



# Camp Lakeview

## 2020 Explorer Camp

# Information Packet

### Camp Lakeview

13500 W Lake Rd  
Seymour, IN 47274  
P: 812-342-4815

[office@lakeviewministries.camp](mailto:office@lakeviewministries.camp)  
[lakeviewministries.camp](http://lakeviewministries.camp)

Welcome to Camp Lakeview! We are so excited your child will be joining us this summer and want to do everything possible to make their camp experience a great one.

This informational guide is your best resource in preparing for camp at Lakeview Ministries. Included you will find more information about:

- Arrival/Departure Times
- Check-In Process
- Health & Medical Information
- Contacting Your Camper
- Packing List

**Please take the time to carefully read through all the information contained here. Even if you have been to camp before, there is new information each summer of camp.**

If you have any additional questions that are not answered here, please contact us. We are happy to help! The **Parent Headquarters** section of our website ([lakeviewministries.camp/parents/](http://lakeviewministries.camp/parents/)) is also a great resource.

See you this summer!

In Christ,

Ellie “Frisbee” Lutz  
Program Director, Camp Lakeview  
[frisbee@lakeviewministries.camp](mailto:frisbee@lakeviewministries.camp)  
812-342-4815



## ARRIVAL TIMES & CAMPER CHECK IN:

Campers are asked to arrive at camp between **2:00-4:00 pm** EST on Sunday (Explorer 1) or Wednesday (Explorer 2). Please do not arrive earlier than 2:00 pm. Check-in takes place in the Dining Hall building at Camp Lakeview. The process should take less than 30 minutes from start to finish.

**Pro Tip:** You can check-in at any point between 2:00-4:00 pm, and will often find shorter lines if you arrive later!

Please note that prior to 2:00 pm our staff are finishing up prior programs and will not be available to direct you. Check-in will not start before 2:00 pm.

As you drive into camp, staff will greet you at the bottom of the hill, guide you to parking, and give you further instructions on checking in your camper(s).

## CHECK-IN PROCESS

You and your camper should both go through the check-in line. During check-in you will check in with our staff, turn in your camper's medical form and any medications, complete a health screen, and receive your camper's cabin and counselor assignment.

Here is what you can do to help the check-in process go as smoothly as possible:

- **PAY 2 WEEKS PRIOR:** Remember that your registration balance is due two weeks before your camp session starts. You are also able to add money to your camper's **Canteen Account** prior to check-in through the "Camp Store" payment section of your online account.
- **FILL OUT HORSE FORM:** All cabins ride horses three times during the week. If your camper plans to ride, please log in to your online account and fill out the **Horseback Riding Form** prior to check-in. (Campers who choose not to ride horses will be able to shoot archery instead.)
- **PRINT AND FILL OUT MEDICAL FORM:** **This form can NOT be filled out online. Please fill it out prior to arriving at camp.** This form can be found at the end of this document.
- **BRING MEDICATIONS:** You will turn in **ALL MEDICATIONS** to the First Aid Coordinator. **All prescription medication must be in its original container with the prescription label and dosage instructions.**

**Pro Tip:** Standard OTC medication such as Tylenol is available to campers. You don't need to bring OTC medications unless your camper uses it daily.

## MEETING THE COUNSELOR:

After the check-in line, you will walk to your camper's cabin. Cabins are located across the road from the Dining Hall. There you will have the chance to:

- Meet and talk with your camper's counselor.
- Help your camper set up their bunk and unpack.
- Let the counselor know about any special requirements your camper that will help make their week better.
- Fill out a **Check-Out Form** indicating who is allowed to pick your camper up at the end of their session. If someone other than a parent or guardian is dropping your child off, please provide a signed note indicating who may pick your child up at the end of camp.

After doing this, the check-in process is complete.

### **DEPARTURE/PICK-UP TIMES & CLOSING PROGRAM:**

Families picking up campers on Tuesday (Explorer 1) or Friday (Explorer 2) are encouraged to join us for our Closing Program at **6:15 pm** EST. Closing Program lasts about 45 minutes and is a celebration of your camper's week of camp. **We highly encourage parents to attend Closing Program.**

After Closing Program (which takes place at the Amphitheatre), you will be able to pick up your camper at their cabin. You must sign out your camper with their counselor. Campers will be released only to people authorized on the Check-Out Form.

**Pro Tip:** You are able to arrive at camp before 6:15 pm to pack up your camper's luggage.

### **LATE DROP-OFF AND EARLY PICK-UP:**

While we firmly believe that your camper will get the most out of their camp experience by being there for the whole time, we also recognize that sometimes life gets in the way.

**If you need to drop off your camper or pick them up outside of our usual times, please let us know ahead of time by calling our office.** When picking up or dropping off a camper, you should go to the Dining Hall to check in.

### **CANTEEN AND SHIRT SHACK:**

Each day, campers have the opportunity to purchase an assortment of snack and drink items at the canteen. A canteen account is set up for each camper and purchases are deducted from the account. Campers visit the canteen 4 times total and may only purchase 3 items per time. All items are around .75¢.

You are able to put money into your camper's account by logging in to your online account and making a payment to the "Camp Store". You can also add money during check-in. We recommend depositing no more than **\$10**.

At their final canteen time, campers with remaining money are given the option to donate to our summer mission project or receive the money back. For our mission project, we support **Lutheran World Relief**, an organization that provides emergency aid and poverty relief throughout the world. Donating canteen money is an awesome way for campers to practice living out their faith!

**Pro Tip:** It can be helpful to tell your camper ahead of time what you would prefer they do with their extra canteen money.

Our **Shirt Shack** is located in the Dining Hall and has camp shirts, sweatshirts, and souvenirs for sale. The Shirt Shack is **ONLY** open during check-in and pick-up times, not during the rest of the camp session.

**Pro Tip:** Money deposited into your camper's canteen account can **NOT** be used to pay for Shirt Shack items.

## **HEALTH & MEDICAL INFORMATION:**

### **Medical Team**

Our First Aid Coordinator (certified in First Aid/CPR) is onsite at all times and provides routine first aid care and distributes medication to campers. The First Aid Coordinator is available during check-in to discuss all health concerns and questions that you may have regarding your camper's medication and health while in our care. In addition, we have a full-time staff member with an EMT-certification and an on-call pediatric physician who provides treatment plans for common camp injuries and illnesses.

### **Parent Notification of Health Treatment**

If your camper ever experiences a serious medical concern, illness, or incident requiring outside treatment, we will immediately contact you. We will also notify you when a camper is in our First Aid room for a period longer than 4 hours due to illness, or a camper experiences an injury that leaves them unable to continue with normal camp activities.

### **Food Allergies**

If your child has a food allergy, please list those needs on their Medical Form and Important Info Form. In addition, **please call our office at least two weeks before your child's week of camp** to discuss their particular needs with our staff.

In general, while we are able to provide some assistance in meeting food allergy needs, if your camper has a more extensive food allergy, it is recommended that they bring supplemental food items with them. Our kitchen staff is more than happy to prepare separate food items for campers at meals. We can also provide a menu for your week at camp to help you better plan and prepare.

During check-in you will be able to meet with the kitchen staff to drop food off and talk through specific details of your camper's food allergy needs.

## Special Needs

We strive to provide a positive and memorable experience for all campers. If your child has a special need, please contact our office so that we can get to know a little bit more about your child and provide you with the information you need to decide if Camp Lakeview is the right camp for you.

## HOMESICKNESS: PREPARE AND PREVENT FOR CAMP SUCCESS

Homesickness is a very normal and often temporary response to being away from home. With sensitive handling by you and our staff most homesickness can be prevented or overcome, leading your camper to feelings of independence, pride, and self-assurance.

Talk with your child before they leave for camp to help ease the transition. Speak of how exciting camp will be, how much fun you're sure they will have, and how proud you are of them for trying something new. Further, let your child know that if they are feeling sad, afraid, or lonely, there is always someone they can reach out to, whether it is their counselor, another staff member, the First Aid Coordinator, or even the Camp Director.

**Please do not tell your child they can call home or be picked up early**, as this often makes homesickness worse, and leads to campers having trouble fully investing in the experience. If your camper is experiencing a more difficult than average adjustment to camp, we will call you to inform you and ask for your input.

Our staff is well-trained in handling these situations. We know that campers are most likely to feel a longing for home during "down" times, such as mealtimes and just before bed. Our staff takes intentional measures to keep campers well occupied during these times. We will work with your child to acknowledge that their feelings are normal and to provide support for them as they participate in our Christian camp community.

## CONTACTING YOUR CAMPER

### Phone:

Campers are not able to call home during the week unless you have arranged something in advance. If there is ever a significant issue or concern with your camper, we will contact you as soon as possible. You may contact camp by calling the camp office at **812-342-4815**.

### Email:

You may contact your child during their time at camp through the use of our camper email system. Go to [lakeviewministries.camp/email/](mailto:lakeviewministries.camp@email/) to send a message. **Emails will be printed off and delivered to campers once a day at lunch time.** Any emails sent after 11:00 am on the last day of the camp session will NOT be delivered due to their close proximity to the end of camp.

Campers are allowed to e-mail messages out during afternoon free time using the camp's email system. **Campers wishing to do so should bring e-mail addresses with them.**

**Pro Tip:** We often receive messages from parents concerned because they have not heard from their camper during the week. Please know that if you don't hear from your camper, it's because they're too busy having fun at camp!

**Mail:**

During the check-in process you can drop off letters and packages with any of our staff to be delivered during the week. It is helpful to label any letters/packages with your child's full name and cabin (once you find it out).

Regular mail can be sent to the following address:

**(Camper's Name) (Cabin)  
Camp Lakeview  
13500 W. Lake Road  
Seymour, IN 47274**

**CELL PHONE POLICY**

**Campers are not allowed to bring cell phones to camp.** At camp we believe strongly in the value of showing campers how to build close relationships and live in community. Providing an atmosphere free from cell phones helps create this community. If found, staff will confiscate the cell phone for the remainder of the session. Please do NOT pack a cell phone for your camper. If you are concerned about needing to get in touch with your camper during the week, please call our office so that we can make a plan together.

Talking with your child before they leave for camp will help to ease the transition away from cell phones and other electronics. Let your child know that if they are feeling sad, afraid, or lonely, there is always someone they can reach out to at camp, whether it is their counselor, another staff member, the First Aid Coordinator, or even the Camp Director.

**CAMP PICTURES AND VIDEOS:**

We love getting to share your camper's experience with you! We take and post pictures throughout the week using Waldo Photos, an online photo app. The link to access these photos is at [lakeviewministries.camp/waldo/](http://lakeviewministries.camp/waldo/).

We also post pictures, videos, updates and more to our Facebook and Instagram pages. Follow us **@lakeviewministries**.

**CANCELLATION POLICY:**

Refunds will be granted 14 days prior to your scheduled arrival for all but \$25 of your deposit. No refunds will be granted within 14 days of your scheduled arrival except in cases of illness or injury and family emergencies.

## PACKING LIST

### CLOTHING

- Closed-Toe Shoes
- Shower Sandals
- Socks
- Underwear
- Shorts
- Pants or Sweatpants
- T-shirts
- Sweatshirt
- Pajamas
- Rain Jacket
- Hat (with a brim)
- Swimsuit (no bikinis or speedos)

### CABIN ITEMS

- Sleeping Bag or Sheets/Blanket
- Pillow with pillowcase
- Bath towel
- Beach towel
- Soap
- Shampoo
- Deodorant
- Toothbrush & toothpaste
- Comb/hairbrush
- Personal hygiene items
- Lip balm
- Toiletry Bag
- Sunscreen
- Bug spray

### PERSONAL ITEMS

- Bible
- Water Bottle
- Flashlight
- Extra batteries

### OPTIONAL ITEMS

- Bag/Backpack
- Sunglasses
- Notebook
- Pen
- Snacks
- Camera
- Book
- Laundry Bag

### THINGS TO AVOID:

- Cell phones
- Other electronics (gaming devices, e-readers, mp3 players, etc.)
- Knives or weapons
- Fire starters (fireworks, matches, etc.)
- Drugs or alcohol (medications can be turned in to the First Aid Coordinator during check-in)
- Any valuables (including cash or jewelry-such things tend to get lost)

### **Packing Tips:**

- Campers should avoid clothing that is immodest or revealing as well as clothing that could be offensive in language or graphics.
- Expect clothes to get dirty at camp, so don't bring anything too nice!
- Avoid mix-ups by labeling all items with your camper's name.

### **LOST ITEMS:**

All lost items from the summer will be stored at camp until **September 1<sup>st</sup>**. We will make every effort to help you retrieve any lost items. You can [help us](#) by:

- Labeling all clothing and items brought to camp. A sharpie is your best friend!
  - Encouraging your camper to keep up with their clothing and personal items at camp.
  - Doing a quick check of your camper's luggage before leaving camp. Make sure everything is there.
-

Well done-you made it through!

Get excited for your camper's time at camp-it's going to be a tremendous experience of making new friends, growing in faith, and having a ridiculous amount of fun.

Please don't hesitate to contact me with any questions, concerns, or thoughts.

See you soon!

In Christ,

Ellie "Frisbee" Lutz  
Program Director, Camp Lakeview  
[frisbee@lakeviewministries.camp](mailto:frisbee@lakeviewministries.camp)  
812-342-4815





**Emergency Medical Information Form**

*This form must be completed and submitted to the Lakeview Ministries office prior to final admission of the camper into the camp program. Failure to properly complete and submit this form will result in the non-acceptance of the child/youth into the camp program. This form may be mailed or given to the office personnel at the time of check-in on the first day of the camp session. If the form is mailed, make certain that enough time is allowed for postal service to deliver the form prior to the day of registration. Lakeview Ministries shall not be held primarily responsible for medical expenses incurred by the camper through accident or illness before, during, or after enrollment in the camp program. Therefore, it is extremely important that complete insurance information be provided.*

**Camper Information:**

Camper Name: FIRST MIDDLE LAST

Camper Home Address: STREET ADDRESS

CITY STATE ZIP

Camper County of Residence: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Camper Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_

**Emergency Contact Information:**

*Parent/Guardian with legal custody to be contacted in case of illness or injury:*

Parent/Guardian Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Home Address: STREET ADDRESS

CITY STATE ZIP

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

*Second Parent/Guardian or other Emergency Contact:*

Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Home Address: STREET ADDRESS

CITY STATE ZIP

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

**Medical Insurance Information:**

*Attach a copy of medical insurance card to this form.*

Insurance Company: \_\_\_\_\_ Insurance Company Phone: (\_\_\_\_) \_\_\_\_\_

Policy Number: \_\_\_\_\_ Group Number: \_\_\_\_\_

Subscriber Name: \_\_\_\_\_ Birthdate: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Immunization Record:**

Has your child received vaccinations required by the state of Indiana for school including: diphtheria, pertussis, tetanus, measles, rubella, polio-myelitis, mumps, hepatitis B, chicken pox, varicella, and meningitis (grades 6-12)?  Yes  No

Date of last tetanus booster: \_\_\_\_\_

**Prescribed Medications:**

Please bring medications taken routinely with current instructions. You will give these medications to the first aid coordinator during check-in on the first day of your camp. Bring enough to last the entire time at camp. You **MUST** keep medication in the original packaging/bottle that identifies the prescribing physician (if prescription), name of medicine, dosage, & frequency (state law!) or it will not be accepted. All medications must be given to the first aid coordinator.

**Over-the-Counter Medications:**

Lakeview Ministries stocks the following over-the-counter medication for use. **Cross out those medications which the camper should not be given.**

- |                         |                           |   |
|-------------------------|---------------------------|---|
| Acetaminophen (Tylenol) | Ibuprofen (Advil, Motrin) | Phenylephrine decongestant (Sudafed PE) |
| Generic Cough Drops     | Sore Throat Spray         | Benadryl (for allergies)                |
| Calamine Lotion / Aloe  | Pepto-Bismol / Tums       | Antibiotic Cream                        |

PLEASE STAPLE A COPY OF YOUR MEDICAL INSURANCE CARD HERE!

Camper Name: \_\_\_\_\_

Date of Program: \_\_\_\_\_

Lakeview Cabin Name: \_\_\_\_\_

**Health History:**

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

Is the camper 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 the camper 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 the camper 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
- Anxiety ..... Yes    No    Depression .....  Yes    No    Other.....  Yes    No

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

Has the camper 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?

**Authorization for Medical/Dental Care (for campers under 18 years of age):**

I, the undersigned parent and/or natural guardian of \_\_\_\_\_, a minor, do hereby authorize the Camp Lakeview Health Services Staff (and/or any other qualified adult appointed or designated by them) (1) to provide routine health care and administer prescription medications, (2) to consent to medical, surgical and dental care for such minor child; (3) to consent to any diagnostic test, medical, surgical or dental procedure or treatment as may be considered therapeutically necessary by the physician, surgeon, dentist or other health care personnel providing care for such minor child; (4) to employ physicians, surgeons, dentists, nurses and other health care personnel as may be deemed necessary for such minor child; (5) to admit such minor child to any hospital, clinic, emergency room, laboratory or other health care or diagnostic facility for examination, treatment, surgery or care; and (6) to sign all necessary consents and authorizations.

It is understood that this authorization is given in advance occurrence of any condition or situation which would necessitate any such medical, surgical or dental care being required; but is given to provide authority to obtain such care if it should be required. I fully understand the consequences of the foregoing statements and sign this AUTHORIZATION TO CONSENT TO MEDICAL AND DENTAL CARE knowingly, freely and willingly.

This health history is correct and accurately reflects the health status of the camper to which it pertains. The camper described has permission to participate in all camp activities except as noted by me on this form. I understand that the information on this form will be shared on a “need-to-know” basis with camp staff. I give permission to photocopy this form. When necessary or beneficial, the camp staff has permission to give the over-the-counter medications listed on this form (or their equivalent) to the camper.

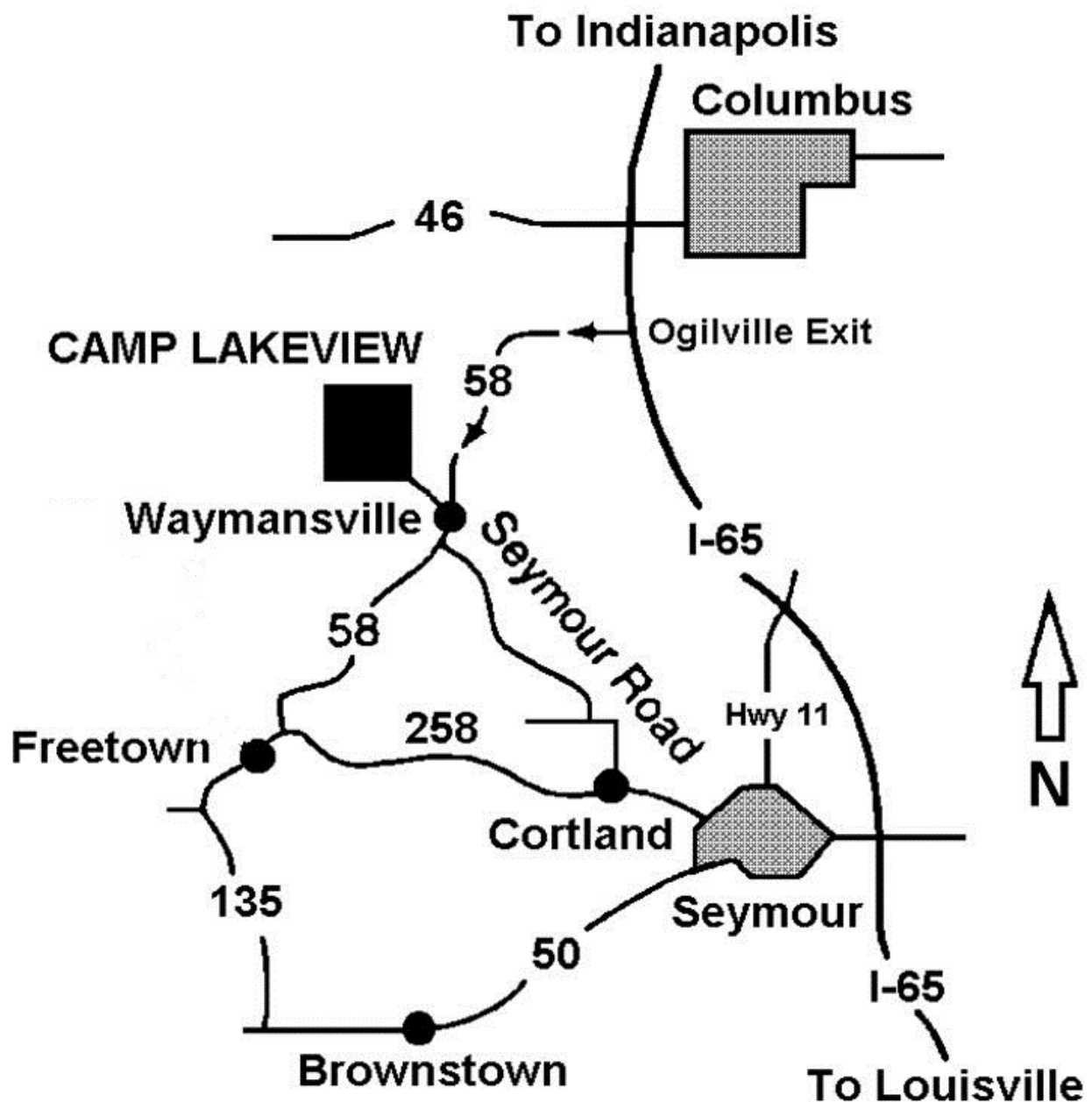
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

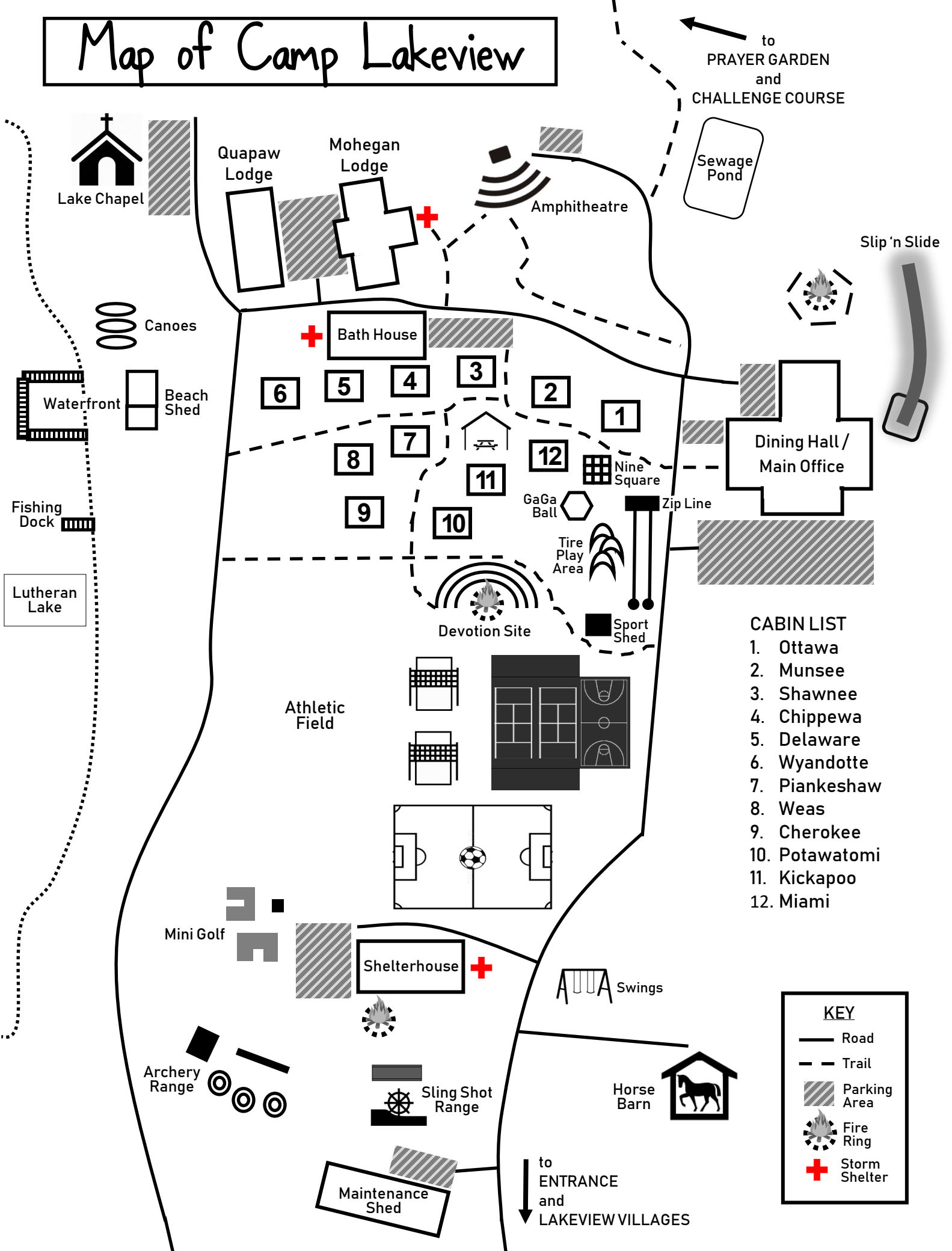
<b>STAFF USE ONLY</b>		
Screen OK: YES   or   NO	Date: _____	Staff: _____

## 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.



# Map of Camp Lakeview



## CABIN LIST

1. Ottawa
2. Munsee
3. Shawnee
4. Chippewa
5. Delaware
6. Wyandotte
7. Piankeshaw
8. Weas
9. Cherokee
10. Potawatomi
11. Kickapoo
12. Miami

KEY	
	Road
	Trail
	Parking Area
	Fire Ring
	Storm Shelter