

Dear Parents:

We are in the process of finalizing arrangements and plans for our annual three-day, two-night outdoor education camping experience. The plan is to provide fifth grade students with an experience in living and studying together at Lake Wapogasset Lutheran Bible Camp, 738 Hickory Point Lane, Amery, Wisconsin from October 4-6, 2017.

## About the Camp

The main campground is a 22-acre peninsula beautifully situated between Bear Trap Lake and Lake Wapogasset, four miles northwest of Amery. The facility provides lodging and meeting facilities to comfortably house up to 150 campers. The camp is used year round by numerous church affiliated groups of all denominations, church councils, public school groups, area youth groups, men's and women's groups, and other nonsectarian groups.

## Why Outdoor Education?

As a result of the program, we hope to offer our students the following opportunities:

1. To enrich classroom studies through first-hand experiences in the outdoor environment with plants, animals, soil, water, etc.
2. To teach the elements of democratic living through group living, planning, and sharing.
3. To learn the importance of ecology in caring for the environment.
4. To provide direct experiences in the natural and biological sciences.
5. To teach the importance of an appreciation for natural resources through realistic projects.
6. To provide the opportunity for meaningful work experiences.
7. To develop skills and abilities for healthful living and safety.
8. To provide the opportunity for students to learn to respect the rights of others, to assume responsibilities, and develop self-reliance.
9. To provide the opportunity for an enjoyable appreciation and understanding of the out-of-doors.
10. To develop desirable interests for wise use of leisure time.
11. To provide teachers with the opportunity to develop a closer relationship with students to better meet their individual needs.



## Other Things You Should Know

1. **Camp Cost:** \$48.00 per person, payable to: St. Croix Falls Middle School
2. **Informational Meetings:** A meeting will be held for interested parents on Wednesday, September 20<sup>th</sup> at 5:00 p.m. in room A128. You may also turn in your health questionnaire, permission slip and \$48.00 fee at this time. Should your schedule not allow you to attend the meeting at this time and you have questions or concerns, please do not hesitate to contact Joe Connors at 483-2507, ext. 1202.
3. **Volunteers:** Any parent interested in helping out with this camp experience should contact Joe Connors at 715-483-2507, ext. 1202 or connojo@scfschools.com. All parents are welcome to attend part or all three days of camp. If planning on staying overnight please let us know no later than September 22<sup>th</sup> so arrangements can be made.
4. **Family Night:** Family and friends are invited to join us at camp on Thursday, October 5<sup>th</sup> beginning at 6:15 p.m. Directions to Camp:  
East on US-8 E for 6.8 miles  
Turn right on 160<sup>th</sup> Street (WI-65) go 1.9 miles  
Turn left on 105<sup>th</sup> Avenue (CR-C) - go 3.8 miles  
Continue on CF-C - go 2.8 miles  
Turn right on Hickory Point Lane - go .5 miles.  
You are here!  
Those attending will be touring the camp and participating in a campfire sing-a-long. This will conclude at approximately 7:45 p.m.
5. **Attendance:** This three-day program is part of the fifth grade curriculum. It is expected that all students will attend. If, for some reason, there is a problem with attending, please let us know. Perhaps we can work together to eliminate the problem or make special arrangements to accommodate your child. We feel this is a once in a lifetime opportunity for students, which should not be missed. If a child does not attend the camp, it is expected they will be in school on these days.
6. **Emergencies:** Needed emergency first aid or treatment will be provided by the Amery Ambulance Service and Amery Regional Medical Center, Amery, WI.
7. **Discipline:** It is expected that all students will abide by all camp rules. In the event a camper is involved in a severe disciplinary matter, parents will be called and asked to pick up their child.
8. **Chaperones:** Students will be chaperoned and supervised by school personnel at all times. In addition, a number of high school students have volunteered and been selected to serve as counselors and helpers.



9. **Reminder:** No student will be denied the trip because of inability to pay. Parents in this position should contact Mr. Connors at 715-483-2507, ext. 1202 before the money is due to discuss payment options.
10. **Contact Numbers:** We ask that parents DO NOT ask their child to call home during the three-days. In the event of an emergency at home, the following phone numbers are provided:
  - Day: Lake Wapogasset Lutheran Bible Camp 715-268-8434.
  - Night: EMERGENCIES ONLY! Callers should dial the same 715-268-8434 number. Their answering machine message will give you the person to contact who will travel to the camp to contact our staff.
  - Cell phone: Joe Connors - 715-417-2247
11. **Due Date:** We ask that you return the Health Questionnaire, Permission Slip, and the \$48 camp fee to your child's first hour teacher by Wednesday, September 20. **Make checks payable to St. Croix Falls Schools.**
12. **Transportation:** Please plan to transport your child to school on October 4 with their luggage at or before 8:00am. Plan to pick your child up from school on October 6 at approximately 3:00pm. We have been informed that most of our regular buses are crowded this year. Students must ask their bus driver or call the bus garage at 715-483-2507, ext. 1500 for advance permission to haul their suitcases and bedrolls on the buses to and from school on the 4<sup>th</sup> and 6<sup>th</sup>.
13. **Supply List:** Students will be given a supply list indicating the items they need to bring to camp. This can also be found on the district website listed under the middle school tab.
14. **T-Shirts:** Students will be able to order a 2017 camp t-shirt or sweatshirt if they so choose. Students will be given an order form. This can also be found on the school website.



St. Croix Falls Fifth Grade Camp 2017  
Health Questionnaire and Permission Slip



Student Name \_\_\_\_\_  
Parent/Guardian \_\_\_\_\_  
Address - Street/City \_\_\_\_\_  
Home Phone \_\_\_\_\_ Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_  
Clinic/Physician \_\_\_\_\_ Health Insurance Company \_\_\_\_\_  
Additional contact (if unable to be reached) \_\_\_\_\_ Phone \_\_\_\_\_

**NECESSARY HEALTH INFORMATION \*\*Parents pick up medication in the school office by 3:00pm on the last day of camp.**

1. Any recent sickness that needs special attention or consideration?  
List: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Any allergies?  
List: \_\_\_\_\_  
\_\_\_\_\_
3. Any medicine that should be taken regularly? \_\_\_Yes\_\_\_ No  
If yes, give  
directions: \_\_\_\_\_
4. Any physical handicaps which require special consideration?  
\_\_\_Yes\_\_\_ No If yes,  
explain: \_\_\_\_\_
5. Any habits that require special attention?  
Nervousness \_\_\_Y\_\_\_ N                      Fears \_\_\_Y\_\_\_ N                      Enuresis (Bed-  
Wetting) \_\_\_Y\_\_\_ N
6. Any other information which would be helpful to staff?  
Explain: \_\_\_\_\_
7. Do we have permission to give your child Advil, if the need arises? \_\_\_Yes\_\_\_ No
8. Date of last tetanus  
shot: \_\_\_\_\_

If your child has a serious allergy (bee stings, penicillin, etc.) or a known medical condition (diabetes, epilepsy) that might require major medical management, you are advised to provide a MEDIC-ALERT necklace or bracelet if your child does not already have one.

If a serious emergency arises, it might be necessary for a physician to attend to your child before the staff can get in contact with you. Such care can be provided only if you sign the below authorization. Either the authorization or a statement of the reasons for not allowing it should accompany this health form.

I hereby authorize the official representative of my child's school, or the medical personnel in attendance at Camp Wapogasset, to provide for medical or surgical care for MY CHILD while he/she is in attendance at Camp Wapogasset.

\_\_\_\_\_

Child's Full Name

Parent/Guardian Signature

Date

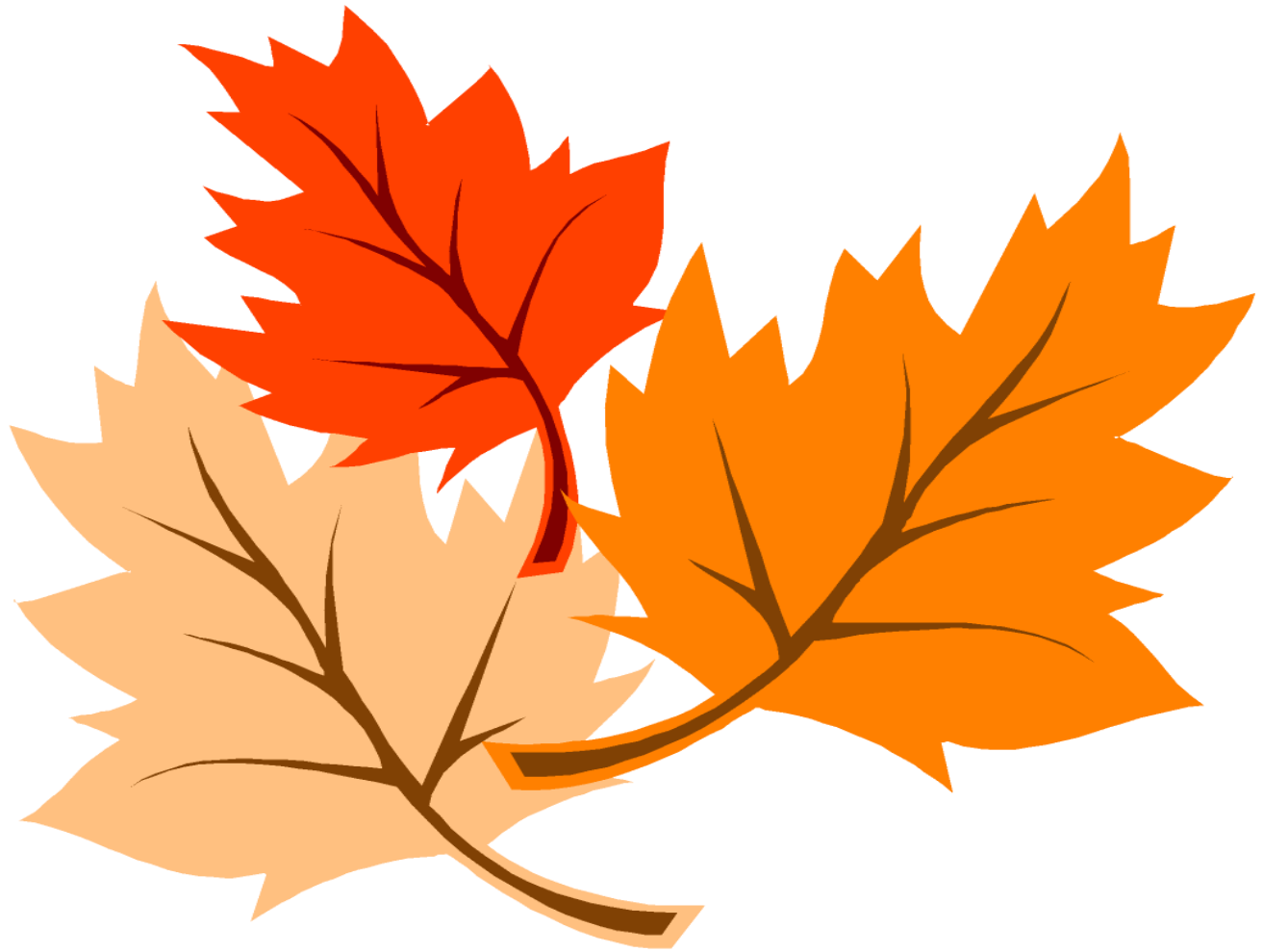
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**CAMP PERMISSION**

My child \_\_\_\_\_ has permission to attend the three-day camp at Lake Wapogasset on October 4, 5, 6, 2017.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date



Dear Parents:

Camp t-shirts and sweatshirts are an option, but not required for camp. This year's color is Navy Blue. If you would like to order a shirt or sweatshirt for your child (or self), please fill out the attached slip and return it to school with your child, along with payment to: **St. Croix Falls Schools by September 20.**

\*\*\*\*\*

Child's Name \_\_\_\_\_

Circle your choice and size:

**Short-sleeved t-shirt (\$8)**

YL AS AM AL AXL AXXL

**Long-sleeved t-shirt (\$12)**

YL AS AM AL AXL AXXL

**Lightweight long-sleeved sweatshirt (\$12)**

YL AS AM AL AXL AXXL

Enclose check made payable to St. Croix Falls Schools for each shirt ordered.

**Due by:** September 20, 2017 to ensure delivery prior to camp.