Mount Hermon Outdoor Science School Parent/Student Manual



About the Program

The Mount Hermon Outdoor Science School seeks to increase awareness and scientific understanding of the natural world through hands on lessons and concrete experiences while providing exposure to the natural world. Our primary values include:

Character Development (i.e. respect, self confidence, teamwork) Stewardship Science literacy Wonder of nature

Our program offers an exciting, academic, hands-on science program based on the California Science Framework. Students in 5th-8th grades actively participate in one week of outdoor science exploration while building confidence through the distinct challenges that students face throughout the week. Numerous opportunities are given for students to increase their awareness and understanding of our physical environment while encouraging good stewardship of our natural resources.

Facilities & Lodging

Just 6 miles from the Pacific Ocean and Monterey Bay, Mount Hermon's 440 acres rest in the middle of the coastal redwoods, about 70 miles south of San Francisco, where the students are able to explore and learn in a dynamic environment. Endless hiking trails are located in the adjacent Henry Cowell State Park where students can view ancient redwoods or the unique sand hills that are distinct to this area.

Accommodations: Ponderosa Lodge has 24 cabins that are heated, carpeted and have full bathrooms (3 sinks, 2 showers and 2 toilets). Each cabin has 4 bunk beds (sleeping 8) and one roll-a-way bed. Each student has an individual closet and a drawer under the bunk.

Facilities and Grounds: Our Forum provides a central meeting area which is utilized for orientation, certain evening activities and as a classroom. Recreation options include a game room, ping-pong, foosball, a 25 meter heated lap pool and diving pool, basketball courts, sand volleyball court and a large rec. field. Ponderosa lodge dining room has round tables that serve 8 students family style meals.

Weather

The weather at Mount Hermon will often change rapidly! Students will be outdoors for much of the time, from 8 am till 9 pm at night. They will need to bring layers and appropriate gear with them on all hikes and activities. If students come prepared, they will have a much more enjoyable and comfortable time!

Temperatures can range from the 30's to the 100's. During the fall months, temps usually range from 50-80 during the day and 40-60 at night, although temperatures outside this range are also normal. During the winter/spring months, temps dip very low and we see the most rain.

Rain can occur on any day of the year. We get the most rain from late October through May. All participants are required to bring rain gear of some sort—a light poncho or waterproof jacket. If it rains, clothing gets wet and often stays wet. Extra dry clothing is very important!

Wind occurs often and may cause students to become colder much more quickly. Warm layers are essential!

Clothing that every student must bring includes: rain gear, long pants, good hiking shoes or boots, an extra pair of shoes and warm layers such as a long sleeve T-shirt, sweatshirt, or light jacket. A Wool or fleece hat can also go a long way to keep the body warm. Please see the student packing checklist on page 7 for a full packing list!

Teaching Staff

Mount Hermon provides Naturalists who will instruct students during classes and night activities throughout the week. They are the teachers of OSS and they are passionate about teaching in the great outdoors. The naturalists are hand selected by the director of the program, and come with diverse backgrounds in education and science as well as distinct expertise and passions that make them dynamic teachers in the field.

All of our Naturalists Have the Following:

- A College Education
- Experience working with childrenFirst Aid/ CPR certifications
- Ability to lead hikes and outdoor activities

To see photos of our naturalists, please visit our website at www.outdoorscience.com.

Classes & Activities

Each day is filled to the brim with fun and educational experiences. Our classes are all based on the California State Science Standards and will stimulate students to become good stewards as well as promote team building. Each class includes at least one chaperone and varies from 14-18 students in size.

Consumers: Students will learn to identify different types of consumers and how they interact with their environment. Class activities include observation of birds in the bird sanctuary, examination of mammal characteristics, and the study of snakes in our Lab.

Ecosystems/Producers: Throughout this class students will grow in their knowledge of how photosynthesis drives plant growth and development as well as what role plants play in food chains and ecosystems. Students will be introduced to the local flora and edible plants.

Climbing Tower: The climbing tower provides a wonderful chance for students to conquer their fear of heights and learn about setting and obtaining reasonable goals for themselves, while having fun! Students learn the value of encouraging words as they encourage their classmates to reach the top!

Watershed Stewardship: Students begin by learning about the basics of a watershed then hike through a portion of our watershed, through the Riparian corridor and finish at Bean or Zayante Creek. At the creek, students explore concepts and look for specific attributes that make a creek healthy.

Electives: Electives are a fun time where students can learn about additional activities that cater to personal interests. A few example electives include: basket weaving, candle and chap-stick making, art with nature, rocketry, survival, and field games.

Adventure Hike: One day a week, the students take an all-day adventure through the many acres that surround our facilities. This hike expands across 4 different ecosystems, taking the students through the redwoods, over the sand hills, by the creeks and to secret lunch spots on private river beaches.

Night Hike: As the sun sets and the stars and moon appear, students begin an exciting evening of learning how their night vision works, what nocturnal animals are, and all about the night sky. Students are faced with the challenge of hiking at night in a safe and supportive environment.

Campfire: This is a great time for the students to relax and have a good time singing as skits and songs are performed by the naturalists. The night concludes with a campfire story and a yummy s'more cooked over the open campfire.

Clue: This evening activity focuses on problem solving and deductive reasoning. Students move from station to station around camp, with their cabin, to question different suspects and ultimately solve the mystery of the "squirrel napping".

Skit Night: The last night of the week is a chance for the students to practice their public speaking and dramatic skills as they perform skits that they have been preparing all week during their cabin time. Each cabin group is assigned a skit topic relating to something learned throughout the week.

Daily Schedule Sample

Outdoor Science School is packed full of educational and fun activities. The day runs on a tight schedule so that the most learning can be accomplished.

SAMPLE DAILY SCHEDULE:

7:00	0.122	Day baging				
	a.m.	Day begins Dreakfast Set up (set up group only)	Schedule Notes:			
7:30 - 7:55	a.m.	Breakfast Set-up (set up crew only)				
7:55 - 8:00	a.m.	Line up/ Flag Raising	Monday starts around 10:30am			
8:00 - 8:40	a.m.	Breakfast				
8:40 - 8:45	a.m.	Clean up	Friday ends around 10:30 am			
8:30 - 9:00	a.m.	Class Prep time*/Cabin time (Posters/ skits)				
9:00 - 11:15	a.m.	Line up/ Class	Wednesday (for a 5 day week)			
11:15 - 11:45	a.m.	Cabin time	has electives as the second class			
11:25 - 11:45	a.m.	Lunch Set up (set up crew only)	of the day			
11:45 - 12:00	p.m.	Line up/ Pre-lunch Announcements				
12:00 - 12:45	p.m.	Lunch Posters Due Wednesday	Thursday is Adventure Hike:			
12:45 - 1:00	p.m.	Clean up (clean up crew only)	Students are on the trail from			
12:45 - 1:15	p.m.	Class Prep time*/Cabin time (Posters/ skits)	9:30am -3:00pm			
1:15 - 3:30	p.m.	Line up/ Class	y.souni s.oopin			
3:30 - 3:45	p.m.	Prepare for Recreation Time in cabins	Rec. Time is every day from			
3:45 - 4:50	p.m.	Student Recreation Time 3:45pm -4:50pm				
4:50 - 5:25	p.m.	Cabin time	5.45pm 4.50pm			
5:00 - 5:25	p.m.	Dinner Set up (set up crew only)	Cabin Check is during the first			
5:25 - 5:30	p.m.	Line up/ Lowering of the Flag	class period			
5:30 - 6:15	p.m.	Dinner	class period			
6:15 - 6:30	p.m.	Clean up (clean up crew only)				
6:15 - 6:45	p.m.	Class Prep time*/Cabin time (Posters/ skits)				
6:45 - 7:15	p.m.	Line up/ Game/Teacher meetings (Tues)				
7:15 - 9:00	p.m.	Evening Activities (Campfire/ Night hike/ Clue/ Skit Night)				
9:00 - 10:00	p.m.	Bedtime Meds/ Prepare for bed/	<i>C</i> ,			
	r	Lights out 10:00 (5^{th} Graders 9:45)				

*Class Prep Time = Go to the restroom, get backpack, water bottle, pencil, student book, long pants, hiking shoes, warm clothes, rain gear, sunscreen, any other needed materials.

Parent Communication with Students

To avoid homesickness, students are not allowed to call home or receive calls from their parents. We recommend sending hand written letters - not emails to your children. If students plan to write to their parents, make sure they come with pre-addressed and stamped envelopes. Parents that send mail to Outdoor Science School need to make sure it will be received by Friday morning. We recommend sending mail to your student at least a week in advance and we will hold it until they arrive.

 Stamp
 Stamp

 Student's Name
 Outdoor Science School –Ponderosa Lodge

 PO Box 413
 Mount Hermon, CA 95041

 Your School Name (ie. La Mesa Elementary)

In case of an Emergency, Please use the following contact information:

Ponderosa Lodge:

Office: 1.831.430.1297 Office Hours: 7:30am – 9:30pm

Health Center 1.831.430.1296 Hours: 7:30am – 10:00pm

After Hours Please Contact Your Student's School

Health & Safety

One of our health aids, who are certified in Red Cross CPR and Adult First Aid, is on duty 14.5 hours a day. Our Registered Nurse is present every day to dose all medications and as needed to dispense over the counter medication, which can also be dispensed by a teacher if previously OK'd on page 2 of the YOUTH HEALTH FORM. Our health center is fully stocked with all the basic medication and equipment, a phone, two beds, a bathroom, and a shower. If further assistance is needed, an emergency medical clinic is located in Scotts Valley, 5 minutes away, and a full service hospital is located 20 minutes away.

By law, students may not keep medications with them, and may not dispense it to themselves. This includes any over the counter medications such as Tylenol, Ibuprofen, antacids, creams, ointments, and food supplements as well as any prescription medications. Our Registered Nurse will dose all these medications at the correct times. **Asthma inhalers** are kept in the health center and may be picked up prior to hiking or strenuous activity.

Please be sure that all students are in good general health before arriving. If a student has a fever, contagious disease, or lice, they will promptly be sent home. If a student has been sent home for a medical reason, they must be symptom free for at least 24 hours *and* cleared through their doctor before returning to camp.

If you are sending any prescription medication with your child you must have all the medical information available on both the bottle and on the PERSCRIPTION MEDICATION form. All medications need to be in their original packaging. Please place all medications for your child in a one gallon clear plastic Ziploc bag and label the bag with your student's name. This bag must be turned in to your student's teacher before arriving at Mount Hermon.

Unless the student has a medical condition requiring regular dosing each day, Parents DO NOT need to send the OTC medications listed below. Our health center is well stocked with these medications and if needed students will be given the proper doses of the OTC medications. We are able to dispense from our stock ONLY if approved by the parent/guardian on page 2 of the YOUTH HEALTH FORM.

OVER THE COUNTER MEDICATIONS PROVIDED IN FIRST AID STATION:

- Acetaminophen (Tylenol)
- Pseudoephedrine (Sudafed)
- Technu Extreme (Poison Oak skin wash)
- Docusate Sodium (Stool Softener)
- Triple Antibiotic Ointment
- Tums
- Cough Drops

- Ibuprofen (Advil, Motrin)
- Diphenhydramine (Benadryl)
- Guaifenesin DM (Cough Medicine)
- Medicane Swab (Sting Relief)
- Hydrocortisone Cream
- Aloe Vera Lotion

It is extremely important that parents review and thoroughly fill out the YOUTH HEALTH FORM at the end of this packet. Dietary needs these MUST be noted on page 2 of the form. Our kitchen staff serves thousands of guests per year and we are very familiar with accommodating individuals with common dietary needs (e.g. vegetarian, vegan, dairy free, and gluten free). If a student has *extensive* dietary needs or allergies, please contact us to discuss specific needs.

Responsibilities & Expectations of Students

Outdoor Science School is just that... a school. Students will be required to follow certain rules and will be expected to have the needed supplies to make their time an exciting educational experience!

Packing

Students will need to review and pack according to the attached student packing checklist on page 7 of this manual. Please note that most items are mandatory and must be packed! Students are NOT ALLOWED to bring electronic devices or weapons of any kind. This includes items such as cell phones, iPods, and pocketknives! Both parents and students are encouraged to read the packing checklist carefully.

Discipline

Students are primarily overseen by their cabin leader and naturalist during the Outdoor Science School week. For minor disciplinary issues students will be given 5-10 minute time-outs from their afternoon recreation time.

If discipline issues occur that require more discipline or if the student acquires more than 15 minutes of timeout, the student's teacher or Outdoor Science School staff will meet with the student and may assign the student to a task during a portion or all of recreation time. A teacher will be in contact with the student's parents if a disciplinary situation arises.

If the student breaches one of the below actions the student will be promptly sent home. In this situation the student's parents will be contacted and will need to pick up their student.

The following breaches of discipline are grounds for immediate dismissal from Mount Hermon's Outdoor Science School program:

- Fighting
- Any activity that is inherently dangerous to self or others
- Stealing
- Cabin raiding/pranking
- Outright defiance
- Intentionally destroying property

- Unauthorized leaving of cabin
- Possession of illegal substances
- Possession of any weapons whatsoever
- Bullying
- Other behaviors at the discretion of the Director of the Outdoor Science School

STUDENT PACKING CHECKLIST

You Must Bring:

- □ Sleeping Bag & Pillow
- □ Backpack
- \Box 2 Pencils
- \Box Water Bottle (1 Quart/ liter)
- □ Flashlight
- \Box 2 Towels
- □ Toiletries (including sunscreen)
- \Box Laundry Bag (trash bag works)
- □ Bathing Suit (one piece bathing suits only)

Please Do Not Bring:

-Extra Food or Beverages (except for medical reasons) -Cell phone

- -Electronic Games or Radios
- -Knives, Firearms or other weapons
- (including pocket knives)
- -Fireworks
- -Any Money besides T-Shirt/bag Money

- \Box Extra socks
- \Box 2-3 pairs of close toed shoes
- □ Warm Jacket
- □ Sweatshirt
- □ 2 Pairs Long Pants
- □ Rain Gear (Rain Jackets, ponchos, rain pants, boots)
- □ Pajamas
- □ Outdoor Clothing

Optional Items:

- □ Disposable Camera
- □ Watch/ Alarm Clock (electric ok)
- □ Writing Materials For Letters & Stamps
- □ Lip Balm
- □ \$12 for T-Shirt: \$5 draw strip bag- either cash or check
- (make checks out to Mount Hermon)

Forms that must be signed by a parent or guardian before coming:

- □ Prescription Medication Form (only if bringing medications)
- □ Youth Health Form
- □ Participant/Guardian Waiver Form

MOUNT HERMON OUTDOOR SCIENCE SCHOOL STUDENT CONTRACT

Hello and welcome in advance to Mount Hermon Outdoor Science School! We are excited that you are going to spend a week with us soon! Our commitment is to provide meaningful experiences, fun learning opportunities, and safe adventures. If you choose to participate in your school's week at Mount Hermon Outdoor Science School, we ask that you make a commitment of your own: to live by the following guidelines. If you can agree to this contract, please put your initials next to each item and sign at the bottom. Thanks!

GENERAL AGREEMENTS

- I agree to fully participate in my school's week of Outdoor Science School.
- I agree to be on time for all activities.
- I agree to respect the privacy, property, and feelings of others. I understand that we'll be living together in cabins and sharing the campus.
- I agree to treat my fellow students, cabin leaders, teachers, and naturalist with respect. I understand that how I talk to people is important. I will also do my best to be respectful when someone is talking to me, whether it's a cabin leader, naturalist or my best friend.
- I agree to follow my Student Packing List and bring the things I'll need for my stay (like raingear, a leak-proof water bottle, extra clothes, etc.)
- I agree to stay out of other students' cabins.
- I agree to be quiet and respectful in the evening so that everyone can get enough sleep to participate and stay healthy.
- I agree to keep food out of my cabin.

BOTTOM-LINE AGREEMENTS

I understand that a violation of any one of the following or a combination of the above contract agreements may result in a return trip home at my parent/guardian's expense.

I agree to not do any of the following during my stay at Mount Hermon Outdoor Science School:

- Fighting
- Any activity that is inherently dangerous to self or others
- Stealing
- Cabin raiding/pranking
- Outright defiance
- Intentionally destroying property
- Unauthorized leaving of cabin
- Possession of Illegal Substances
- Possession of any weapons whatsoever
- Bullying
- Other behaviors at the discretion of the Director of the Outdoor Science School

School: _____

Teacher: _____

Mount Hermon Outdoor Science School Prescription Medication Form

All medications and a copy of this form should be placed in a zip-lock storage bag, labeled legibly with the student's first and last name, and given to the classroom teacher on Monday prior to boarding the bus for Outdoor Science School. Teachers are responsible for bringing any and all student medications to the nurse. No medications should arrive at science school in student luggage.

* <mark>10 de jui</mark>	ed out <u>if and only if</u> a student or cabin leader under the age of 18 is bringing prescription medication to science school.				
I.	Education Code 49423 requires:				
	A. Signed order from your physician, and parent consent. (Use form below.)				
	B. Signed parent's permission for camp medic or director to assist in carrying out the physician's instructions				
	 C. Medication in a bottle from the pharmacy labeled with child's name, dosage, and generic name of the drug. (Ask the pharmacist for two bottles of medication: one for home and the other for Science School.) All OTC (Over The Counter) medication sent to Science School must be labeled with the child's name, the medication name and dosage, as well as times to be given. No unlabeled medication can be administered. 				
II.	Education Code 49480 gives the school medic with parent consent, permission to communicate with the physician and counsel with the Science School personnel regarding possible effects of medication.				
III.	Please sign below. Your signature indicates your consent as required in the above Education Code Sections 49423 and 49480.				
	Parent/ Guardian Signature ************************************				
To be Com	pleted By Physician: Date				
	has medication to be taken at the Outdoor Science School.				
MEDICATI	ON: DOSAGE:				
FREQUENC	CY:				
PRECAUTI	ONS, SPECIAL INSTRUCTIONS, POSSIBLE ADVERSE EFFECTS, COMMENTS:				
Physician S	ignature:Address:				
Phone:	***************************************				
To Be Cor	npleted By Parent/ Guardian:				
and for the	has my permission to take the above medication to Outdoor Science School Nurse or Director to assist and/ or allow him/ her to take the above medication as indicated for:				

Parent/Guardian Signature _____Date____

Mount Hermon Youth Health Form		from Month/Day/Year				
	Student Name:	Middl	e Last			
	□ Male □ Female					
Outdoor Science School		Month/Day/	Age at OSS			
P.O. Box 413	School:	-				
Mount Hermon, CA 95041			and sections of this form and <i>make a copy!</i> ler. Please keep the copy for your records.			
Student Home Address:						
Street Address Parent/Guardian with legal custody to be contacted in cas	e of illness or injury:	City	State Zip			
Relation Name:to Stude	ship	rrod Dhonos: ()	()			
Name to stude	Ema	il:				
Home Address:						
(If different from above) Street Address	City	State	Zip			
Second Parent/Guardian or other emergency contact: Relation	ship					
Name: to Stude		rred Phones: ()				
Additional contact in event parent(s)/guardian(s) can not		ı				
Relation						
Name: to Stude		rred Phones: ()	()			
	Ema	II				
Medical Insurance Information:						
This student is covered by family medical/hospital Include a copy of your insurance card; copy bo						
Insurance Company	Policy	Number				
Subscriber	Insurar	ice Company Phone Number ()			
If no Health Care Dian exists, please read and	sign bolow					
If no Health Care Plan exists, please read and	sign below.					
If you do not have your own Health Care Plan, we Insurance Company. By signing below you author statements to be disclosed to Hartford Life and Ac photo static copy as equally valid authorization.	ize payment of any medical f	ees to physician or supplier for	services described on any attached			
Signature of Custodial Parent/Guardian	[ionship udent:			
Health-Care Providers:						
Name of student's primary doctor(s):		Phone:	()			
Name of dentist(s):		Phone:	()			
Name of orthodontist(s):		Phone:	()			
Name of orthodonust(s).		Those.	/			
Parent/Guardian Authorization for Health Care						
	<u>.</u>					
This health history is correct and accurately reflects the health status of the student to whom it pertains. The person described has permission to participate in all Mount Hermon Outdoor Science School activities except as noted by me and/or and examining physician. I give permission to the physician selected by Mount Hermon Association to order x-rays, routine tests, and treatment related to the health of my child for both routine health care and in emergency situations. If I cannot be reached in an emergency, I give my permission to the physician to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for this child. I understand the information on this form will be shared on a "need to know" basis with OSS staff. I give permission to photocopy this form. In addition, Mount Hermon Association has permission to obtain a copy of my child's health record from providers who treat my child and these providers may talk with the program's staff about my child's health status. I am aware that, at the discretion of the Science School Director, I will need to pick up my child ue to medical or disciplinary reasons. I agree to be responsible for picking up my child. Mount Hermon Outdoor Science School policy is that in the event that a child needs to be sent home for any reason, no amount of the paid fees will be refunded if my child has attended the Outdoor Science School program for 24 hours or more.						
Signature of Custodial	-		ionship			
Parent/Guardian	[ate: to St	udent:			

/Guardian	Date:	to Student:	
			Page 1/3

Moun	t Hermon	Student N					
	Health Form		First	Middle	Last		
Diet, Nutrition: □ This stud □ This stud	dent eats a regular diet. dent has special food nee						
Note: Our kitchen will do it: teacher and research the m					ease contact your		
I have rev	Restrictions: Does the student have permission to go swimming while at Outdoor Science School? Yes No I have reviewed the program and activities of OSS and feel the student can participate without restrictions. I have reviewed the program and activities of OSS and feel the student can participate with the following restrictions or adaptations. (Please describe below.)						
Allergies: D No known all	Allergies: No known allergies. This student is allergic to: Food Medicine The environment (insect stings, hay fever, etc.) Other (Please describe below what the student is allergic to and the reaction seen.)						
Medication: This student will not take any daily medications while attending Outdoor Science School. This student will take the following daily medication(s) while at Outdoor Science School: "Medication" is any substance a person takes to maintain and/or improve their health. This includes vitamins & natural remedies. Bring enough of each medication to last their entire stay. By law, all Prescriptions and Over The Counter medication must arrive in the original and appropriately labeled pharmacy containers, inside a Ziploc bag clearly stating students name and school. ALL medications will be turned in to the Health Center upon arrival from the teacher. DO NOT put any medication in the child's luggage, as the child will miss part of the orientation when they have to retrieve it. ALL medication should be turned in to the teacher before departure to camp. The Health Center staff will store and distribute medications as directed. Please contact your child's teacher for further information regarding the Health Center.							
Name of medication	Date Started	Reason for taking it	When it is given	Amount or dose given	How it is given		
			Breakfast Lunch Dinner Bedtime Other time:				
			Breakfast Lunch Dinner Bedtime Other time:				
			Breakfast Lunch Dinner Bedtime Other time:				
The following non-prescription medications are representative of what may be stocked in the Health Center and are used on an <u>as needed basis</u> to manage illness and injury. Cross out those the student should <u>not</u> be given.							
Pseudoephedrine (Sudafed) Dipt Technu Extreme (Poison Oak skin wash) Gua Docusate Sodium (Stool softener) Med		Medicane Swa Hydrocortisone	ine (Benadryl) M (Cough Medicine) b (Sting Relief) e Cream				
Tums Aloe Vera Lotion Cough Drops Page 2/3					Page 2/3		

Mount Hermon		5	Student Name:				
			First Middle				Last
Youth Health Form							
Immunization History: Provide the month and year for each immunization. If the student has not received the below immunization's please initial							
Immunization	Dose 1 Month/Year	Dose Month/Y		Dose 3 Month/Year	Dose 4 Month/Year	Dose 5 Month/Year	Most Recent Dose Month/Year
Diptheria, tetanus, pertussis		Wohul/Teal					
(DTaP) or (TdaP) Tetanus booster							
(dT) or (TdaP)							
General Health History: Check "	Yes" or "No" for e	each stateme	ent. Ex	xplain "Yes" answer	s below.		
Has/does the student:							
1. Ever been hospitalized?		. 🗆 Yes 🗆 N	lo 11	. Had fainting or dizz	iness?		Yes 🗆 No
2. Ever had surgery?				2. Passed out/had che			
3. Have recurrent/chronic illness	es?	.□Yes □N	lo 13	. Had mononucleosis	(mono) during the p	ast 12 months?	Yes 🗆 No
4. Had a recent infectious diseas	se?	.□Yes □N	lo 14	I If female, have prob	lems with periods/m	enstruation?	Yes □ No
5. Had a recent injury?		.□Yes □N	lo 15	i. Have problems falli	ng asleep/sleepwalk	ing?	Yes 🗆 No
6. Had asthma/wheezing/shortne				Ever had back or jo	int problems?		Yes 🗆 No
Have diabetes?		. Yes 🗆 N	-	. Have a history of be			
8. Had seizures?		.□ Yes □ N		. Have problems with			
9. Had headaches?). Have any skin prob			
10. Wear glasses, contacts, or pro	otective eyewear?.	.□Yes □N	lo 20). Traveled outside the	e country in the past	9 months?	Yes 🗆 No
★The student will carry an inhaler	while at Outdoor So	cience Schoo	I		🗆 No		
★The student will carry an Epi-Per							
Note: If the student carrie						urned.	
Mental, Emotional, and Social He	alth: Check "Yes"	" or "No" for	each :	statement.			
	option definit disord		ottontio	n deficit/hunerectivity	disorder (AD/UD)2		
 Ever been treated for attended for attended for emails of the second seco							
 Even been reated for en During the past 12 month 				-			
 Burning the past 12 month Had a significant life even 							
(History of abuse, death of a love	d one, family change, add	option, foster care	e, new sib	ling, survived a disaster, oth	ers)		
Please explain "Yes" answers in	the space below,	noting the nu	imber o	of the questions. The	camp may contact y	ou for additional in	formation.
What Have We Forgotten to Ask	Please provide i	n the snace	helow	any additional inform:	ation about the stude	ant's health that yo	u think important or
that may affect the student's ability							
							Page 3/3

Participant/Guardian Waiver Form

School_

Please read this document carefully. It must be signed by all Mount Hermon Outdoor Science School Participants. Since the participant is a minor, at least one parent or guardian must also sign as evidence of their agreement to these terms and conditions on their own behalf and on behalf of the minor.

1. I acknowledge that I have voluntarily applied to participate in the Mount Hermon Outdoor Science School program operated by Mount Hermon Association, Inc. which can be a physically demanding and/or challenging program. Students may participate in standard Outdoor Science School activities with manageable medical conditions. However, if I am participating in Tree-Climbing activity, I do not have any medical conditions which might create an unsafe risk to myself or others who are participating in this activity with me.

2. Acknowledgement of Risks

I understand that the Mount Hermon Outdoor Science School at Mount Hermon may expose participants to certain risks. The activities require moderate physical exertion and may be conducted at heights up 50 feet (Tree-Climbing Activty). Among the hazards and risks of the activities and use of the premises and equipment are the following: falls; collisions; abrupt and possibly harmful contact with structures, objects and persons; anxieties and fears associated with heights; close contact with other people; coordination and misjudgments on the part of participants; the failure of structures or equipment; and the unpredictable forces of nature. Participants, a fear of height, or of unprotected falling, loss of balance, coordination and misjudgments, including failure to follow procedures and instructions, physical or mental or psychological stress, fatigue, chill and /or dizziness which may diminish reaction time and increase the risk of an accident. Injuries associated with participants may include breaks, sprains, bruises, and in extreme cases, emotional upset, anxiety and even death. Participants acknowledge that the description of risks is not complete and that other unknown or unanticipated risks may result in injury, illness or death. Participants acknowledge that this program is purely voluntary, and with full knowledge of the inherent risks of the activities.

3. Assumption of Risks

I understand that participation in the Mount Hermon Outdoor Science School entails certain risks. I am voluntarily participating in this program with knowledge of the risks involved. I hereby accept any and all risks of injury or death to myself or any minor children for which I am responsible, arising out of or in any way connected with the use of the program, the Mount Hermon Adventure facilities, and/or one of affiliated organizations of Mount Hermon Association, Inc.

4. Release and Indemnity

As consideration for being permitted to participate in the Mount Hermon Outdoor Science School, I hereby agree that I, my assignees, heirs, and/or as the parent/guardian of a minor participant, will release and hold harmless and not bring any claim or legal suit against Mount Hermon Association, Inc., its directors, managers, officers, agents, employees and volunteers or its affiliated organizations or the supplier of any of the equipment used in the activity ("Released Parties"), for any and all claims of injury, disability, death or other loss or damage to person or property suffered by me or my minor child arising in whole or in part from participation in this program, both foreseeable or unforeseeable.

In addition, I agree TO INDEMNIFY (that is, defend and satisfy by payment or reimbursement, including costs and attorney's fees) Released Parties from any claim of loss, injury or death, brought on by myself or my child against another co-participant. These agreements of release and indemnity include loss or damage caused or claimed in whole or in part by the negligence of a Released Party, but not intentional wrongs or the gross negligence of a Released Party.

(Please initial) This student has permission to fill out a survey about his/her experience in nature. This is a voluntary survey and the student may stop at any time. The information from the survey is confidential and anonymous.

I HAVE CAREFULLY READ THIS VOLUNTARY PARTICIPATION AGREEMENT FORM AND PARTICIPANT REQUIREMENTS AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY IN WHICH I AM GIVING UP IMPORTANT LEGAL RIGHTS AND A CONTRACT BETWEEN MYSELF AND MOUNT HERMON ASSOCIATION, INC. AND/ OR ITS AFFILIATED ORGANIZATIONS, AND SIGN IT OF MY OWN FREE WILL.

Print Parent/Guardian Name

Signature

Date