

HOH ADVENTURE CAMP

P'i P'isodat'sili

Upside down people

K^wo?dakti o xi? Chalatk^w

Welcome to Hoh River

It's that time of year again!

August 14,15, 16, and 17.

We will be following the path of our ancestors down
the waters of the Chalaat people.

Camp Info

Camp capacity set at 30 participants between the ages of 8 and 17. Rafting limited seating for 10 spots at this time; spots will be filled according to applications turned in on a first come, first served basis. Rafting preference will be Hoh Tribal members set at ages 12-17.

Rafting through the campsites of our ancestors while learning the language and culture of our past.

1-night camping with cultural speakers, herbalists, linguists, (Remote Operated vehicles if time is available)

For more information contact

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Ruby Sheriff: email: Ruby.sheriff@hohtribe-nsn.org

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Hoh Indian Tribe

PO BOX 2196 Forks, WA 98331

Phone: (360) 374-6582 Fax: (360) 374-5426

Summer Camp Youth Application

For: Hoh Watershed Adventure Camp

Trip Destination: Hoh River

Dates: August 14,15,16, 2023 (Overnight on the 15th)

Applications Due: July 15, 2023



Greetings!

Hoh Watershed Adventure Camp is back!

This year we will be offering a fun 2 day Hoh Watershed Adventure Camp full of Cultural activities during the day, rafting the campsites of past generations of the Chalaat People, and an overnight camping experience on the South Fork of the Hoh River. Please see the tentative schedule at the back of this packet. We will update participants with any important changes.

Sign-up is on a first come, first serve basis. 30 participants, including chaperones for camping. 12 seats, including chaperones for rafting, ages 12-17 preference for rafting positions. Completed applications can be dropped off at the Natural Resources Department Monday through Friday from 8am to 4pm.

(5) 18 and older chaperones needed (must pass a background check).

Each child must have a completed packet to participate.

Children under the age of 18 will be required to wear a lifejacket when in the water.

Please make sure your child is prepared with the following items to ensure they have a safe and enjoyable week:

- Sneakers or other comfortable shoes for hiking
- Warm top layer such as a sweater or jacket
- Bathing suit and towel
- Bring 3 pairs of socks, pants, shirts and underwear
- Medications along with usage instructions

By applying for the upcoming youth camp, you are agreeing to follow all rules below. In addition, you are agreeing to follow directions from chaperones and other adults of authority. Parents/guardians and youth, please read carefully and sign at the bottom.

- Youth must turn in a completed and signed Adventure Camp Application by the deadline
- Youth 12-17 will get preference, and must be 8 years or older to sign up. Older siblings will not be permitted to be the parent/guardian
- Youth must be respectful of ALL adults and peers
- Youth will be assigned a chaperone, a vehicle and a shared tent. Change in assignment can occur only by program staff
- In the event there is swimming, there will be NO swimming alone. Youth must have a chaperone with them in the water at all times
- Youth must wear a lifejacket in the water
- All youth must be in their tents by curfew. Curfew is determined by the chaperones
- No use of cell phones, iPods or any electronic devices during activities/presentations. Chaperones and/or staff will not be responsible for such items if damaged or stolen.
- Youth must maintain a positive attitude/participate in activities, events and workshops
- Youth must dress appropriately
- Absolutely no use of drugs, alcohol or tobacco. Any person involved with and/or under the influence of a substance will be sent home.
- Vulgarity, profanity (even in music), teasing, physical violence, intimidation, stealing or lying will not be tolerated
- No inappropriate touching (kissing, holding hands etc.)
- Youth will not leave without a chaperone (store, espresso stand, restaurants etc.)
- No weapons of any sort

Program Activities: I hereby grant permission for my child to use all of the equipment and participate in all of the activities of the Hoh Watershed Adventure Camp.

Permission for Transportation: I hereby give permission for my child to be transported by the Hoh Watershed Adventure Camp.

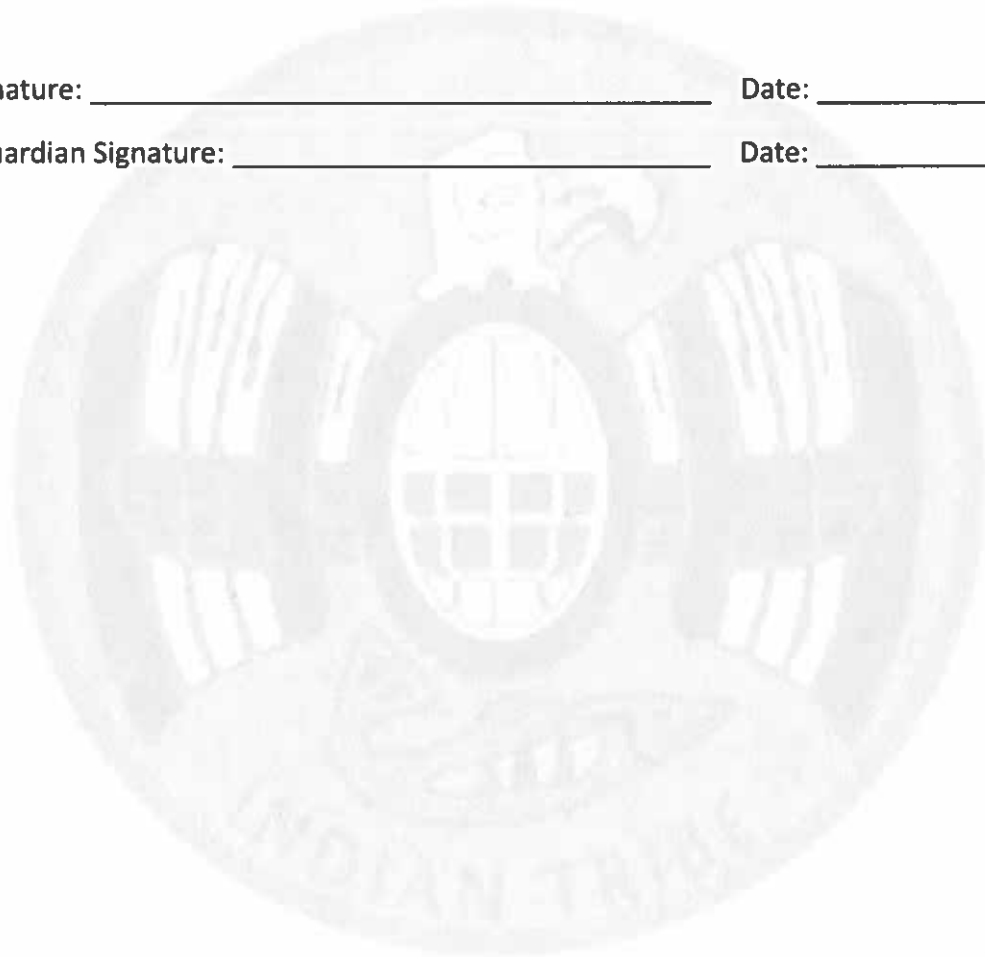
Permission for Water Activities: I hereby give permission for my child to participate in all water activities.

Permission to Apply Sunscreen: I hereby give permission to Adventure Camp Staff to apply sunscreen as needed.

By signing below I acknowledge that I have read and discussed the listed expectations with my parent/guardian. I understand that any violation of these rules can/will result in immediately being sent home. This applies to youth over the age of 18 as well.

Youth Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



Youth Medical Release Form

I realize that the Hoh Watershed Adventure Camp will make every effort to ensure my child's safety during all youth trips. Please include a copy of your child's insurance card.

In the case of an accident, illness, or emergency, I expressly consent to the administration of emergency medical care by a licensed physician or qualified medical personnel and/or hospitalization deemed necessary for my child/children. This permission includes, but is not limited to, the administration of first aid, the use of an ambulance, and the administration of anesthesia and/or surgery, under the recommendation of qualified medical personnel.

Parent/Guardian Signature: _____ Date: _____

***All information below is kept strictly confidential and will only be viewed for safety purposes by select staff. PLEASE PRINT CLEARLY!**

Parent/Guardian
Full Name _____
Home Phone _____
Cell Phone _____
Address _____

Youth Details
Full Name _____
Tribal Affiliation _____
Date of Birth _____
Insurance/Medical Company _____
Medical Card # _____

Emergency Contact 1
Name _____
Relationship to youth _____
Contact # _____

Emergency Contact 2
Name _____
Relationship to youth _____
Contact # _____

List any over the counter or prescription drugs taken regularly including dosage:

List any other pertinent health information/food allergies/environmental allergies/medication allergies or medical conditions:

YouthPhoto/Film Release Form

By signing below, I give permission to Hoh Watershed Adventure Camp to take photographs/film of my child while on Youth and Family Trips or participating at Youth and Family events. I authorize that the Hoh Indian Tribe may use these photographs/film of my child with or without his/her name and for any lawful purpose, including publicity, illustration, advertising, and Web content.

I have read and understand the above and give my permission:

Youth Printed Name: _____

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____ **Date:** _____

Chaperone/Staff Print Name: _____

Chaperone/Staff Signature: _____ **Date:** _____





HOH INDIAN TRIBE

P.O. BOX 2196 • FORKS WASHINGTON 98331
TELEPHONE (360) 374-6582 • FAX (360) 374-5426

BACKGROUND CHECK AUTHORIZATION

To Whom It May Concern:

I hereby authorize and request any present or former employer, school, credit agency, financial institution, law enforcement agency, city, state, county and federal court and agency, military service or other persons having personal knowledge about me to furnish bearer with any and all information in their possession regarding me. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and I specifically waive any written notice from any present or former employer who may provide information based upon this authorized request.

Date _____

Print Applicant's Name _____

Print Applicant's Signature _____

For Identification Purposes Only:

Date of Birth _____

Social Security Number _____

Driver's License Number _____

Current Street Address _____

City, State, Zip Code _____

Telephone Number _____

Education: Supply Name of College/University, Address, State, Zip, Dates of Attendance, Degree

Undergraduate #1 _____

Undergraduate #2 _____

Graduate #1 _____

Graduate #2 _____