



Get ready to go **BEYOND DISCOVERY!**

Check-in at Latgawa will be **Sunday** afternoon, **July 10th** from **3pm to 4pm**. The event will end at **10am Saturday, July 16th**. Please let the camp know if your arrival or departure plans are different from this schedule.

Please **mail in** the completed, signed **Health Form** to the camp at least 10 days before your arrival. An envelope has been enclosed for your convenience. If there are any changes in health status, you can let the nurse know about these changes when you arrive.

You will find a **List of Things to Bring** on the back of this letter. Keep in mind this is only a general list.

On the back of the **Map** you will find the **Policies** for our camping program. Camper names and addresses may be shared with other campers so they can correspond after camp. Photographs that may include your child may be used for promotional purposes unless one of the camp directors, Greg Clensy or Eva LaBonty, are instructed otherwise.

The address for Latgawa is:

Camp Latgawa

13250 S. Fork Little Butte Creek Rd,
Eagle Point, OR 97524

The phone number is (541) 826-9699

The email address at the camp is: camplatgawa@hotmail.com



WHAT TO BRING TO CAMP LATGAWA

* *Items are optional*

CLOTHING:

- ❖ Several Changes of Clothing - *Layers work best as the temperature may vary throughout the day.*
- ❖ Swimsuit
- ❖ Shoes that can be worn for water activities
(Flip flops are permitted only in showers or between pool & shower house.)
- ❖ Light Jacket or Sweater
- ❖ Heavier Jacket for chilly evenings
- ❖ Hiking shoes or sneakers - *at least 2 pair of shoes*

BEDDING:

- ❖ Sleeping Bag
- ❖ Pillow
- ❖ *Sleeping Pad (recommended, you will be sleeping out, on the ground at least two nights)

TOILETRY ITEMS:

- ❖ Towel & wash cloth
- ❖ Toilet articles such as: soap, toothbrush, shampoo etc.

OTHER:

- ❖ Daypack
- ❖ **Water bottle** for use around camp or on hikes
- ❖ **Flashlight**
- ❖ *Stamped envelopes & writing paper or postcards to send home
- ❖ *Camera
- ❖ All medications must be in original bottles or packaging.

Camping is a way of life. Camp Latgawa requires that you leave home those things that would detract from your camp experience such as: **CELL PHONES**, radios, MP3 players (i-Pods) or handheld games. If you bring these items they will be held by the camp's directors until the end of camp. You are also requested to not bring food to camp as it may attract unwanted critters into your cabin.

We do not encourage packages sent to campers because they often don't arrive before the camper leaves. Packages mailed to the camp through the post office often do not arrive during the week. Packages sent through UPS or Fed Express will be delivered directly to the camp, but they still need to be sent very early.

Email Camp Latgawa at camplatgawa@hotmail.com if you have any questions about this.

Health History Form

Children/Youth Campers

Camp & Retreat Ministries, Oregon & Idaho

Dates of Camp Attendance _____

Name of Camp or Event _____

This completed form (front & back) should be sent in to the camp at least 10 days prior to your arrival so that the camp staff can be aware of your needs. Attach additional pages if needed. Any changes to this form should be provided to camp health personnel *in writing* upon participant's arrival in camp.

Mail this form to the address below at least 10 days before camp starts:

Camp Latgawa
13250 S. Fork Little Butte Crk Rd.
Eagle Point, OR 97524

Camper's Name _____
Last First Middle Init

Birthdate _____

Address _____

Gender: (circle one) **Male** **Female**

City _____ State _____ Zip _____

Parent/Guardian Name(s): _____

Phone (_____) _____ Work/Other phone (_____) _____

Address (if different) _____ City _____ State _____ Zip _____

If parent not available in emergency, notify: _____

Address _____ Phone (_____) _____

City _____ State _____ Zip _____ Relationship to Camper _____

Does camper have any known allergies? Yes No

Allergies to medications: _____

Food allergies: _____

Other Allergies: _____

List any dietary restrictions: _____

Health History: (Check any that apply)

<input type="checkbox"/> Epilepsy or seizures	<input type="checkbox"/> Frequent ear infections	<input type="checkbox"/> Menstrual problems	<input type="checkbox"/> Asthma
<input type="checkbox"/> Frequent sore throats	<input type="checkbox"/> Headaches	<input type="checkbox"/> Bed-wetting	<input type="checkbox"/> Heart disease
<input type="checkbox"/> Back pain or strain	<input type="checkbox"/> Alcohol/drug addiction	<input type="checkbox"/> Attention Deficit Disorder	<input type="checkbox"/> Diabetes
<input type="checkbox"/> Other: _____			

Pertinent past medical treatment: _____

Is camper presently taking or using any type of medication(s) or drug(s)? Yes No

If yes, Specify and complete med report on reverse side: _____

Is the camper current on all immunizations needed for school? Yes No

Date of Last Tetanus shot: _____ Blood Type _____ (if known)

Does the camper have a health condition (e.g. allergies, chronic conditions) or special circumstances which may affect program participation, special housing need, or anything we ought to know prior to emergency treatment? Yes No

If yes, please explain: _____

Family Medical Insurance: Yes No Name of Insured: _____

Carrier: _____ Group # _____ Policy # _____

Name of family physician _____ Phone (_____) _____

Parent/Guardian Authorization:

My child has permission to take part in all camp activities under supervision unless limitations are noted above, and I agree that the camp or camp personnel will not be held responsible for accidents arising there from. I hereby give permission to the camp to provide routine health care, administer prescribed medications, and seek emergency medical treatment including ordering x-rays or routine tests. I agree to the release of any records necessary for insurance purposes. I give permission to the camp to arrange necessary related transportation for my child.

In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp to secure and administer treatment, including hospitalization, for the person named above. This completed health form may be photocopied for trips out of camp.

Signature of parent/guardian _____ Date _____

Please complete the other side of this form

Permission to Administer Medications

Camp & Retreat Ministries

Camp Latgawa, Camp Magruder, Sawtooth Camp, Suttle Lake Camp & Wallowa Lake Camp

I, the parent or guardian of _____ give my permission to the camp Health Care Provider or his/her designate to give the following medications (or their generic equivalents) to my child, in accordance with recommended package dosing for the specific indications below. These medications are available at camps and need not be brought by participants.

	Yes	No		Yes	No
Tylenol: <i>Mild fever or discomforts</i>	<input type="checkbox"/>	<input type="checkbox"/>	Benadryl: <i>Allergy symptoms</i>	<input type="checkbox"/>	<input type="checkbox"/>
Ibuprofen: <i>Mild fever or discomforts</i>	<input type="checkbox"/>	<input type="checkbox"/>	Antacid: <i>Upset stomach</i>	<input type="checkbox"/>	<input type="checkbox"/>
Throat Lozenges: <i>Cough/sore throat</i>	<input type="checkbox"/>	<input type="checkbox"/>	Anti-diarrheal: <i>For diarrhea</i>	<input type="checkbox"/>	<input type="checkbox"/>
Topical Creams: <i>Itching, sunburn, or insect bites</i>	<input type="checkbox"/>	<input type="checkbox"/>			
Permission to follow recommendations by Oregon Poison Control or Idaho Poison Control.	<input type="checkbox"/>	<input type="checkbox"/>			

Signature of parent/guardian: _____ **Date** _____

Please list ALL medications (including over-the-counter or nonprescription drugs) taken routinely. Bring enough medication to last the entire time at camp. Keep it in the original packaging/bottle that identifies the prescribing physician (if a prescription drug), the name of the medication, the dosage, and the frequency of administration.

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 _____

Attach additional page for more medications.

All medications brought to camp must be in the original containers.

NOTE: The camp personnel will notify you if your child displays the following symptoms:

- Any illness that persists longer than 24 hours; including fevers, coughs, excess expulsion of bodily fluids, allergic reactions, severe tiredness.
- Any injury that causes severe prolonged pain, discolorization and/or swelling.
- Any condition that cannot be sufficiently treated by camp personnel.
- Any condition requiring transport to other medical services.

Upon camper check-in:

Health History Form Verified _____ by _____
Date Initials

Health History Form Updated _____ by _____
Date Initials

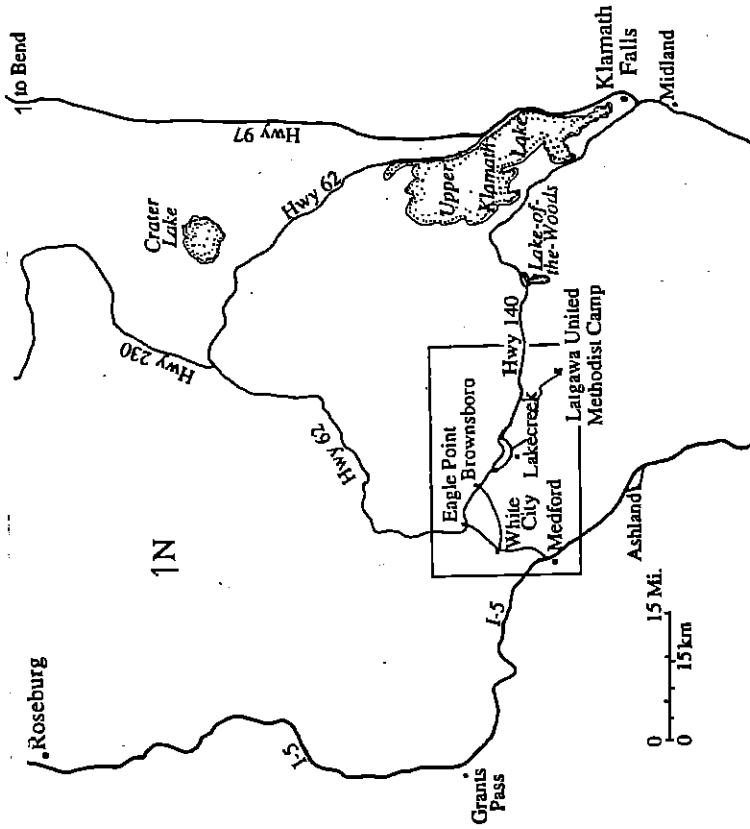
Do not rely on internet map searches for directions.

FINDING CAMP LATGAWA

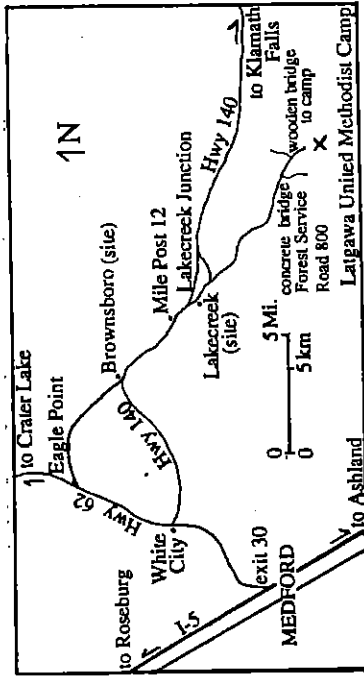
From I-5 North & South:

Travel South or North to Medford. Take exit 30, the Medford-Crater Lake Exit. Follow Highway 62, the Crater Lake Highway, about 6 miles to White City. From there take Highway 140. Follow it about twelve miles. You will pass Brownsboro and Mile Post 12. Turn right at Lake Creek Junction. Proceed through Lake Creek. Continue on the paved "South Fork Little Butte Creek" road about eleven miles where the pavement ends at the National Forest boundary. Continue on the gravel road about two and a half miles until the road forks. Keep to the right and cross the concrete bridge.

Once across the bridge turn immediately to the right for parking.



13250 S Fork Little Butte Creek Rd.
Eagle Point, OR 97524
(541) 826-9699 latgawa@gocamping.org



From Highway 97 North:

Travel south past the Klamath Falls exit. About three miles past Klamath Falls, take the exit to get on Highway 140. Proceed northwest, to the right. Follow the directions below.

From Highway 97 South:

Travel north about five miles past Midland. Exit to Highway 140. Follow to northwest, to the left. Follow the directions below.

From Highway 140:

Follow Highway 140 about fifty-five miles along Upper Klamath Lake and past Lake-of-the-Woods. Turn left at the Lake Creek Junction and go through Lake Creek. Continue on the paved "South Fork Little Butte Creek" road about eleven miles where the pavement ends at the National Forest boundary. Continue on the gravel road about two and a half miles until the road forks. Keep to the right and cross the concrete bridge.

Once across the bridge turn immediately to the right for parking.

Sources: USGS Robinson Butte, 1:24,000, 1988; ODOT Slate Highway Map, 1992.

Neither The United Methodist Church, nor the University of Oregon nor any of their employees, officers, agents, or students warrant the accuracy or completeness of this map or the accompanying directions.

Map courtesy Department of Geography,
University of Oregon, 1994.

Trista Noel, 1993

CAMP & RETREAT POLICIES

These policies have been found through many years of experience to be important for good camping.

1. TO CAMP AND HOME

- ❖ Campers should plan to arrive and depart at the scheduled times. (See the letter about your specific event.) Staff is not available to care for campers before or after camp.
- ❖ Authorization of release of campers: Parents will be asked upon arrival at camp who is authorized to pick up their child at the end of the week.
- ❖ Visitors are asked to visit only at camp opening and closing.
- ❖ Telephone contact between campers and their parents or guardians will be confined to emergency situations.
- ❖ Licensed, insured drivers under age 18 may drive themselves if they have their parent's permission, but are not allowed to have any passengers. For drivers under age 18, keys are collected and returned at the end of the event.
- ❖ Campers love to receive letters. Mail them early to arrive mid-week. Food items are discouraged as these attract unwanted visits from local wildlife. If you choose to send a package, consider items that can be shared or used by others: this will help promote unity in the cabin.
- ❖ Camper names and addresses may be shared with other campers unless the camp director is instructed otherwise.
- ❖ Photographs that may include your child may be used for promotional purposes such as printed catalogs, flyers or camp websites unless the camp director is instructed otherwise.

2. HEALTH

- ❖ A completed camper health form is required for all campers. Parent or legal guardian must sign health forms for campers under age 18. This form gives our staff information about health history, allergies, special diets, medicines brought with the camper, and other information that will be helpful in properly caring for the camper. **THIS COMPLETED AND SIGNED FORM IS REQUIRED OF ALL CAMPERS**
- ❖ Medical or behavioral information about your child will be shared only with other staff if it is determined by the director or medical staff that it is necessary to help the staff person better work with your child.
- ❖ All prescription **OR** non-prescription medications must be brought in their original bottles or packaging. For child & youth events, the Camp Health Care Provider is to have custody of all medication brought into camp by campers.
- ❖ The camp personnel will notify you if your child displays the following symptoms:
 - Any illness that persists longer than 24 hours; including fevers, coughs, excess expulsion of bodily fluids, allergic reactions, severe tiredness.
 - Any injury that causes severe prolonged pain, discoloration and/or swelling.
 - Any condition that cannot be sufficiently treated by camp personnel.
 - Any condition requiring transport to other medical services.
- ❖ The use or possession of alcoholic beverages, non-prescribed drugs (except those placed in custody of camp), depressants, or hallucinogens is prohibited. The use of tobacco is prohibited in the light of fire hazard and health dangers. Smokers are asked to refrain from smoking while at camp.

3. USE OF THE SITE

Campers are to stay within the boundaries of the Camp unless accompanied by a staff member.

Swimming and boating are important parts of the program at many camps. They are permitted only when an official lifeguard is on duty, and at times designated by the Camp staff.

Personal sports equipment (skateboards, bikes, archery equipment) should only be brought when specified by the dean of the event.

Fires are to be built only in fireplaces and approved campfire pits.

Campers will help keep the campsite clean and in good condition.

Camping is a way of life! Don't bring electronic devices, iPods, MP3 players or hand held games to camp. In children & youth camps, cell phones will be collected and returned at the end of camp.

All local and federal laws prohibiting weapons, firearms, fireworks etc. apply in the camp setting.