session Name and Date:				
Camper Name (First)	(Middle)	(Last)	Home Phone ()	Date of Birth
Address		City	State	Zip
Email Address				

PARENT INFORMATION

Name of Mother/Guardian	Work/Day Phone ()	Cell Phone ()
Name of Father/Guardian	Work/Day Phone ()	Cell Phone ()

EMERGENCY CONTACT (if parents can't be reached)

Name		
Day Phone ()	Evening Phone ()	Cell/Other Phone ()

CAMPER RELEASE INFORMATION

My daughter can be picked up from camp by either parent or her emergency contact? Yes No * Please make sure anyone picking up your child from camp has a picture ID.

If No, please list who is not authorized:
 Please list the full name of anyone else you are authorizing to pick-up your child from camp:

HEALTH INSURANCE INFORMATION

Name of Insurance Company	Address	Insurance Company Phone Number
Policy Holder Name	Member or ID #	Policy or Certificate #

HEALTH HISTORY: (Check all that apply)

<p>Allergies</p> <ul style="list-style-type: none"> <input type="checkbox"/> Animals _____ <input type="checkbox"/> Food _____ <input type="checkbox"/> Hay Fever _____ <input type="checkbox"/> Insect Stings _____ <input type="checkbox"/> Medicine/Drugs _____ <input type="checkbox"/> Plants _____ <input type="checkbox"/> Pollen _____ <input type="checkbox"/> Other (specify) _____ 	<p>Chronic or Recurring Illness</p> <ul style="list-style-type: none"> <input type="checkbox"/> Ear Infections <input type="checkbox"/> Heart Defect/Disease <input type="checkbox"/> Seizures <input type="checkbox"/> Bleeding Disorders <input type="checkbox"/> Asthma <input type="checkbox"/> Hypertension <input type="checkbox"/> Diabetes <input type="checkbox"/> Musculoskeletal Disorders <input type="checkbox"/> Other _____ 	<p>Suggestions from Parents:</p> <p>My daughter has permission to take or use the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Tylenol/acetaminophen <input type="checkbox"/> Advil/ibuprofen <input type="checkbox"/> Sudafed/decongestant <input type="checkbox"/> Benadryl/antihistamine <input type="checkbox"/> Pepto Bismol <input type="checkbox"/> Tums/antacid <input type="checkbox"/> Robitussin/expectorant <input type="checkbox"/> Swimmer's Ear/alcohol-vinegar solution <p>My daughter has menstruated? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If not, has she been told what to expect? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
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Comment where applicable:

<input type="checkbox"/> Fainting	<input type="checkbox"/> Motion Sickness	<input type="checkbox"/> Nosebleeds	<input type="checkbox"/> Hearing Impairment	<input type="checkbox"/> Bed Wetting
<input type="checkbox"/> Constipation	<input type="checkbox"/> Wears Contacts	<input type="checkbox"/> Wears Glasses	<input type="checkbox"/> Sleep Disturbances	<input type="checkbox"/> Emotional Disturbances
<input type="checkbox"/> Sickle Cell trait or disease	<input type="checkbox"/> Homesickness			

Specific activities to be encouraged	Restricted
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Special medical or dietary regimen to be followed (specify - included vegetarian diets, etc.)

ADDITIONAL INFORMATION

Name of Dentist	Phone:			
Licensed Physician's Name				
Address:	City:	St:	Zip:	Phone:

(Complete reverse side of form)

Health/Permission Form, Side B		
Camper Name:	(First) _____ (Middle) _____	(Last) _____

SECTION TWO (must be completed every year for ALL campers)

PARENT/GUARDIAN PERMISSION AND AGREEMENT – Parents Must Sign This Agreement

The **health information stated in Section 1 and 3 of the “Summer Camp Health/Permission Form” is correct for my child and Girl Scouts Hornets’ Nest council has my permission to provide routine health care; to administer medications; to order X-rays, routine tests, and treatment; to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation for me/or my child if there is a medical illness or injury. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp director to secure and administer treatment, including hospitalization, for my child. This completed form may be photocopied for trips out of camp. My child has permission to attend Girl Scouts Hornets’ Nest council, sponsored day camp, participate in all phases of camp except as noted herein on the Summer Camp Health/Permission Form, to appear in pictures for publicity purposes, including the Girl Scouts Hornets’ Nest council website and related organization websites, and to be registered as a Girl Scout if she is presently a non-Girl Scout. I have read the camp information and agree to cooperate with all policies. I understand that some campers will have the opportunity to participate in activities such as swimming, canoeing, archery, challenge courses, mountain biking, high adventure activities, overnights, and trips off the camp premises. This is not a guarantee that my child will participate in all of the activities. Although care is given to greatly reduce risk through safety procedures, education and equipment, I understand adventure programs are not without an element of danger. These risks include damage to property and temporary or long-term injury to the person. I understand the risks involved with this type of program, and I feel the benefits outweigh the potential hazards of the program.

**Health history information will be handled by GSHNC staff/volunteers that have a legitimate need to know as mandated by Federal Law.

Signature of Parent/Guardian: _____ Date: _____

SECTION THREE (Required every year for ALL campers)

RECORD OF IMMUNIZATIONS

All immunizations listed below are up-to-date Immunization Record is attached (otherwise, complete the following)

Immunization	Year Primary Series Completed	Year of Last Booster
D.T.P. Diphtheria Pertussis (Whooping Cough) Tetanus (must be within last 10 years) Td Oral Polio Measles Mumps Rubella Hep B Tuberculin test given (most recent) Other _____	_____ _____ _____ _____ _____ _____ _____ _____ Date: _____	_____ _____ _____ _____ _____ _____ _____ _____ Result: _____

SECTION FOUR -- Please read carefully (REQUIRED for all programs with off-property trips)

PHYSICAL EXAMINATION (Exam must be within last 12 months)

This section is not required for day campers or overnight campers that will remain on property for their entire program.

Date of Examination _____ Physician Name (please print) _____

Height _____ Weight _____ B.P. _____ Appearance – Nutrition _____

Eyes: *Without Glasses* R 20/____ L 20/____ *With Glasses* R 20/____ L 20/____

<i>Use these codes for the information to the right of this box:</i> / Satisfactory X Unsatisfactory O Not Examined	Nose _____ Throat _____ Teeth _____ Abdomen _____ Heart _____ Lungs _____ Hernia _____ Genitalia _____ General physical and emotional status _____
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Licensed health care professional comments and recommendations. Give details or indicate management of significant illness

This person is in satisfactory condition and may engage in all usual activities except as noted.
 Licensed Health Care Professional Signature: _____ Date: _____

PLEASE KEEP A COPY OF THIS FORM FOR YOUR PERSONAL RECORDS.

Please bring with you on the first day of **each** of your daughter’s camp sessions and **DO NOT MAIL** this form in early.

Questions? Contact our Outdoor Department at **704-731-6500**, or customercare@hngirlscouts.org