



Fall Leadership Weekend 2019 Application

What: Annual North High School Fall Leadership Weekend
When: Saturday, August 31 - Sunday, September 1, 2019
Where: Lake Geneva, Wisconsin
Who: Students, grades 9-12
Cost: \$150 (includes lodging, food, transportation, and shirt)

To be considered for the Fall Leadership Weekend, the following must be completed and submitted to the Student Activities Office by Monday, July 1, 2019:

- Application
- North High School field trip permission slip
- OWLS health form
- OWLS liability release
- Check in the amount of \$150—made payable to Downers Grove North High School

Spots will be filled on a first come, first serve basis by class

Student Name: _____ Student ID Number: _____

Year in School (2019-2020): Freshman Sophomore Junior Senior

Shirt size: S M L XL XXL

Please list any dietary requirements/food allergies (if applicable):

I understand that space is limited and that I may not be selected to attend this year. I also understand that I will be placed on a waiting list if space is not available.

Student Signature

Parent/Guardian Signature

If you have any questions, please contact:

Megan Gilbert mgilbert@csd99.org
Mark Mirandola mmirandola@csd99.org

**COMMUNITY HIGH SCHOOL DISTRICT 99 NORTH
FIELD TRIP PERMISSION FORM**

Date: May 10, 2019

Dear Parent/Guardian:

Your student is a member of a class/co-curricular group that has scheduled a field trip. The North High School Administration has approved this trip.

Before your student will be allowed to participate in the field trip, this form with your signature of approval must be returned to the Student Activities Office.

CLASS/CO-CURRICULAR GROUP: ELITE Fall Leadership Weekend 2019

LOCATION OF FIELD TRIP: Outdoor Wisconsin Leadership School-Lake Geneva, WI

DATE OF FIELD TRIP: Saturday, August 31 – Sunday, September 1, 2019

MEET IN THE PURPLE GYM: Saturday, August 31 at 6:30 a.m.

TIME LEAVING NORTH HIGH: Saturday, August 31 at 7:15 a.m.

RETURNING TO NORTH HIGH: September 1 at 3:00 p.m.

TEACHERS/SPONSORS OF FIELD TRIP: Mrs. Gilbert and Mr. Mirandola

METHOD OF TRANSPORTATION: School bus

I have read and understand the above statement, and I grant permission for my student to accompany the group. We understand that a field trip is an extension of North High School class or co-curricular activities and that all school rules pertaining to student conduct apply during the trip.

Signature of Parent/Guardian

Date

Phone #

Student's Name

ID #

Student Phone #



Outdoor Wisconsin Leadership School



Participant Information Packet

This information should be reviewed and signed by **everyone that will be on the premises** during the OWLS program.

A parent or guardian must also review and sign for anyone under 18 years old.

This packet contains:

Recommended Clothing and Equipment List
Tick Information Sheet
Participant Information
Assumption of Responsibilities and Risks
Liability Release
Photo Release
Health History Form



Outdoor Wisconsin Leadership School

Recommended Clothing & Equipment List

(Page 2 of 6)



At OWLS we place an emphasis on conducting our programs out-of-doors whenever possible. We believe that the use of outdoor settings creates valuable learning opportunities and unique challenges that spark personal and group growth. Therefore, there are times when programming will be outdoors **despite rain, snow, heat, or other related conditions. It is important that all group members are prepared for whatever weather conditions might confront them.**

What NOT to bring

- ✓ **Cell Phones**-Please leave cell phones in your lodging during programming or leave them at home
- ✓ **Bed linens**-sheets, pillow case/pillow and blankets are provided.
- ✓ **Nice Clothing**-Please do not bring clothing that you do not want to get wet and/or dirty.
- ✓ **Valuables**-most accommodations are not typically locked, so we ask you leave valuables at home.
 - **Money**-You will not need money during your program. Check with your leader to see if you need for money during your travel times.
 - **Jewelry**-While participating in the OWLS program **you will be asked to remove all jewelry** including watches, necklaces, earrings, and rings so that it does not get broken, lost or cause bodily injury.
 - **Electronics, i.e. iPods, hand held games, etc.**-if bringing for use during travel, please leave these items in your lodging during programming times

Clothing

All clothing should be and suitable for outdoor use. Please bring multiple layers of clothing so that you can adjust your clothing throughout your stay. If the weather forecast indicates a chance of wet weather, please bring adequate changes of clothes to assure that you have dry clothing for each day of programs, for evenings and travel.

Summer

- ✓ **Shirts**-Short & Long-sleeved-long sleeve shirts help keep insects off of your skin
- ✓ **Shorts**-Most OWLS groups use one of our climbing elements during their stay and therefore most participants wear climbing harnesses at some point during their program. For your comfort while wearing a harness, shorts should be long enough to cover your thighs.
- ✓ **Pants**-long pants help keep insects off of your skin
- ✓ **Socks & Undergarments**
- ✓ **Athletic, Closed toe shoes**-that can get wet and/or dirty. Closed toe shoes (not sport sandals or flip flops) must be worn during all program activities. If you wear sandals during travel, make certain to bring other shoes to wear during the program activities.
- ✓ **Lightweight jacket and/or sweatshirt**
- ✓ **Rain jacket & pants**

Spring, Fall, Winter (please bring the items listed in the **Summer** section plus the following items)

- ✓ **Warm hat**-wool, pile or other synthetic
- ✓ **Mittens or gloves**-waterproof- *not* cotton
- ✓ **Long underwear**-synthetic material - *not* cotton
- ✓ **Warm sweater**-wool, pile or other synthetic - *not* cotton
- ✓ **Warm socks**-wool or synthetic - *not* cotton
- ✓ **Warm jacket**

Equipment

- ✓ **Small backpack**
- ✓ **Bug repellent** (20-30% concentration of DEET)
- ✓ **Sunscreen, Sunglasses and Hat**
- ✓ **Water bottle**-reusable
- ✓ **If your group will be swimming**-**Bathing suit, beach towel and water shoes**-Geneva Lake has zebra mussels – they have sharp shells that easily cut skin if stepped on. Please check with your group leader to inquire whether swimming will be part of your program.

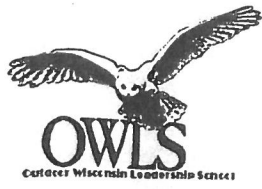
Overnight Programs

- ✓ **Flashlight**-The Holiday Home Camp property has limited outdoor night time lighting.
- ✓ **Towel**-for showering
- ✓ **Toiletries**-shampoo, soap, toothpaste, toothbrush, deodorant, etc.

Outdoor Wisconsin Leadership School & Holiday Home Camp, accredited by the American Camp Association, are owned and operated by the Lake Geneva Fresh Air Association, Inc., a nonprofit, 501(c)3 organization. Contributions are tax deductible.

361 N. Lake Shore Dr. P.O. Box 10 Williams Bay, WI 53191 P: (262) 245-5161 F: (262) 245-6518

www.OwlsAdventureEd.org www.HolidayHomeCamp.org

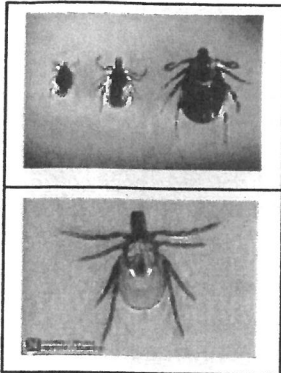


Outdoor Wisconsin Leadership School



Tick Information Sheet

(Page 3 of 6)



Lyme disease is caused by the bacterium *Borrelia burgdorferi* and is transmitted to humans by the bite of infected blacklegged ticks (deer ticks). Deer Ticks are quite small, especially in their immature stages when they may be only the size of a grain of sand. Typical symptoms include fever, headache, fatigue, and a characteristic skin rash in a bull's eye pattern. If left untreated, infection can spread to joints, the heart, and the nervous system. Lyme disease is diagnosed based on symptoms, physical findings (e.g., rash), and the possibility of exposure to infected ticks; a blood test is also useful in diagnosis. Lyme disease can often be treated successfully with antibiotics.

Prevention

1. Long pants and sleeves help keep ticks off of your skin. Wearing light-colored clothing will help you to spot ticks more easily.
2. Perform daily tick checks. **CHECK FOR TICKS AFTER BEING OUTDOORS.** Early removal can reduce the risk of infection with the Lyme disease bacterium. Not all ticks carry the Lyme disease bacteria. Carefully examine your skin and scalp after each outdoor excursion.
3. Use an insect repellent containing a 20-30% concentration of DEET on clothes and on exposed skin. For younger children a 10% DEET concentration should be used.

Removal

1. If bitten by a tick during an OWLS programming, report it to an OWLS staff member so that s/he can assist in removing the tick and document the bite.
2. To remove a tick, use a tweezers and grasp the tick as close to its mouth parts as possible. Pull the tick straight out until its mouth lets go of your skin. Wash the area of the tick bite with soap and apply an antiseptic.
3. Avoid crushing the tick's body. Do not be alarmed if the tick's mouthparts remain in the skin. Once the mouthparts are removed from the rest of the tick, it can no longer transmit the Lyme disease bacterium.
4. If removing a tick yourself while at OWLS (OWLS staff can assist you with tick removal), once it has been removed, tape the tick to a piece of paper with clear tape and label it with your name, date and time of removal. Then give the tick to an OWLS staff person and request that they complete an incident report to document the bite (this will be useful in case that you later show symptoms of Lyme's disease and are requesting to use the OWLS Camper's Insurance coverage for medical care.)

After your OWLS program

1. If you find a tick after you have left your OWLS program, please follow the above directions for tick removal and report the incident to OWLS.

If you have any questions please contact the Director of OWLS at 262-245-5161



Outdoor Wisconsin Leadership School



Participant Information

(Page 4 of 6)

If under 18 years old—must be signed by parent or guardian

This information is provided to introduce you to the benefits, risks and responsibilities associated with participation in all adventure programs. Please read the following carefully. If you choose to participate in the adventure education program at the Outdoor Wisconsin Leadership School program, your signature (or a parent/guardian signature for participants under 18 years old) is required on page 2 of this form (the photo release is optional). This form must be turned in to an OWLS representative before you begin your program.

What is adventure education?

Adventure education is the purposeful use of activities in which there are real and perceived risks and where the outcomes are uncertain but can be influenced by the participants. The OWLS program is founded upon the idea of learning by doing and its purpose is to give people opportunities to develop awareness and skills that lead to personal and group achievement.

Where does the OWLS program take place?

Most programs take place at Holiday Home Camp in Williams Bay, Wisconsin. All residential guests are housed in dorms (shared bath) and eat meals in a large dining hall. The campus is located within five minutes of professional emergency medical services.

What kinds of activities are in an OWLS program?

Your organization's group leader will have specific information regarding the type of activities designed for this specific program. The activities can be physically demanding and may include running, jumping, lifting, being lifted, spotting others and climbing to heights. The activities can be mentally, socially and emotionally challenging as well. OWLS programs are created from a combination of some or all of the following curriculum areas: trust building and group problem solving activities, low ropes and high ropes courses, rock climbing, canoeing or sailing. Participants will need to learn the skills and specific safety procedures associated with all activities including the proper use of safety equipment.

Do participants have choices while at OWLS?

OWLS educational philosophy is *challenge by choice*, which means that we believe maximum benefits and learning occur when the challenges are freely chosen by the participants. Your instructors will make every reasonable effort to teach the associated skills and safety procedures which help create a supportive environment where accepting challenges is encouraged. Your responsibility is to make appropriate choices regarding participation in the activities based on your understanding of the benefits to be gained, risks involved and your fitness level.

What are the risks?

Your OWLS leaders are skilled and experienced and will make every reasonable effort to minimize exposure to known risks associated with the activities. However, there are risks inherent in adventure education, and your OWLS leaders cannot guarantee total protection from all risks. Different program components carry different levels of potential risks which are not limited to risks of a physical nature. The risks may be social or emotional in nature, as well. With regard to physical risks, participants in an adventure programs generally have fewer injuries than do participants in school sports, recreation or physical education programs. This does not mean that injuries cannot and do not occur in adventure education programs.

What are the participant's responsibilities?

Participants must be responsible for their own safety and for the safety of others. To minimize safety risks, you must therefore learn and follow all safety rules and your leader's instructions. You must develop a questioning attitude and make your instructors aware at any point during an activity if you question your knowledge of the safety rules or your ability to participate.



Outdoor Wisconsin Leadership School



Assumption of Responsibilities & Risks Liability Release (Page 5 of 6)

My signature below indicates that I (and my son/my daughter if participant is under 18 year old) have read all of the information on this and the page titled Participant Information, have been informed of the risks and responsibilities associated with the OWLS program, and understand and agree to assume the risks and responsibilities associated with my/my son's/my daughter's participation in the OWLS program.

I understand that some of the program components may involve strenuous physical activity, that there are inherent risks in the OWLS program, and that participation in any activity is voluntary. I represent that I/my son/my daughter am physically able to participate in any activity I/he/she choose(s).

I have provided complete, up-to-date, and accurate health information on the OWLS participant health form and I/my son/my daughter will notify the OWLS instructors regarding any changes in my/his/her health or fitness which may occur during the program.

In the event of an illness or injury, I give my consent to Holiday Home Camp, to administer first aid and to secure professional medical services as needed.

Furthermore, I acknowledge that Holiday Home Camp, assumes no liability whatsoever for any loss, injury, or damage that may occur due to my/my son's/my daughter's participation in the OWLS program. I hereby release from liability and covenant not to sue Holiday Home Camp, including Lake Geneva Fresh Air Association Inc., as well as its employees and volunteers for any damages, injuries, or losses which may be sustained by me/my son/my daughter while participating in this program.

Please CLEARLY print name of participant

Date of Birth

I have read, understand, and agree to follow all of the rules described on the preceding page and in the above paragraphs.

Signature of Participant

Date

Signature of Parent or Guardian (if participant is under 18 years of age)

Date

Photo Release

Please initial one of the options below

_____ I hereby **DO NOT GIVE CONSENT** to the use of my child's or my photograph, image, voice, written and/or verbal statements by OWLS in its publications, video recordings, advertisements, brochures, Web sites, etc.

_____ I hereby **GIVE CONSENT** to the use of my child's or my photograph, image, voice, written and/or verbal statements by OWLS in its publications, video recordings, advertisements, brochures, Web sites, etc. I agree that OWLS may use my child's or my photo with or without my child's name or mine for lawful purposes including the above. I further acknowledge that there is no agreement or promise on the part of the camp to compensate my child or me in any way for the use of my child's or my photograph/image in said manner. I hereby release OWLS from any and every personal or proprietary claim, demand, right, or cause of action of whatever kind or nature, either in law or equity, arising from the use of my child's or my photograph/image. I also authorize the use of any information I provide to the camp with regard to my child's or my career, personal life, and accomplishments for use in promotional materials.

I have read and fully understand the terms of this Photo Release.

Signature (if under 18 years of age—must be signed by parent or guardian) Date



Outdoor Wisconsin Leadership School



Health History Form (Page 6 of 6)

If under 18 years old—must be signed by parent or guardian

Participant Name _____ Birth Date _____

School or Group Name _____ Program Date(s) _____

Home Address _____ Phone _____

City _____ State _____ Zip _____

Physician _____ Phone _____

In case of emergency, notify _____ Day Phone _____

Their relationship to you? _____ Evening Phone _____

Cell Phone _____

Alternate emergency contact _____ Day Phone _____

Their relationship to you? _____ Evening Phone _____

Cell Phone _____

It is vital to the health and safety of program participants that all medical conditions or concerns be fully disclosed on this form. It is the responsibility of the program participant/the participant's parent/guardian to assure that the following information is complete and accurate.

Medications being taken _____ Date of most recent tetanus booster _____

Do you currently have any of the following medical conditions? **Check if the answer is yes.**

Heart Condition _____ Diabetes _____ Asthma _____ Allergies _____ Orthopedic problems _____ (including recent sprains or breaks) Pregnancy _____ (If yes, participation in the program may be limited. Please call us to discuss.)

Please briefly explain any condition that you checked (for pregnancy, provide due date):

Please describe any other health condition(s) or use of prostheses or medical devices (i.e. hearing aids, etc.) that might affect your participation in any physical activity:

In the event I cannot be reached in an emergency, I grant permission to Lake Geneva Fresh Air Association, including Holiday Home Camp (LGFAA-HHC) to secure and administer treatment by approved physician(s) and/or health care provider(s) for necessary medical, surgical, dental or health care during the LGFAA-HHC experience.

I also understand that my signature on this form denotes permission to disclose pertinent health information to appropriate LGFAA-HHC personnel or other entities designated as having a legitimate health interest.

Signature (if under 18 years of age—must be signed by parent or guardian)

Date