



## *2019 Camp Lakeview Retreats*

# **Family Work Weekend**

### **What time do I arrive at camp?**

The weekend program begins with check-in on Friday evening from 6:30-7:30. We will gather at 7:30 for introductions and a review of the weekend schedule and work projects.

### **What do I need for camper check-in?**

- **MEDICAL FORM:** In your online account, you can download and print the camper medical form. **THIS FORM CAN NOT BE FILLED OUT ONLINE.** Please fill out the form completely and bring it with you to check-in. It contains health history information and an authorization for medical care both of which are critical in the event of an emergency.
- **DISCLAIMER FORM:** In your online account, you can download and print the disclaimer form. **THIS FORM CAN NOT BE FILLED OUT ONLINE.** Please fill out the form completely and bring it with you to check-in. This form is **REQUIRED** to be able to participate in camp activities.
- **MEDICATION:** Prescription medication brought to camp can remain in the possession of the adult but must be in a secured location to prevent unwanted access. The camp stocks some common non-prescription medication. The parent or guardian at camp with the child may authorize its use for the child or for themselves if and when it is needed.
- **T-SHIRTS:** Campers wishing to purchase a camp shirt may do so at check-in. Most shirts cost \$13-\$15.

### **What should I bring to camp?**

Jeans, sweatpants, shorts

T-shirts, sweatshirt

Socks, underwear, pajamas

Shoes (two pairs), laundry bag

Rain coat, hat, light jacket

Swimsuit, sandals, beach towel

Pillow

Sleeping bag or sheets and blankets

Bath towel, washcloth

Soap, shampoo

Toothpaste, toothbrush

Deodorant, comb or brush

Suntan lotion, insect repellent

Flashlight, sunglasses, camera

Bible, notebook, pen

Water Bottle, work gloves, tools

### **What should I NOT bring to Camp?**

Gaming devices, iPods, MP3 players, cell phones or e-readers (e.g. Kindle)

Firearms, knives, matches, or fireworks

Illegal drugs, tobacco, alcohol

## **What is the Family Work Weekend program?**

The object of the weekend is to help get the camp in shape for summer camp. There will be a whole range of projects, including light construction, cleaning, painting, raking, wood-splitting, folding T-shirts, and much more! We will do our best to match your skills with a project. We will also use a few of our weekend participants to provide daycare and cooking for the group. Work will be accomplished during three periods: Saturday morning from 8:30-11:45, Saturday afternoon from 1:00-4:30, and Sunday morning from 8:30-11:45. Children (age 6-12) will not work this long. They will be assigned to a work team which will be led by one of our staff and will work for about half of each period. The other half will be spent in organized recreation. Small children (age 5 and under) will not work at all - childcare will be provided.

## **Where will we be housed?**

Families will either be housed in cabins (one family per cabin) or in one of the lodges (one room per family). Housing requests will be considered, but preference will be given to families with small children or special needs.

## **What skills and tools are needed?**

Although no special skills are needed to participate in the weekend, please let us know in advance if you have specialized skills (e.g. carpentry, plumbing, electrical, sewing) so that your talents can be put to best use. Camp has a wide variety of tools, but we never seem to have enough for work weekend. If you are able to bring some from home, it would be very helpful. You may want to call the camp in advance to find out what tools would be most needed. Please label all of your tools to make sure you get them back after the weekend.

## **What is the dress code?**

Camper attire should be modest and in keeping with the character and attitude of Christ.. Campers will be asked to change if wearing shirts that contain sexual innuendoes, that promote the use of cigarettes, drugs, or alcohol, that are anti-Christian, or that would be offensive to the general public. Swimsuits should be one-piece or tankinis (no bikinis). Expect clothes to get dirty at camp, so don't bring anything too nice!

## **What if my camper gets sick or injured?**

In the event that you or your child needs professional medical treatment, the parent/guardian's insurance will be considered the primary carrier. The camp carries medical and dental insurance on all campers which can be used in a secondary role, helping with deductibles and filling the gaps left unpaid by the parents' primary coverage.

## **What if we forget something at camp?**

All lost and found items from the summer of 2019 will be stored at camp until January 1, 2020. We will make every effort to help the owners retrieve all lost and found items. Please [help us help you](#) by marking all items brought to camp, checking your items before leaving camp, and notifying us as soon as possible once you realize an item is missing. Camp Lakeview is not responsible for lost items that cannot be located.

## **What if we have to cancel our session?**

Let's face it. This is a free weekend and you did not have to make a deposit to register. So, if you need to cancel and don't let us know, you lose nothing. But think of what the camp loses. If you cannot come and let us know ahead of time, we can open a spot for another family to enjoy the weekend and the camp will receive the gift of their labor. However, if you do not let us know, none of that will happen. Please, let us know if you need to cancel!

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**Health History:**

Primary Physician Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Is any family member allergic to:

- Bee Stings .....  Yes  No    Food (gluten, nuts, etc.) .....  Yes  No    Dairy .....  Yes  No
- Poison Ivy / Oak .....  Yes  No    Penicillin .....  Yes  No    Other .....  Yes  No

Is any family member subject to:

- Frequent colds .....  Yes  No    Frequent sore throats .....  Yes  No    Sinus Trouble .....  Yes  No
- Constipation .....  Yes  No    Kidney Trouble .....  Yes  No    Bed Wetting .....  Yes  No
- Convulsions .....  Yes  No    Ear Trouble .....  Yes  No    Sleep Walking .....  Yes  No
- Fainting .....  Yes  No    Upset Stomach .....  Yes  No    Other .....  Yes  No

Has any family member had:

- Abscessed Ears .....  Yes  No    Chicken Pox .....  Yes  No    Tuberculosis .....  Yes  No
- Bronchitis .....  Yes  No    Athletes Foot .....  Yes  No    Rheumatic Fever .....  Yes  No
- Hernia (Rupture) .....  Yes  No    Diabetes .....  Yes  No    Heart Trouble .....  Yes  No
- Asthma or Hay Fever .....  Yes  No    ADD/ADHD .....  Yes  No    Eating Disorder .....  Yes  No

If you answered yes to any of the above questions, please explain in the space below, including the name of the family member to which it pertains (an additional sheet may be attached for more room):

Has any family member had any operations or serious injuries?  Yes  No

If yes, please comment:

Are there any restrictions of activity for medical reasons?  Yes  No

If yes, please comment:

Are there any additional details or information on the camper's health that either the camp staff or an attending doctor should know?

**Immunization Record:**

Please list each family member's first name and the date of their last tetanus booster. In the space marked "other", please list all common immunizations which the family member has not had.

- Name: \_\_\_\_\_ Tetanus Booster: \_\_\_\_/\_\_\_\_/\_\_\_\_ Other: \_\_\_\_\_
- Name: \_\_\_\_\_ Tetanus Booster: \_\_\_\_/\_\_\_\_/\_\_\_\_ Other: \_\_\_\_\_
- Name: \_\_\_\_\_ Tetanus Booster: \_\_\_\_/\_\_\_\_/\_\_\_\_ Other: \_\_\_\_\_
- Name: \_\_\_\_\_ Tetanus Booster: \_\_\_\_/\_\_\_\_/\_\_\_\_ Other: \_\_\_\_\_
- Name: \_\_\_\_\_ Tetanus Booster: \_\_\_\_/\_\_\_\_/\_\_\_\_ Other: \_\_\_\_\_

**Prescribed Medications:**

Please list all medications brought to camp:

Family Member	Name of Medication	Dosage	Times Given	Reason for Medication	Prescribing Physician

**RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT**

(Family Camps/Retreats)

I execute this Release, Indemnification and Hold Harmless Agreement (“Agreement”) on my behalf and on behalf of my spouse, children and other family members (my “Family”) who are attending the family camp/retreat (“Camp”) with me at Lakeview Ministries on the dates of \_\_\_\_\_. I certify that I am at least 18 years of age and the custodial parent and/or legal guardian of my child(ren) and have full legal authority to execute this Agreement on behalf of my Family, my heirs, representatives, successors, executors, administrators and assigns.

I agree, on behalf of each member of my Family in attendance at Camp, my heirs, representatives, successors, executors, administrators and assigns, to FOREVER RELEASE, INDEMNIFY, DEFEND, AND HOLD HARMLESS South Central Lutheran Camp Association of Indiana, Inc., doing business as Lakeview Ministries, and its agents, servants, employees, volunteers, patrons, officers, and directors (collectively, “Lakeview”), from any and all actions, claims, demands, suits, liabilities, assertions of liability, losses, costs, judgments, and expenses, including but not limited to attorney fees, reasonable investigative and discovery costs, and court costs, which in any manner may arise or be alleged to have arisen, or resulted, or alleged to have resulted, from (i) the participation of any member of my Family in Camp, or (ii) the presence, activities, acts or omissions (whether negligent, intentional, or otherwise) of Lakeview. This includes, but is not limited to, all actions, claims, demands, suits, liabilities, assertions of liability, losses, costs, judgments, and expenses on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the participation in Camp, of any member of my Family, however the injury or damage is caused, including but not limited to, the NEGLIGENCE of Lakeview.

I fully understand and acknowledge that certain elements of Camp may be physically hazardous and that by participation in Camp, the members of my Family face the risk of accidental and/or other injury. There risks include, but are not limited to, (i) loss or damage to personal property, (ii) injury or fatality due to and/or related to walking, running, jumping, swimming, handling athletic equipment, horseback riding, zip lining and/or other physical activity, (iii) head, neck, arm, leg and/or back injuries, (iv) exposure to inclement weather, outdoor terrain and all the risks inherent therein, (v) slips and falls, and (vi) any other aspects related to Camp. I have fully investigated the nature of Camp and assume the risks of my Family’s participation in Camp. I agree that my Family’s participation in Camp is entirely voluntary and that no member of my Family is under any obligation to take part in Camp. I am fully aware that any member of my Family may suffer these or other injuries arising out of participation in Camp. However, I voluntarily assume these risks on behalf of my Family so they may participate in Camp.

I also consent to Lakeview’s use of photographs and/or video images of any member of my Family for official Lakeview promotional purposes, including print, internet, social media, video, and other media. While the image of a member of my Family may be captured, I understand that my Family’s name will not be shared. I further understand and acknowledge that I am entitled to withdraw my consent to the use of photographs and/or video images of any member of my Family, by providing a request in writing along with a photo or photos of the members of my Family to Lakeview.

This Agreement is to be governed by and construed under the laws of the State of Indiana. In the event that any term or provision of this Agreement is found to be unenforceable or void, in whole or in part, the term or provision concerned shall be construed as valid and enforceable to the maximum extent permitted by law, and the balance of this Agreement shall remain in full force and effect. I agree that exclusive venue for any dispute arising between Lakeview and me involving this Agreement shall be in Bartholomew County, Indiana.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Spouse Signature \_\_\_\_\_ Date \_\_\_\_\_

Names of Child(ren) \_\_\_\_\_

Names of other Family members attending Camp \_\_\_\_\_

\_\_\_\_\_

# Directions to Camp Lakeview:

From I-65, take the Ogilville exit (#64). Go WEST on Highway 58 for 8 miles. At Waymansville, turn sharp right at the general store onto 930 S. (also called "Lake Rd.") Go 1½ miles on Lake Rd. The camp entrance will be on the right.

