

2018 Family Summer Camp

Camper Packet



“Live, Love, Music: The Magic of Family Camp”

Kathryn Deal, Dean

Geoff Anderla, Camping Ministries Director

July 29 — August 4, 2018
Camp de Benneville Pines
Angelus Oaks, CA



Hello Family Camp campers!

I am looking forward to a precious time together at our wonderful *de Benneville Pines*. This Unitarian Universalist family camp is a sacred space that holds our community values. As such, every person in camp is responsible for our shared community space, and we come into this space sharing our community covenant with one another. I know our Seven UU Principles are familiar to most of us, but I restate them below so that we all come together able to share and express them during our week together at camp:

We, the member congregations of the Unitarian Universalist Association, covenant to affirm and promote:

- The inherent worth and dignity of every person;
- Justice, equity and compassion in human relations;
- Acceptance of one another and encouragement to spiritual growth in our congregations;
- A free and responsible search for truth and meaning;
- The right of conscience and the use of the democratic process within our congregations and in society at large;
- The goal of world community with peace, liberty, and justice for all;
- Respect for the interdependent web of all existence of which we are a part.

Family camp is a celebration of families and community. As such, there must be a fine balance between looking inward and reaching outward. Agreements are kept every minute of every day, and there may be challenges to upholding our covenant based on individual needs. We are at camp to take care of one another and to take care of ourselves. Our families come first, and then reaching out to our community is next. The point is that we continue to show up and give the gift of our presence to the group.

Many families have been coming to FC for years, while others are new. We are here to meet and greet one another. To each family, I pose these loving questions: *“How do I reach out and how do I reach in? If I have been coming to camp forever, what small gestures can I make to someone new with whom I do not know?”* And for new families, *“How can I be open to the families and connect with them?”*

Our community is a dance. Some people will dive into the boogie, while others might choose to relax on the side. Our talented FC volunteers have put together a great week for you. We look forward to awesome music from Russ, our new-to-family-camp guitarist! And Rev. Frank will be leading worship and vespers and will be available for loving support and workshops throughout the week. Nurse Nancy will be on hand to keep our community healthy and to lead her vegan food workshops. Ben will create middle school programs; and Abbie, Phoebe and Dylan will rock with high school programming. We also have Kathleen expressing her artsy-craftsy self, and Laura who created the creative rainy-day canoe rides last summer! Geoff, our Camping Ministries Director, will be in camp to offer support as well. **Even with all of this talent, we can still use YOUR help.** We welcome your special workshops, games, hikes, activities - think about something unique that you can share with the camp community.

Remember that our camp theme is “**Live, Love, Music**”. Our *Banquet Musicale* is a night to dress up as your favorite musician, song lyrics, album cover, etc. Bring your best costumes to fit the occasion. We have a special guest coming to lead us in a drum circle, so bring your drum(s) or a bucket to make into a drum, or a rattle or maraca!

Other THINGS TO BRING:

1. Light colored T shirts for our camp shirt project. We will be silk screening our shirts!
2. A few small things to put in the kiddos Secret Pal bags. Consider things that are music related.
3. An item or two to donate to the AUCTION! The money we raise is used to fund family camp scholarships. *Oh, what fun we have auctioning off the crazy and creative items people donate each year* (white elephant items are great!). *We do take gift cards to auction off as well, and of course, we'll gladly accept cash or checks.
4. Family oriented DVD's for movie night and PG13+ for the mature viewing audience.
5. Your own favorite crafts or hobbies -- like that hook rug you want to finish (I'm bringing mine); or Steampunk Tea Dueling accessories if you are into the duel; or paints so you can paint a heart shaped rock for your garden!
6. It is a tradition to show support and appreciation for the hard work of the camp cooks and maintenance team. Tipping is always appreciated, so bring some cash to put in the tip box.

A couple last items:

Parents, you are responsible for your own children, so if you have a little one under the age of eight, you need to know where they are at all times. The buddy system is enforced for 8 – 12-year olds.

The camp's internet has very limited bandwidth and is reserved for office use. If you must do work while you are at camp, please bring a hot spot. We do encourage “unplugging” while at camp. Instead, “tune in” to making a new friend or chatting with an old one.

Personal 2-way radios are a good way to keep in touch with your children.

Although marijuana is legal in California, de Benneville Pines does not allow the use of marijuana on camp property. Additionally, the USFS does not allow the use of marijuana on FEDERAL LAND. Please DO NOT bring marijuana products to family camp

Read the “What to Bring” list enclosed in this packet and you will be set!

Any questions? Feel free to call me!

Kathryn Deal

Family Camp Dean (310) 420-3273

Yay, camp!

Information about Family Camp:

Check-in: will begin on Sunday, July 29, 2018 at 2:00 pm. Meet in Homet Lodge to check-in with our staff. Please bring completed medical forms to the check-in table. Once you unload your luggage at your cabin, you are required to leave your car in the parking lot below the flag poles. The car should be facing out for a quick exit if necessary. **Please keep your keys on you at all times! Bring a clip to clip your car keys to your belt loop. Bring 2 keys! We have had lost and misplaced keys in camp, and people stuck on exit day!** Our first meal together will be Sunday dinner at 5:00 pm.

Cabins are comfortable, but rustic-enough that you feel like you're visiting the forest. Most families have their own room. All bathrooms are located down the hall from your room and have hot showers and flush toilets. Water conservation efforts are always practiced at camp. Please be flexible about shower times and mindful of water use. Please report leaks and/or plumbing issues to our camp liaison ASAP. Limit all showers to 5 minutes.

Plenty of snacks and family-friendly meals are provided throughout the week; however, if you have special dietary needs, you may wish to bring food to supplement what is prepared in the camp's kitchen. Any food you bring must be kept in the lodge, Craig's Cabin or Cabin 6, which have refrigerators. Do not bring any food into any of the other cabins, drop food or trash on the trails or leave any food wrappers or soda cans in your car. Food is kept in designated areas to keep the critters--including bears, raccoons and mice--out of our sleeping and playing areas. Yes, bears will look for food in your car!

At times the de Benneville staff may remind us of certain **safety rules**. Please respect their requests, as they are assuring the safety of our entire community.

Childcare is not provided at Family Camp. Parents are responsible for their children and for knowing where they are at all times. If you need some time off during the week to attend a workshop or activity without your children, there are often opportunities to share parenting or hire youth to babysit. There will be sign-up sheets to help organize co-operative and paid babysitting arrangements. *In case of an emergency we would need you to be able to bring your children to the volleyball court in under 5 minutes.*

Workshop and activity leaders are not childcare providers. During youth activities, each child between the ages of five and 12 must have an adult responsible for them at the activity. Teens may participate in activities without adult supervision as long as they remain respectful of the workshop/activity leader. Teens must know where their parents are at all times and must know what to do in an emergency. No adult may be responsible for more than 6 children (of any age) at an activity. Please help the activity leaders by ensuring that there is at least one adult for up to every six children at the activity, not including the activity leader.



Camping Ministries Director Addendum:

Additional bits and pieces from Camp de Benneville Pines you'll want to know--and we didn't mention yet. PSWD Family Camp is a unique week at Camp de Benneville Pines. We are a living and breathing intentional community focused on family. As you will find, this can be both a messy and an amazing opportunity to be loving human beings together.

Staff

We have a talented all-volunteer Program Staff, and their families, creating camp with us. Our Program Staff members have worked many hours before campers arrive to thoughtfully prepare activities for families, and will continue to work throughout the week to ensure a genuine and purposeful camp experience for everyone. Our HQ will be located in Craig's Cabin. We are supported by the de Benneville staff led by Janet James, the camp's Executive Director.

As a camp we do our own set-up and clean up and the de Benneville staff makes the meals, monitors the pool, provides archery, fixes any broken down thing, and maintains the beautiful grounds! Some of our planned programming includes: yoga, day & night hikes, folk dancing, movie night, canoeing/kayaking, tie dye, archery, youth sleepovers, arts & crafts, and much, much more!

Technology

We observe limited use of technology at camp. This is partially due to the Camp's extremely limited Wi-Fi access and partially due to our intention to be present with our families. So be prepared to "unplug yourself" for the week. Please narrow children's tech usage to your individual cabins and be mindful not to bring those electronics out into the open common areas. Many families strive to get their kids "unplugged" while at camp. Remember, there is no Wi-Fi access for downloading games, music or movies.

Alcohol & Smoking

Some folks choose to bring beer and wine to camp. We ask you to be mindful to keep alcohol put away and to monitor the amount you imbibe. If you are a smoker, you may only smoke on the deck of your cabin. Never smoke inside any camp building, and never smoke out on the trail or in the forest. All cigarettes must be discarded in the cigarette container on your cabin deck.

Fire Drill

On Monday, there is a MANDATORY FIRE DRILL followed by our camp group photo. No camper is exempt from participating in the fire drill (even if they are napping). The alarm is loud and can be startling to young ones who don't expect it. We'll be sure to give lots of reminders and warnings ahead of time, but please talk to your children about the drill and help them anticipate what's coming.

If you have further questions or concerns, please contact me at:

cmd@uucamp.org

Geoff Anderla

Camping Ministries Director



CAMP DE BENNEVILLE PINES

CAMP RULES AND BEHAVIOR POLICIES

1. All persons using the Camp facilities must comply with all federal, state and local laws.
2. Most camper housing is in single-gender cabins at this camp unless your youth has parental permission to be in the gender-neutral cabin.
3. Curfew is defined as the time after which all campers are to be in their own cabins.
4. Campers may not leave the campgrounds at any time during camp without the permission and supervision of adult staff.
5. The water tower, staff housing, interior kitchen, pool pump room, maintenance buildings, propane tanks, sewer plant/leach fields and any construction sites are off limits to all campers. Use of a camp landline, tools, power tools, camp machinery and/or wood burning stove requires the permission of the Camp Director and adult supervision. There is no use of the First Aid Station without the supervision of the nurse.
6. No visitors are allowed during camp.
7. Campers are asked to respect each other and the belongings and privacy of other campers and staff. The campgrounds and camp equipment should be used in the intended manner. NO PRANKS.
8. Dangerous or disruptive behavior of any kind will not be tolerated; any camper engaging in such will be immediately sent home. This includes the use of rude and abusive language.
9. **Closed toed shoes must be worn when a camper is outdoors.**
10. No tree climbing or rock throwing.
11. No youth camper may use the hot tub at any time, under any circumstances. Proper swimsuit attire is required for swimming; no street clothes are permitted in the pool.
12. No drugs, alcohol or weapons are allowed at camp. All prescription and over-the-counter medications must be turned in to our Camp Nurse during camp check-in. The use of all medications is to be monitored by the camp health professional and adult staff. Medications must be in their original packaging.
13. Campers may not engage in sexual activities while at camp.
14. PSWD Youth Camps are SMOKE FREE. Campers and staff may not smoke at camp. This includes vape pens and e-cigarettes.
15. No hair dye or permanent inks or hennas allowed inside cabin bedrooms, bathrooms or kitchens. Use only at the arts/crafts area.
16. In the event of an emergency, an alarm will sound. Evacuate your cabin immediately and gather in the area behind the lodge kitchen (volleyball court). Check-in with the Camp Dean or Camp Director for further instructions.
17. No weapons or guns may be brought onto the Camp premises.
18. No explosives, flammable liquids or poisonous substances shall be brought to Camp.
19. Camp dogs are never to leave the camp premises without permission of the Camp Director.
20. All crafts using spray paint, glitter, wax or plaster must be done outside. These projects are NOT allowed inside Camp buildings.
21. The burning of candles, lanterns or incense is NOT allowed inside any building or recreational vehicle on Camp property.
22. We DO ASSESS damage charges for graffiti, excessive wear and tear, chewing gum and other adhesives found in the carpet and furniture.
23. There is No WiFi access in Camp. It's time to unplug and enjoy Camp.
24. Camp vehicles will NOT be used for the transportation of campers except in an extreme medical emergency. Campers and staff must wear seat belts while riding in Camp vehicles.



What to Bring

Please pack the following items for each member of your family to ensure a safe and enjoyable time at camp:

- Hat with brim
- Sunglasses
- Long sturdy pants (2)
- Long-sleeved shirts (2-3)
- Shorts/skirts (3)
- Comfy pants (1)
- T-shirts/tank tops (6)
- Sweatshirt or jacket (evenings can get chilly!)
- Pajamas
- Clean underwear (8)
- Socks (6-8)
- Bathing Suit
- **Closed toed shoes suitable for hiking (2 pairs)**
- Sleeping bag or sheets and blanket
- Pillow
- Bug spray/repellant
- 2 towels—1 for swimming pool, 1 for personal use
- Dirty clothes bag
- Prescription meds (if needed) in original med bottle
- Soap, shampoo, comb and/or hairbrush
- Toothbrush and toothpaste
- **Sunscreen(at least SPF 30) and lip balm (with SPF)**
- Journal for drawing and reflections and 2-3 pens/pencils
- Flashlight/headlight and fresh batteries
- **Water bottle — refillable**
- Small-ish backpack for carrying water bottle, book, camera, journal, sunscreen, etc., around camp
- Books, jokes, skits, stories, games
- Camera and fresh batteries
- Flip flops — ONLY for use at pool!
- Talent Show items
- Costumes, silly hats, etc., Friday's banquet

Bring two (2) all white, 100% cotton items in large ziplock baggie for tie-dying

Emergency Information and Release Form for Families Attending Camp de Benneville Pines

Parent (Primary Insured) at Camp _____ DOB _____

Address _____ City/State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____ Gender _____

Second Parent at Camp _____ DOB _____ Gender _____

Child Camper _____ DOB _____ Gender _____

Child Camper _____ DOB _____ Gender _____

Child Camper _____ DOB _____ Gender _____

List additional family members on reverse

Please initial each Release below and submit to camp as part of the Check-in process

Medical Release

_____(initial) I understand that if a family member or I become injured or ill while at camp, the Health Supervisor is authorized to determine if I require care outside the bounds of that available in our wilderness setting. Due to de Benneville's isolation and elevation, any camper remaining ill for more than 12 hours may be asked to leave camp, and may return only with authorization from a physician. I have been made aware that it can take 45 minutes or more for paramedics to respond to a 911 emergency call. If road conditions are icy or hazardous, it can take substantially longer. I agree to follow the safety rules of the camp.

_____(initial) I hereby give permission for the camp Health Supervisor to provide routine health care and emergency medical treatment, including ordering x-rays or routine tests for myself or family members. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes.

_____(initial) I give permission to the retreat organizers or the camp staff to arrange necessary related transportation. In the event of an emergency, I hereby give permission to the physician selected by the retreat organizers or camp staff to secure and administer treatment, including hospitalization to myself or family members.

Release of Liability

_____(initial) I waive and release all claims for damages for death, personal injury or property damage that may occur as a result of engaging in camp activities. This discharges in advance Camp de Benneville Pines, its employees and other agents from liability even though that liability may arise out of their negligence. I know that being in a forest retreat setting involves a risk of accidents, and I willingly assume the risk. This waiver, release and assumption of risk is binding on my heirs and assigns.

_____(initial) I agree to follow the safety rules of camp and assume responsibility to ensure my children also follow the rules.

Release of Contact Information

_____(initial) I understand my contact information above will be shared with Camp so they can keep me in the loop on what's happening all year long. Camp will not share any information with third-party entities, ever.

Photo Release

_____(initial) I give permission and consent for all persons associated with my registration to allow photographs/video to be taken during camp session activities. I further give permission and consent that any such photographs may be published and used by Camp de Benneville Pines and its agents to illustrate and promote the camp experience, Camp de Benneville Pines, and its camp programs. Camp will not identify Campers by name without their permission.

If family is covered by medical/hospital insurance, attach a copy of your card to this form. If you have no insurance, please provide social security numbers for each family member at camp on a separate piece of paper so care can be obtained at County Hospital.

Emergency Contact (not at camp)

Name _____ Phone #1 _____

Phone #2 _____ Email/SMS _____

Known allergies to food, medication and/or anesthetics, environmental factors. Indicate which family member and describe reactions (use other side for additional information).

Known medical problems/conditions and medical treatment that may be needed at camp (use other side for additional information).

Please list all medications (OTC & RX) that you will be taking while at camp (use other side for additional information).

Signature _____ Date _____

Camp Dates _____

Cabin _____

Family Name _____

Emergency Information and Release Form for Adults Attending Camp de Benneville Pines

Name _____ DOB _____
Address _____ City/State _____ Zip _____
Home Phone _____ Cell Phone _____
Email _____ Gender: Male _____ Female _____ Gender Neutral _____

Please initial each Release below and submit to camp as part of the Check-in process

Medical Release

_____(initial) I understand that if I become injured or ill while at camp, the Health Supervisor is authorized to determine if I require care outside the bounds of that available in our wilderness setting. Due to de Benneville's isolation and elevation, any camper remaining ill for more than 12 hours may be asked to leave camp, and may return only with authorization from a physician. I have been made aware that it can take 45 minutes or more for paramedics to respond to a 911 emergency call. If road conditions are icy or hazardous, it can take substantially longer. I agree to follow the safety rules of the camp.

_____(initial) I hereby give permission for the camp Health Supervisor to provide routine health care and emergency medical treatment, including ordering x-rays or routine tests. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes.

_____(initial) I give permission to the retreat organizers or the camp staff to arrange necessary related transportation. In the event of an emergency, I hereby give permission to the physician selected by the retreat organizers or camp staff to secure and administer treatment, including hospitalization.

Release of Liability

_____(initial) I waive and release all claims for damages for death, personal injury or property damage that may occur as a result of engaging in camp activities. This discharges in advance Camp de Benneville Pines, its employees and other agents from liability even though that liability may arise out of their negligence. I know that being in a forest retreat setting involves a risk of accidents, and I willingly assume the risk. This waiver, release and assumption of risk is binding on my heirs and assigns.

Release of Contact Information

_____(initial) I understand my contact information above will be shared with Camp so they can keep me in the loop on what's happening all year long. Camp will not share any information with third-party entities, ever.

Photo Release

_____(initial) I give permission and consent for all persons associated with my registration to allow photographs/video to be taken during camp session activities. I further give permission and consent that any such photographs may be published and used by Camp de Benneville Pines and its agents to illustrate and promote the camp experience, Camp de Benneville Pines, and its camp programs. Camp will not identify Campers by name without their permission.

Emergency Information – all information below will be shredded after camp. We do not retain medical records for adult campers.

Medical Insurance Company _____ Phone # _____

Policy # _____ Group # _____

Emergency Contact (not at camp)

Name _____ Phone #1 _____

Phone #2 _____ Email/SMS _____

My immunizations are up to date: YES NO Date of last tetanus shot _____

Known allergies to food, medication and/or anesthetics, environmental factors (use other side for additional information)

Known medical problems/conditions and medical treatment that may be needed at camp (use other side for additional information)

Please list all medications (OTC & RX) that you will be taking while at camp (use other side for additional information)

Signature _____ Date _____

Emergency Information and Release Form for Youth Attending Camp de Benneville Pines

Name _____ DOB _____ Age at camp _____

Address _____ City/State _____ Zip _____

Custodial Parent _____ Phone #1 _____

Phone #2 _____ Email/SMS _____

Gender: Male ___ Female ___ Gender Neutral ___ Will you be out of town while your child is at camp? YES / NO

Additional Parent/Guardian or Emergency Contact (required) _____

Home Phone _____ Cell Phone _____ Email _____

If not available, Notify: _____ Relationship _____

Home Phone _____ Cell Phone _____ Email _____

Please initial each Release below and submit to camp as part of the Check-in process

Medical Release

_____(initial) Parent/Guardian Authorizations: The attached health history is correct and complete as far as I know. The camper described has permission to engage in all camp activities except as noted below. 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 treatment, referral, billing or 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 child named above. This complete form may be photocopied for trips out of camp.

Release of Liability

_____(initial) I waive and release all claims for damages for death, personal injury or property damage that may occur as a result of engaging in camp activities. This discharges in advance Camp de Benneville Pines, its employees and other agents from liability even though that liability may arise out of their negligence. I know that being in a forest retreat setting involves a risk of accidents, and I willingly assume the risk. This waiver, release and assumption of risk is binding on my heirs and assigns.

Release of Contact Information

_____(initial) I understand my contact information above will be shared with Camp so they can keep me in the loop on what's happening all year long. Camp will not share any information with third-party entities, ever.

Photo Release

_____(initial) I give permission and consent for all persons associated with my registration to allow photographs/video to be taken during camp session activities. I further give permission and consent that any such photographs may be published and used by Camp de Benneville Pines and its agents to illustrate and promote the camp experience, Camp de Benneville Pines, and its camp programs. Camp will not identify Campers by name without their permission.

Emergency Information

Medical Insurance Company _____ (attach a photocopy of front and back of health insurance card to form)

Policy # _____ Group # _____

Restrictions: Red Meat Pork Dairy Products Poultry Seafood Eggs (circle all that apply) Other _____

Explain any restrictions to activity: what cannot be done, what adaptations or limitations are necessary (use other side for additional information) _____

Known allergies to food, medication and/or anesthetics, environmental factors (use other side for additional information) _____

Describe reaction and usual management of reaction (use other side for additional information) _____

Signature _____ Date _____

Camp Dates

Cabin

Camper Name

Medications being taken

Please list ALL medications (including over-the-counter or non-prescription 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.

Circle one: the camper **takes NO medications** on a routine basis the camper **takes medications** as follows:

Med #1 _____ Dosage _____ Specific times taken each day _____

Reason for taking _____

Med #2 _____ Dosage _____ Specific times taken each day _____

Reason for taking _____

Attach additional pages for more medications

General Questions (explain "yes" answers below)

Has/does the camper:

- | | |
|--|---|
| 1. Had any recent injury, illness or infectious disease? Y / N | 16. Ever had a back problem? Y / N |
| 2. Have a chronic or recurring illness/condition? Y / N | 17. Ever had problems with joints (e.g. knees, ankles)? Y / N |
| 3. Ever been hospitalized? Y / N | 18. Have an orthotic appliance being brought to camp? Y / N |
| 4. Ever had surgery? Y / N | 19. Have any skin problems (e.g. itching, rash, acne)? Y / N |
| 5. Have frequent headaches? Y / N | 20. Have diabetes? Y / N |
| 6. Ever had a head injury? Y / N | 21. Have asthma? Y / N |
| 7. Ever been knocked unconscious? Y / N | 22. Had mononucleosis in the past 12 months? Y / N |
| 8. Wear glasses, contacts or protective eyewear? Y / N | 23. Had problems with diarrhea/constipation? Y / N |
| 9. Ever had frequent ear infections? Y / N | 24. Have problems with sleepwalking? Y / N |
| 10. Ever passed out during or after exercise? Y / N | 25. If female, have an abnormal menstrual history? Y / N |
| 11. Ever been dizzy during or after exercise? Y / N | 26. Have a history of bed-wetting? Y / N |
| 12. Ever had seizures? Y / N | 27. Ever had an eating disorder? Y / N |
| 13. Ever had chest pain during or after exercise? Y / N | 28. Ever had emotional difficulties for which professional help was sought? Y / N |
| 14. Ever had high blood pressure? Y / N | 29. Waived or missed any scheduled immunizations? Y / N |
| 15. Ever been diagnosed with a heart murmur? Y / N | |

Please explain any "yes" answers, noting the number of the questions: _____

Name of family physician _____ Phone _____

Name of family dentist/orthodontist _____ Phone _____

Use this space to provide any additional information you believe the camp staff should be aware of regarding the campers behavior and physical, emotional, or mental health: _____

Authorization to Treat During Transportation/Carpooling to Camp

Permission Form:

My child/ward has permission to travel to and from Camp de Benneville Pines near Angelus Oaks, California. I understand that the camp is not responsible for the safety of my child until my child has been properly checked in at the time of registration. Furthermore, once my child checks out of camp on the final day, the camp is no longer responsible for the safety of my child. Unless otherwise contacted by me, my child has permission to carpool to and from camp with the following adults (**please include names of all adults permitted to pick your child up from camp, including parents**):

Name _____ Hm Phone _____ Cell Phone _____

Name _____ Hm Phone _____ Cell Phone _____

Name _____ Hm Phone _____ Cell Phone _____

Name _____ Hm Phone _____ Cell Phone _____

Emergency Authorization to Treat:

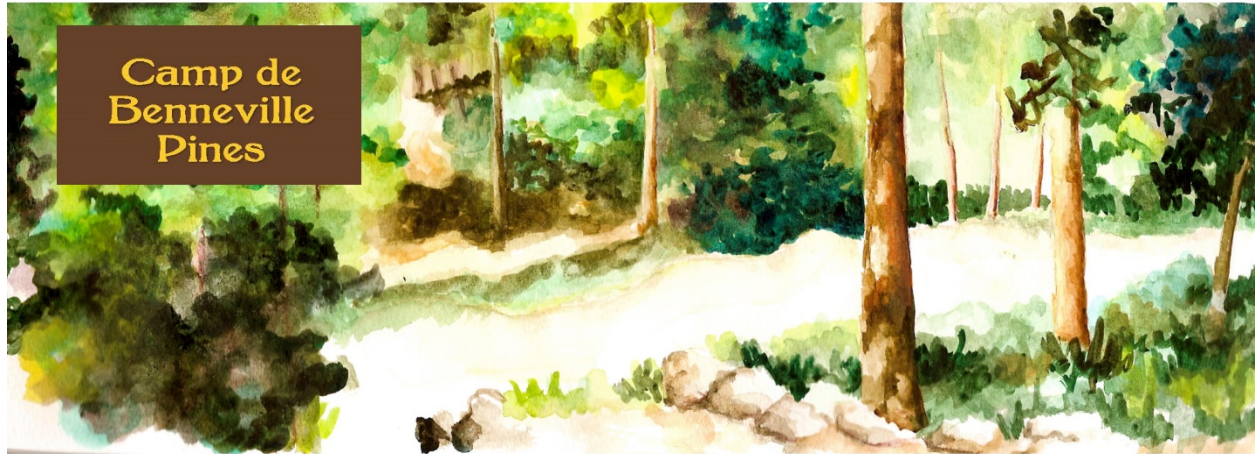
I hereby give permission to the medical personnel selected by my child/ward's driver to order x-rays, routine tests and treatment for my child/ward; and in the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the driver of my child/ward to hospitalize, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for my child/ward named above. This form may be photocopied. I recognize that neither de Benneville Pines, Inc., nor the Pacific Southwest District of the Unitarian Universalist Association is responsible for persons car pooling to or from camp.

Signature of parent/guardian _____ Date _____

During the times my child will be transported to and from camp, you should be able to reach me:

To Camp - Phone _____ Alternate Phone _____

From Camp - Phone _____ Alternate Phone _____



If you need to reach camp, here's some handy information:

Janet James, Executive Director:

Cell phone: (909) 435-6298 Email: director@uucamp.org

Geoff Anderla, Camping Ministries Director:

Cell phone: (623) 252-5619 Email: pswdcmd@gmail.com

Laura Chamberlin, Registrar:

Voice Mail: (909) 794-1252 Email: registrar@uucamp.org

Camp Office: (909) 794-2928

Camp Lodge: (909) 794-8712

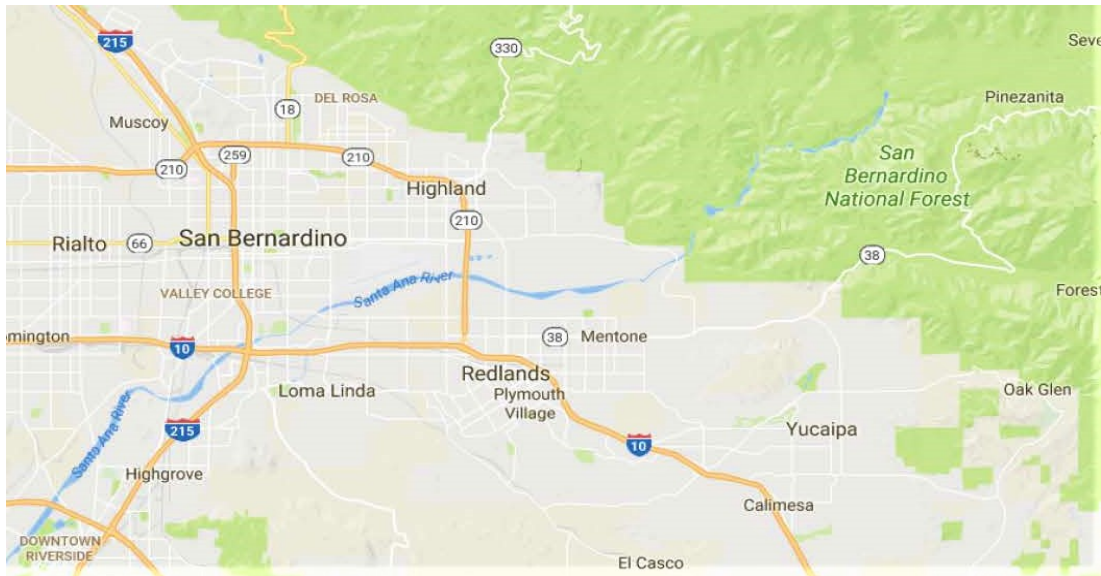
Camp Email: uucamp@aol.com

Camp Website: www.uucamp.org

Camp Address: 41750 Jenks Lake Road West, Angelus Oaks, CA 92305

Directions on website: <http://www.uucamp.org/about-2/directions-to-camp/>

DIRECTIONS to Camp de Benneville Pines



- Arizona:** Take the I-10 West to Exit 85 - Oak Glen/Live Oak Canyon Rd. Turn right on to Oak Glen Rd. Follow the road across Yucaipa Blvd and continue to Bryant St., turn left and go to Hwy 38. Turn right. Follow the directions in **BOLD below** from Hwy 38.
- Orange Co:** Take the 91 Freeway toward Riverside until it become the I-215 East toward San Bernardino. Take the I-10 East to Redlands. Follow the directions in **BOLD below** from Redlands.
- Las Vegas:** Take the I-15 South to San Bernardino. Take the 210 East to Redlands. Exit at San Bernardino Ave. Go through the light to the next street, Lugonia/Hwy 38. Turn left and follow the directions in **BOLD below** from Hwy 38.
- San Fernando Valley:** Take the 101 East to the 134 East to the 210 East. In Redlands, exit at San Bernardino Ave. Go through the light to the next street, Lugonia/Hwy 38. Turn left and follow the directions in **BOLD below** from Hwy 38.
- San Diego:** Take the I-15 North to the I-215 East toward San Bernardino. In Moreno Valley, take the 60 East to the Redlands Blvd exit. Turn left and go North on Redlands Blvd until it dead ends at San Timoteo Canyon Rd. Turn left and continue approximately 1 mile to Live Oak Canyon Rd. Turn right and continue over the 10 Fwy, where the name changes to Oak Glen Rd. Continue through Yucaipa to Bryant St. Turn left and follow the directions in **BOLD below** from Hwy 38.
- Ventura:** Get on US-101 and exit onto I-210 East. Continue on I-210 and exit at Live Oak Canyon Road. Turn left, follow the road across Yucaipa Blvd and continue to Bryant St., turn left and go to Hwy 38. Turn right. Follow the directions in **BOLD below** from Hwy 38.
- Redlands:** From I-10, take University exit. Turn left on University. Turn right on Lugonia/Hwy 38. Follow the directions in **BOLD below** from Hwy 38.
- From Hwy 38:** Follow Hwy 38 toward Big Bear, up into the mountains. At the road to Forest Falls, bear to the left, continuing on HWY 38. At the top of the mountain, pass through the town of Angelus Oaks and continue another 5.5 miles. Turn right on to Jenks Lake Road, West. The sign for Camp de Benneville Pines will be on the right, approximately 1.5 miles up. (If you see the sign for Seven Oaks on Hwy 38, you have missed the Jenks Lake turn. Go back to Jenks Lake Road, West.

