



We're so excited you are joining us for Camp Timberline's

BEYOND TIMBERLINE

Please read all of the enclosed information.

You will find answers to frequently asked questions to prepare you and your camper for a successful week of camp.

You will need to complete ONLINE FORMS PRIOR TO ARRIVAL

and fill out PAPER FORMS TO BE TURNED IN on Opening Day.

Please see below for clarification:

PRESENT THESE FORMS ON OPENING DAY:

Forms enclosed for you. Please do not fax or mail.

- Doctors Statement of Participation – 2 pages
Please ONLY USE THE FORM PROVIDED HEREIN ..
1st page must be signed by a physician/NP/PA and turned in at Check-In.
- Certificate of Immunization OR Statement of Exemption - 2 pages .. Please bring updated immunization records to Check-In. This can be in a format that best suits your physician's office.
- Doctor's Orders for Prescriptions Form – Please turn in with medications on Opening Day. Copies generated by your physician's office or school will also be accepted.
- Food Allergy Action Plan – Please complete and bring with you to Check-In, if applicable.
- Colorado Allergy and Anaphylaxis Emergency Care Plan – If your child has any allergy that would require this type of plan, please submit this form on Opening Day. Copies generated by your physician's office or school will also be accepted.

COMPLETED THESE FORMS ONLINE:

You will find required forms to be completed on the dashboard of your camper's account. These **MUST BE COMPLETED ONLINE.** Please make sure all blanks are filled in and each form has your electronic signature at the end. The form will show incomplete if your signature is missing. Some forms are multiple pages – always look for the "Save/Next" button at the bottom of each screen to complete. Doctor's Statement of Participation and Immunization Record cannot be uploaded online .. they are to be brought to camp Opening Day.

- Camper Health Form
- Video and Photo Release
- Liability Waiver
- Permission for Pick-up
- Camper Flight Schedule – complete flight info, or check "no" and sign at bottom
- Medications and Allergies – Click on "Add Medication" and "Allergies" boxes under the Medical section to get started!



OPENING DAY –

To facilitate an efficient Opening Day process, we are asking parents/guardians to arrive and depart at scheduled times. Our hope is for the whole process to take no more than 30-45 minutes. We will be taking camper temperatures and completing a 24-Hour Health Screening upon your arrival. We ask that you have all online forms completed and tuition fully paid prior to Opening Day. **BE SURE TO BRING YOUR CAMPER'S SIGNED DOCTOR FORMS TO CHECK-IN.**

The arrival times ROTATE EACH YEAR according to the first initial of your last name, so be sure to note your time of arrival. If campers with different last names will be arriving in the same vehicle, please default to the LATER time.

- Last names beginning with Q-Z will arrive between 4:00pm-4:30pm
- Last names beginning with A-F will arrive between 4:30pm-5:00pm
- Last names beginning with G-P will arrive between 5:00pm-5:30pm

All campers will begin cabin programs at 6:00pm!

Please also note, the RMNP Service can issue a \$75 fine for cars lined up or parked in the Longs Peak Campground and cars that are blocking the entrance to the campground or trailhead. Unfortunately, they do not dismiss tickets given to our Camp Timberline families. Please enjoy the sites and scenery of Estes Park and the surrounding area rather than arriving prior to your scheduled time.

CLOSING DAY –

Please allow extra time for some special events on Closing Day! We will open the front gates at 11:00am with the closing ceremony starting in the stadium at 11:20am. There will be individual camper awards, early sign-up for next summer, store and snack shack open and a lost and found table. Activities will conclude at approximately 1:30pm.

Prior to attending camp, please complete the online "Permission for Pick-Up" form so we know the names of the person(s) permitted to pick up your child on Closing Day. Be sure to provide ALL NAMES of anyone who may be picking them up, including YOU. If someone arrives other than a person provided on your Permission to Pick Up form, your child will not be allowed to leave camp until we have contacted you, the parent/guardian. Each person picking up a camper will be asked to present a photo ID.

SUMMER CAMP SAFETY – #1 PRIORITY – We take your child's safety and well-being very seriously at Camp Timberline. It is our TOP PRIORITY. We recognize that a safe environment is the foundation for everything we do at Camp Timberline and we seek to provide this standard through the following areas –

- Staff Hiring & Training – We hire the best staff in the country through a rigorous 4-step screening process
- Staff to Camper Ratio – Your child is known and protected by staff 24/7. Our backpacking trips are divided into groups of ten campers, each trip with a male and female guide.
- Health Services – 24-hour health staff, in-depth arrival screening, sanitization procedures, and updated illness and disease prevention protocols in accordance with the Larimer County Health Department.
- Activities – Activities at Camp Timberline are regularly certified and accredited.
- Facilities – Certified by the State of Colorado.
- Food Service – Healthy and balanced with consideration for individual food allergies.

Our main goal is to share the transforming message of Jesus Christ with kids, and this can only be done if a child knows that they are in a trustworthy and safe environment. We are greatly concerned and proactive in evaluating our safety procedures every year. We do everything we can to make camp the best weeks of the summer.



HEALTH SERVICES – Each year we screen and hire Colorado licensed Registered Nurses, Nurse Practitioners and Medical Doctors to reside on camp property and oversee the Health Hut. It is our desire to see that your child receives the best health care and knowledgeable administration of medication while they are at camp. Along with a Healthcare Assistant, the Registered Nurse, Nurse Practitioner or Physician is available 24 hours a day for medical care of all campers, first aid, assessment, and dispensing of medication. The health team also monitors health and cleanliness standards, as well as promoting safety for all participants. In the event more extensive care is needed, campers will be treated at Estes Park Medical Center and/or Timberline Medical Clinic. These facilities are a 15-minute drive from camp. Any care or prescriptions required through local medical facilities will be billed under the camper's personal insurance and is not the liability of Camp Timberline. Camp Timberline's insurance is accident (not illness) insurance and secondary to the camper's health insurance.

EMERGENCY ACTION PLAN & COMMUNICATION – Camp follows state guidelines with regard to emergency response. These protocols are in place in the rare case that there is an emergency at camp. The RN/NP/MD will assess any injury or illness to a camper. If the situation can be resolved in the Health Hut, proper care will be given. If the situation needs greater attention, then there will be an emergency room or physician visit.

Parent/guardians will be notified if their camper:

- Is being pulled from their trip due to medical reasons
- Has been involved in an emergency.
- Requires outside care.
- Is being transported to a local clinic or hospital.*
- Has a temperature of 100 degrees or more.
- Has a symptom listed in the Illness Prevention Policy along with high temperature.
- Has stayed overnight in the Health Hut.
- Has a persistent health issue.

If an illness continues under the RN/NP/MD's care, the parent/guardian will be contacted to decide whether to send the camper home or to a local physician.

*If an emergency room or physician visit is needed, the parent/guardians will be notified right away. If the situation is a non-emergency, the parent/guardian will be given the option to either have the child taken to a local physician or be picked up for treatment at home.

MEDICATION – The Beyond Timberline Guides' first aid kits contain over the counter medication (i.e. Advil, Tums, etc.) so your child does not need to bring these items unless he/she takes a specific one each day. In compliance with state regulations, all medication brought to camp must be in the original prescription bottle or box with a doctor's orders for each item (please see form in this packet). We cannot accept unlabeled medication or items without a copy of your doctor's orders and will have to turn away these items. On Opening Day please plan to meet with our health staff so we can verify and document all medication, supplements, and vitamins brought to camp. All prescription medications will be kept in the First Aid kit of one of the guides, and given out as directed. On Closing Day your camper's medications will be packed in their luggage so you can be assured that it gets back home.

INHALER & EPI-PEN USAGE – Campers are allowed to possess and administer prescribed inhalers and Epi-Pens for routine, as needed or emergency use. Devices will be monitored by a BT Guide, stored in the First Aid kit. In the case of an anaphylactic reaction, a BT guide will assist in the administration of medication. Campers should come with an initial inhaler/Epi-Pen PLUS an additional "back-up" device to be kept in the BT Guide's First Aid kit. Any use of medication will be reported to the RN/NP/MD on duty for proper assessment of the camper and documentation.

ALLERGIES & DIETARY RESTRICTIONS – If your child has an allergy (drug, insect, plant, and/or food) or dietary restriction concern that could result in a reaction while at camp, we want our health staff and food service team to be knowledgeable about your child's situation. Please email kitchen@camptimberline.com to talk with a director about how to make this a positive and safe experience for your child. We must be notified of each medical and/or behavior condition prior to attendance. A Food Allergy Action Plan and Colorado Allergy and Anaphylaxis Emergency Care Plan must be completed and signed by your physician prior to your child's arrival at camp (forms included in this packet). Our Food Service Director is available for information on menus and advice on how to package meals sent to camp. All meal substitutions will need to be packaged and brought to camp as outlined in the Food Allergy Action Plan.

Beyond Timberline campers bringing their own food will be required to carry their personal items in a separate bear canister to avoid cross contamination.



FLYING TO CAMP? – Please schedule flights to arrive and depart from Denver International Airport (DIA). Campers MUST fly into DIA between 10 am and 2 pm on Opening Day and fly out between 1 pm and 5 pm on Closing Day. If your camper arrives before this time frame, you will need to make arrangements with the airline to have someone stay with your child until we arrive. If your camper arrives after this time frame, you will need to make arrangements with the Estes Park Shuttle for transportation to camp (shuttle information available upon request). A Camp Timberline staff member will meet your child at the main terminal entrance at the top of the escalators. They will have a Camp Timberline sign and will also be wearing a Camp Timberline staff shirt so they will be easily recognizable. If your child is flying as an unaccompanied minor and will be held at the gate until we arrive, please let us know ahead of time so that we can arrange for a pass to go to the gate to pick them up. If we do not have that information, we are assuming your child will meet us at the main terminal entrance. Camp Timberline shuttles are provided to and from DIA at a cost of \$25 each way. Flight itineraries MUST be completed via the online form by June 1st. We cannot be responsible for picking up your child if we do not have a flight itinerary on record. All Camp Timberline staff are trained in accordance with our Transportation Policy when operating shuttle vans, and campers are expected to follow passenger rules as communicated by those drivers for the safety of all concerned.

CAMPER MAIL – Camper mail such as letters, postcards or packages can be dropped off on Opening Day. Since your camper will be on the trail Monday morning through Friday early evening, he/she will not be able to receive any mail, email or packages until arriving back at camp on Friday evening.

CAMP STORE – Our Camp Timberline store is full of clothing, gifts, necessities, and snacks. Our campers love visiting the CT store! Campers are not allowed to have cash at camp, so we have a store credit program for them to use. If you would like to purchase store credit for your camper, please go to our online store: camp-timberline-store.myshopify.com and select "Store Credit". It will direct you to create an account - please create the account under your camper's name. Complete the prompts to purchase your store credit. Once purchased, you are all set! No additional steps necessary. The credit is tied to the account you created and your camper just needs to provide their name at checkout to use the funds. If you have previously purchased store credit with us, you can use your previous store account. Please note, if you have multiple children attending camp, a different email address will need to be used for each child's store credit account. This keeps the accounts separate and the funds will not be shared between siblings. The amount purchased will not allow for refunds, but any remaining balance can be used at the online store or for the following year. Please email store@camptimberline.com with any questions.

BIRTHDAYS – We celebrate birthdays with a dessert in the backcountry and enjoy it while watching the sunrise.

VISITATION/PHONE USE – Beyond Timberline guides are equipped with satellite phones. In case of emergency, either physical or otherwise, we will contact the office at our Estes Park location and you will be notified immediately. These phones are not to be used for any other incoming or outgoing calls.

SESSION PHOTOS AND VIDEO – Pictures of activities from each session will be posted on our secure photo site each week. You will be given the login information to have access and enjoy! In addition, you will receive a group picture on Closing Day. Each session's video will be accessible through Vimeo and emailed to you.

REMINDER ABOUT TRAIL BUDDY REQUESTS – We strive to honor ONE trail buddy request per camper. Priority will go to requests that are reciprocal. Our trips are balanced between those with requests and those without, gender and age.



LOST AND FOUND - Camp Timberline is not responsible for any lost items. Lost and found items will be displayed on a table in the lodge on Closing Day. Please be sure to check the table before leaving camp. All unclaimed items will be taken to the Fort Collins office and held for one week prior to being donated to local charities. We strongly advise parents/guardians to label all of their child's belongings, guide them on packing, and do not send anything valuable to camp.

BALANCE DUE – Balances are to be paid in full by March 15. Please log into your account and make your final payment online. If you prefer to pay by check, you can do that online as well through e-check. After March 15 we will begin charging all unpaid balances to the last credit card on file. This is a time consuming process so we appreciate your promptness in taking care of your balance in a timely manner.

CANCELLATION/WITHDRAWAL REFUND POLICY –

Camp Timberline greatly values each family's investment in camp. We strive to honor your funds and also cover fixed costs to make this the best experience for your child. Our cancellation policy as follows:

- If a camper cancels for any reason, the \$200 deposit is non-refundable.
- If a camper cancels for any reason prior to May 1st, all monies paid over and above the initial \$200 non-refundable deposit will be refunded.
- If a camper cancels for any reason after May 1st, no monies will be refunded.
- Camp Timberline will always try to work with camper families to reschedule the camper's session, pending availability.

CAMPER BEHAVIOR – Please refer to the Camper Health/Behavioral Policy for guidelines on successful participation at camp. If necessary, the Camp Director will contact the parent to discuss concerns regarding this policy and reserves the right to dismiss any camper who becomes in any way detrimental to the best interest of the other participants at camp. We cannot give refunds for dismissals that fall under these policy guidelines.

BULLYING POLICY - Camp Timberline is a place where each and every person is known and loved. Our core values promote inclusion, kindness, patience, positivity, gratitude, forgiveness, and safety. Therefore, behavior that contradicts these actions in the form of direct or indirect bullying that causes physical, verbal, social or emotional harm to a camper will **NOT BE TOLERATED** at Camp Timberline. A Camp Director will immediately address any incident of reported bullying and reserves the right to dismiss a camper from camp without refund based upon the severity of the behavior. Each incident will be evaluated and reviewed on a case by case basis.

CARING FOR OUR CAMPERS – Camp Timberline is licensed and regularly renewed by the Child Care Division of Colorado and required by law to report any suspected case of child abuse discovered while a child attends camp. Parents/guardians are also free to file a complaint with the Colorado Department of Human Services and the Division of Child Care by mailing to 1575 Sherman Street, Denver, CO 80203-1714 or calling 303-866-5958 or 1-800-799-5876.

WINTER ADDRESS –

430 Canyon Avenue, Fort Collins, CO 80521
Office – 970-484-8462

SUMMER ADDRESS –

1207 Longs Peak Road, Estes Park , CO 80517
Office – 970-586-7777

www.camptimberline.com
email – office@camptimberline.com



BEYOND TIMBERLINE EQUIPMENT LIST – PAGE 1

Welcome to Beyond Timberline! We look forward to having you with us at Camp Timberline this summer. Please take the time to read the following information regarding your equipment choices.

At Camp Timberline we provide all of the necessary wilderness equipment for Beyond Timberline. However, you will need to provide personal items in addition to the equipment we provide. If you have personal equipment (such as backpacks, sleeping bags, etc.) that you would like to use on your trip please feel free to bring them along! Our guides will inspect your gear and determine if it is suitable for your trip. Our guides may deem some equipment unfit for trail and will encourage use of Camp Timberline's equipment.

Due to our accommodations you need to limit your packing to one large duffel or a couple of modest duffels. While you pack, think of ways you can make everything as light as possible (i.e. a small bible, travel size sunscreen and/or bug spray, etc.). If you choose to bring your own pack make sure it is large enough to fit your own gear as well as group gear (food, tent, stove, etc.). We recommend a backpack that is 60 -75 liters.

Important! In addition to your gear, you will need street clothes to change into once your backpacking trip is over. You will also be in desperate need of a shower so we advise that you bring a towel, shampoo, conditioner, etc.

While making selections on gear, keep in mind that weather in Colorado can be extremely unpredictable and can change rapidly. Rain is likely and temperatures can vary dramatically. Because you will spend a week in the wilderness, you will need to bring enough layers to keep you comfortable no matter what conditions you may face. We have developed a list of personal items that will prepare you for any weather you may face.

If you have any questions or you would like more information regarding any of the items in the Equipment List, please contact us at (970) 484-8462, or office@camptimberline.com.

LOWER BODY LAYERS			
You will need 1-2 synthetic insulating layers. All layers should fit comfortably over each other so that they can be worn at the same time. If you tend to get cold easily, add a middle layer of mid-weight bottoms to the under layer and fleece pants.			
Check	Equipment	Quantity	Comments
	Base Layer (Mid-Weight Synthetic)	1	Mid-weight bottoms of high performance polyester, polypropylene, or Capilene®. Cotton is not acceptable.
	Hiking Pants	1	Expedition-weight bottoms that fit comfortably over the under layer bottoms.
	Fleece Pants (optional)	1	To go over your base layer while at camp. Side zippers make it easier to put on over boots.
	Rain Pants (optional)	1	Although not required, some people like to use rain pants in conjunction with a rain jacket
	Nylon Shorts	1	Loose-fitting nylon athletic / river shorts
	Underwear	2	Synthetic. If you choose to go without underwear, use nylon shorts with liners. Girls can wear what's comfortable; cotton, silk or synthetics.



BEYOND TIMBERLINE EQUIPMENT LIST – PAGE 2

UPPER BODY LAYERS			
Layering your clothes is an effective way to stay comfortable while in the backcountry. Combining different garments will allow you to achieve optimum insulation and protection from wind and rain. Synthetic and wool fibers insulate when wet. Avoid using cotton, as it does not insulate when wet, and takes a lot longer to dry out.			
Check	Equipment	Quantity	Comments
	Base Layer (Mid-Weight Synthetic)	1	Mid-weight underwear top made of wool, synthetic, or Capilene®.
	Middle Layer (Fleece Pullover)	1	Polyester fleece pullover, wool sweater, etc.
	Top Layer (Synthetic "Puffy" Jacket)	1	Synthetic full-length zip jacket. Fiberfill jacket of Polartec® 300 or equivalent weight.
	Rain Jacket	1	A sturdy, roomy waterproof jacket with a hood. Both coated nylon and breathable fabrics such as Gore-Tex® are acceptable.
	T-Shirt	1	A lightweight polyester, wool / Capilene®.

HEAD, NECK & HAND LAYERS			
Check	Equipment	Quantity	Comments
	Baseball Cap or Wide Brim Sun Hat	1	To protect ears and face from the sun.
	Balaclava (optional)	1	Full head and neck covering with an opening for the face.
	Wool or Fleece Hat	1	A warm hat for colder weather.
	Gloves	1	Ragg wool or synthetic (fleece).

SLEEPING GEAR			
Check	Equipment	Quantity	Comments
	Sleeping Bag	1	Synthetic-filled bags perform well in the variety of conditions we encounter. A 20° bag or one of close equivalent will suffice.
	Compression Bag	1	A compression stuff sack for your sleeping bag.
	Garbage Bags	2 or 3	Heavy-duty lawn and garden bags to help protect the contents of your backpack from water.
	Sleeping Pad	1	We provide ¾" closed-cell foam pads designed for ground insulation over comfort. If you wish to bring your own we recommend self-inflating sleeping mats. Thermarest and Insulmat are great brands.



BEYOND TIMBERLINE EQUIPMENT LIST – PAGE 3

MISCELLANEOUS ITEMS			
Check	Equipment	Quantity	Comments
	Bible	1	Very Important. Travel size.
	Water Bottle	2	At least 2 wide-mouth, quart or liter-size plastic bottles such as the Nalgene® brand. Having enough water is essential to feeling good in the backcountry.
	Plastic Bowl and Spoon	1	Tupperware with a lid works great. REI carries plastic sporks that are handy.
	Lip Balm	1	Stick, cream, or tube type moisturizing balm with sun protection factor (SPF) 15 or greater.
	Sunscreen	1	A 3 to 6 ounce tube with sun protection factor (SPF) 15 or greater.
	Bandannas	1 or 2	A few of these are always handy.
	Head Lamp/Flashlight	1	Durable and lightweight. Headlamps are popular. Bring spare batteries.
	Insect Repellent	1	Small bottles. No aerosol spray cans.
	Toiletries	1	Toothbrush, toothpaste, comb, brush, skin lotion. Travel or trial sizes are enough. Bring your own. (If applicable to girls, bring your own feminine products)
	Notepad and Pencil	1	A small, lightweight note pad is fine.
	Instant Hand Sanitizer	1	A 2 oz. bottle for keeping hands clean.
	Sunglasses	1	Any good quality sunglasses with 100% UV protection will work fine.
	Sunglass Retainers (optional)	1	Chums® or Croakies® for keeping track of your glasses or sunglasses.

FOOTWEAR			
Check	Equipment	Quantity	Comments
	Boots	1 pair	Sturdy leather heavy backpacking or light mountaineering boots with good ankle support. <i>See our suggestions below</i>
	Wool Socks	4 - 5 pair	Heavy ragg wool or heavy wool/polypropylene blend.
	Camp Shoes	1 pair	Light weight running, tennis, or cross-training athletic shoes to wear around camp.



BEYOND TIMBERLINE PACKING LIST – PAGE 4

Boot Recommendations

Medium-weight, off-trail backpacking/light mountaineering boots work best. This type of backpacking boot is constructed with a full grain leather upper and typically has a Vibram® rubber sole. These boots are designed for extended backpacking, provide good support for off-trail hiking with heavy packs, and usually require less break-in time than heavyweight mountaineering boots.

It is crucial to wear your boots before embarking on your backpacking trip with Beyond Timberline. Boots take time to break-in and form to your foot. If you choose to not wear your boots before your trip you risk having sore feet and/or blisters. OUCH!

There are tons of choices out there.. If it is your first time purchasing boots it is best to go to a store that carries a wide variety in order to try on multiple pairs. If you already own boots then it is not necessary to purchase additional ones.

OPTIONAL ITEMS			
Check	Equipment	Quantity	Comments
	Prescription Glasses and Contact Lenses	2 or 3 pairs	Bring a spare pair of glasses or lenses. Contact lens wearers should also bring a pair of glasses as backup.
	Book	1	A small paperback reading book.
	Camera	1	Avoid heavy lenses and elaborate set-ups. Disposable cameras work great.
	Camp Chair	1	Crazy Creek or one with Term-A-Rest fitting.

Group Equipment

All items listed below are provided by Beyond Timberline and shared among all expedition members.

Tents & Shelters	Maps & Compass	Camp Stoves	Bear Cans
First Aid Kits	Equipment Repair Kits	Fuel & Fuel Bottles	Trowels or Shovels
Reference Books	Cooking Gear		

Camp Timberline Equipment Available For Use

20 degree Synthetic Sleeping Bag

Therm-A-Rest Foam Sleeping Pad

75 Liter Backpack



DIRECTIONS TO CAMP

If you get lost, give us a call! 970-586-7777

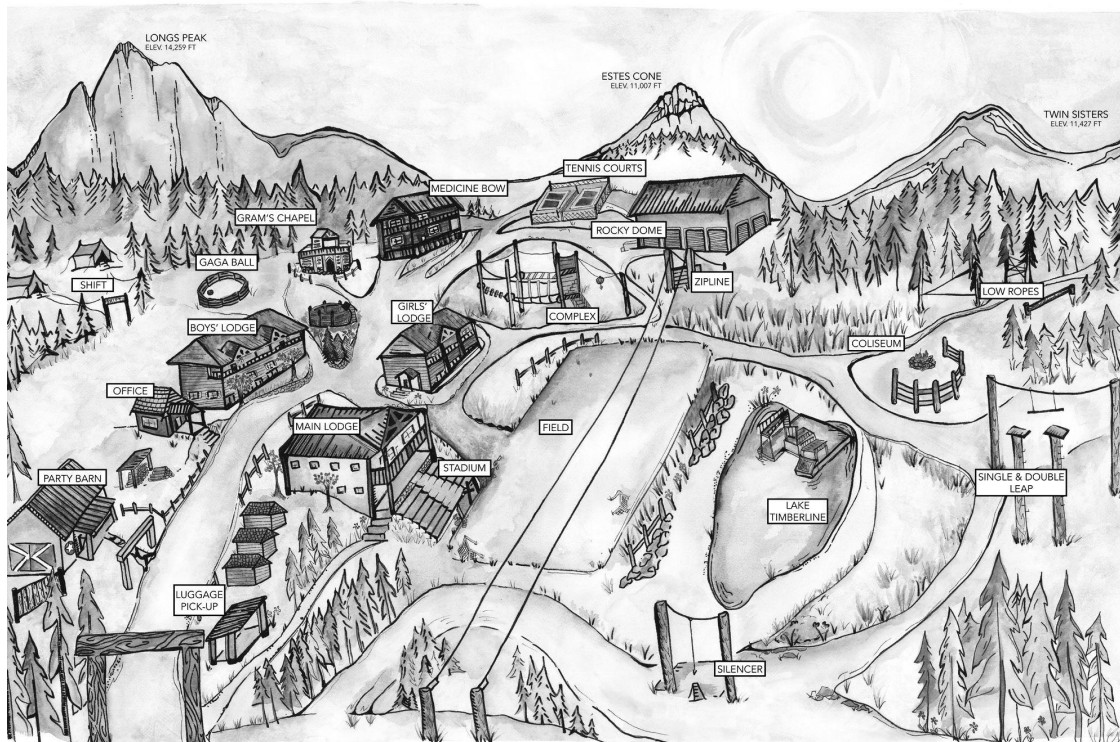
FROM DENVER

- Take I-25 North to Hwy 66
- Take Hwy 66 through Longmont to Lyons
- When in Lyons, turn left onto Hwy 7, going to Allenspark
- Stay on Hwy 7 until you come to Longs Peak Road (Mile Marker 9) (20-30 minutes)
- Turn left onto Longs Peak Road
- Drop down into the campground and follow it around to the right.
- We are located half way around the loop on the right.

FROM NORTHERN COLORADO

(DETOURS MAY STILL BE IN EFFECT FOR HWY 34)

- Take Hwy 34 in Loveland towards Estes Park
- When you reach Estes, turn left onto Hwy 36
- Follow the road to the right, which turns into Hwy 7
- Go 9 miles and turn right on Longs Peak Road
- Drop down into the campground and follow it around to the right.
- We are located half way around the loop on the right.



2024 DOCTORS STATEMENT OF PARTICIPATION FOR BASE CAMP, BEYOND TIMBERLINE and SHIFT



CAMPER HEALTH EXPECTATIONS FOR SUMMER PROGRAM –

All campers should be able to participate in athletic activity at 9,400 feet above sea level. A licensed Medical Doctor/NP/RN will be available on the property when campers are in session and more extensive care is provided by the Estes Park Hospital or Timberline Medical Clinic, which are located within 25 minutes of camp. Camp Timberline expects campers to have their health and behavior well managed.

Please see our Health/Behavioral Statement for more information.

I confirm that within the preceding 24 months a health screening has been performed on:

CAMPER NAME: _____

Date Examined: _____ Height: _____ Weight: _____ Blood Pressure: _____

The above-named camper is current on his/her DTaP/Tdap and/or DT/Td immunization. YES / NO

In my opinion, the camper named above is in satisfactory physical condition and capable of active participation in a regular camp program. YES / NO

The camper is under the care of a physician for the following conditions (please be specific and list any physical limitations, health concerns, or special care needed with current treatment): _____

With camp's altitude of 9,400 feet, has the camper been diagnosed with a medical condition or disease of the blood, respiratory, metabolic, or other system, such as sickle cell disease, COPD/emphysema, etc. that would limit participation? YES / NO

If YES, please explain: _____

Does the camper use an inhaler, EpiPen, or other emergency medication? YES / NO

If YES, please list the items that the camper is authorized to carry with them at all times: _____

Please list any known drug reactions and allergies that the camper has:

Are there over the counter medications that the camper may NOT have (please refer to the camp list on the next page)? YES / NO

If YES, please list those OTC items the camper may NOT have:

*I have also provided the camper's Certificate of Immunization or Statement of Exemption as required by Camp Timberline and Colorado state law.

REQUIRED SIGNATURE OF PHYSICIAN/NP/RN: _____

Date: _____

PHYSICIAN/NP/RN NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

Camper's Session(s): _____



HEALTH HUT OVER THE COUNTER MEDICINE – PAGE 2 of DOCTOR'S STATEMENT

Please Note: All medication is given per instruction, allergies are verified, and only age-appropriate for the camper. These medications are available on an as-needed basis and note intended for daily or weekly use.

Benadryl (liquid & tablets)

Campho Phenique

Cepacol

Cetaphil

Claritin (loratadine)

Dayquil (acetaminophen, dextromethorphan HBr, phenylephrine)

Delsym (dextromethorphan)

Hydrocortisone Cream

Ibuprofen (liquid & tablets)

Liquid IV (electrolyte powder)

Melatonin

Miralax

Nasal Saline Spray

Nyquil *acetaminophen, doxylamine succinate, dextromethorphan HBr)

Pepcid (famotidine)

Throat Lozenges

Robitussin (guaifenesin)

Triple Antibiotic Ointment

Tylenol (acetaminophen)

Tums

Sunscreen Provided by Camp: Rocky Mountain Sunscreen SPF 50

*Please send your own sunscreen to camp but this will be available as needed.

CAMPER PRESCRIPTIONS: These items will need to be submitted to the RN/NP/MD with Doctor's Orders Form for each item in the ORIGINAL container on Opening Day. If your camper takes any of these over the counter medications regularly, please bring an adequate supply for their time at camp.

DOCTORS ORDERS - PRESCRIPTIONS & REGULAR OTC



REQUEST FOR MEDICATION/ MEDICAL PROCEDURES TO BE GIVEN AT CAMP TIMBERLINE

State child care regulations require prescriptions, regular over-the-counter medication (OTC), and any OTC not on the approved Health Hut list to be in the original container and doctor's orders concerning the following appropriateness and method of administration to be submitted with the information below.

IMPORTANT NOTES: If your child is not bringing one of these items, you do NOT need to complete this form.

If your physician's office or school has a version of this available, a copy can be given to us in place of this form on Opening Day.

Doctor's Orders are required for EACH prescription, regular OTC, and any OTC not on camp's approved Health Hut list.

Camper Name: _____ Date of Birth: _____

Session: _____

Name of Medication/Medical Procedure: _____

Dosage: _____ Time Each Day (please circle): Morning Lunch Dinner Bedtime

Date to Begin: _____ Date to End: _____

Medical Diagnosis: _____

Expected Action of Medication/ Medical Procedure/Side Effects (please write on reverse if additional space is needed or attach additional pages:)

The undersigned understand and agree that the above medication/medical procedure may be administered by the camp RN/NP/MD in accordance with the above instructions.

PHYSICIAN:

Name: _____ Phone: _____

Physician Signature: _____ Date: _____

PARENT/LEGAL GUARDIAN:

I hereby give permission for the camp to administer the medication and treatments as prescribed above.

I also give permission for the camp to contact the above health care provider regarding the administration of this medication/medical procedure and share the above the information with pertinent camp staff.

Name: _____ Phone: _____

Parent Signature: _____ Date: _____



Certificate of Immunization

6 CCR 1009—The Infant Immunization Program and Immunization of Students Attending School
Schools shall have on file an official Certificate of Immunization for every student enrolled.

COLORADO LAW REQUIRES THAT THIS FORM BE COMPLETED FOR EACH STUDENT ATTENDING COLORADO SCHOOLS

Name _____ Date of Birth _____

Parent/Guardian _____

COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT—CERTIFICATE OF IMMUNIZATION

Vaccine		Enter the month, day and year each immunization was given						Titer Date
Hep B	Hepatitis B							
DTaP	Diphtheria, Tetanus, Pertussis (pediatric)							
DT	Diphtheria, Tetanus (pediatric)							
Tdap	Tetanus, Diphtheria, Pertussis							
Td	Tetanus, Diphtheria							
Hib	<i>Haemophilus influenzae</i> type b							
IPV/OPV	Polio							
PCV	Pneumococcal Conjugate							
MMR	Measles, Mumps, Rubella							
Measles	Measles							
Mumps	Mumps							
Rubella	Rubella							
Varicella	Chickenpox					Provider Documentation Date of Disease	Positive Screen Date	
Vaccines recorded below this line are recommended. Recording of dates is encouraged.								
HPV	Human Papillomavirus							
Rota	Rotavirus							
MCV4/MPSV 4	Meningococcal							
Hep A	Hepatitis A							
Flu	Influenza							
Other								

THIS SECTION CAN BE COMPLETED BY CHILD CARE/SCHOOL/HEALTH CARE PROVIDER

- A) Child Care Up to Date**
Up to date through 6 months of age for Colorado School Immunization Requirements
Update Signature _____ Date _____
- B) Child Care Up to Date**
Up to date through 18 months of age for Colorado School Immunization Requirements
Update Signature _____ Date _____
- C) Child Care/Pre-school/Pre-K***
Up to date for Child Care/Pre-School/Pre-K for Colorado School Immunization Requirements
Update Signature _____ Date _____
- D) Complete for K–5th Grade**
Up to date for K–5th Grade for Colorado School Immunization Requirements
Update Signature _____ Date _____

* If age 4 years and fulfills Requirements for Pre-School & Kindergarten, check BOTH Boxes C and D.

Name _____ Date of Birth _____

Parent/Guardian _____

**STATEMENT OF EXEMPTION TO IMMUNIZATION LAW
(DECLARACIÓN RESPECTO A LAS EXENCIONES DE LA LEY DE VACUNACIÓN)**

**IN THE EVENT OF AN OUTBREAK, EXEMPTED PERSONS MAY BE SUBJECT TO EXCLUSION FROM SCHOOL AND TO QUARANTINE.
SI SE PRESENTA UN BROTE DE LA ENFERMEDAD, ES POSIBLE QUE A LAS PERSONAS EXENTAS SE LES PONGA EN CUARENTENA O SE LES EXCLUYA DE LA ESCUELA.**

MEDICAL EXEMPTION: The physical condition of the above named person is such that immunization would endanger life or health or is medically contraindicated due to other medical conditions.

EXENCIÓN POR RAZONES MÉDICAS: El estado de salud de la persona arriba citada es tal que la vacunación significa un riesgo para su salud o incluso su vida; o bien, las vacunas están contraindicadas debido a otros problemas de salud.

Medical exemption to the following vaccine(s):

La exención por razones médicas aplica a la(s) siguiente(s) vacuna(s):

Hep B DTaP Tdap Hib IPV PCV MMR VAR

Signed (Firma) _____ Date (Fecha) _____
Physician (Médico)

RELIGIOUS EXEMPTION: Parent or guardian of the above named person or the person himself/herself is an adherent to a religious belief opposed to immunizations.

EXENCIÓN POR MOTIVOS RELIGIOSOS: El padre o tutor de la persona arriba citada, o la persona misma, pertenece a una religión que se opone a la inmunización.

Religious exemption to the following vaccine(s):

Exención por motivos religiosos de la(s) siguiente(s) vacuna(s):

Hep B DTaP Tdap Hib IPV PCV MMR VAR

Signed (Firma) _____ Date (Fecha) _____
Parent, guardian, emancipated student/consenting minor
(Padre, tutor, estudiante emancipado o consentimiento del menor)

PERSONAL EXEMPTION: Parent or guardian of the above named person or the person himself/herself is an adherent to a personal belief opposed to immunizations.

EXENCIÓN POR CREENCIAS PERSONALES: Las creencias personales del padre o tutor de la persona arriba citada, o la persona misma, se oponen a la inmunización.

Personal exemption to the following vaccine(s):

Exención por creencias personales de la(s) siguiente(s) vacuna(s):

Hep B DTaP Tdap Hib IPV PCV MMR VAR

Signed (Firma) _____ Date (Fecha) _____
Parent, guardian, emancipated student/consenting minor
(Padre, tutor, estudiante emancipado o consentimiento del menor)



Immunization

Non-Medical Exemption Form (Religious and Personal Belief)

Vaccines are one of the greatest public health achievements of the past century and save an estimated 3 million children's lives every year. The Colorado Department of Public Health and Environment strongly supports vaccination as one of the easiest and most effective tools in preventing diseases that can cause serious illness and even death. For nearly all children, the benefits of preventing disease with a vaccine far outweigh the risks. Declining to follow the advice of a health care provider, or public health official who has recommended vaccines may endanger an unvaccinated child's health and others who come into contact with him/her. Some vaccine-preventable diseases are common in other countries and unvaccinated children could easily get one of these diseases while traveling or from a traveler.

Colorado law C.R.S. § 25-4-902 requires all students attending any school in the state of Colorado to be vaccinated against certain vaccine-preventable diseases as established by Colorado Board of Health rule 6 CCR 1009-2, unless an official exemption form is filed. This law applies to students attending child care facilities licensed by the Colorado Department of Human Services, public, private and parochial kindergarten, elementary and secondary schools through 12th grade, and colleges or universities. Prior to kindergarten, an official non-medical exemption form must be filed each time a student is due for vaccines according to the schedule developed by the Advisory Committee on Immunization Practices.^{1,2} From kindergarten through 12th grade, an official non-medical exemption form must be filed every year during the student's school enrollment/registration process¹. **Students with an exemption may be kept out of child care or school during a disease outbreak.**

Please complete all required fields below; incomplete forms will not be accepted. *All fields are required unless noted optional.*

Type of Non-Medical Exemption Claimed: <input type="checkbox"/> Personal Belief <input type="checkbox"/> Religious

Student Information:

Last Name:	First Name:	(optional) Middle Name:
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male	Date of Birth:	
Street #:	Street Name:	Street Type (e.g. Ave.):
Unit #:	P.O. Box:	
City:	State: CO	Zip Code:
Email Address:	County:	
Phone Number:	<input type="checkbox"/> Home <input type="checkbox"/> Cell	

Parent/Guardian Completing This Form: Check if an emancipated student or student over 18 years old

Last Name:	First Name:	(optional) Middle Name:
Relationship to student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian		
Street #:	Street Name:	Street Type (e.g. Ave.):
Unit #:	P.O. Box:	
City:	State: CO	Zip Code:
Email Address:	County:	
Phone Number:	<input type="checkbox"/> Home <input type="checkbox"/> Cell	

School/Licensed Child Care Facility Information:

School Name/Licensed Child Care Facility:		
School District:	<input type="checkbox"/> Check if Not Applicable	
Address:		
City:	State: CO	Zip Code:
Phone Number:	Grade of Student:	

¹ Colorado Board of Health rule 6 CCR 1009-2: <http://www.sos.state.co.us/CCR/GenerateRulePdf.do?ruleVersionId=6437&fileName=6%20CCR%201009-2>.

² 2016 Recommended Immunizations from Birth through 6 Years Old: www.cdc.gov/vaccines/parents/downloads/parent-ver-sch-0-6yrs.pdf. Based on this schedule, a non-medical exemption form would be submitted at 2 months, 4 months, 6 months, 12 months and 18 months of age.

Vaccine Preventable Disease Information

The information provided below is to ensure parents/guardians/students are informed about the risks of not vaccinating.

Diphtheria, tetanus, pertussis (DTaP, Tdap) - Unvaccinated children may be at increased risk of developing diphtheria, tetanus and/or pertussis if exposed to these diseases. Serious symptoms and effects of diphtheria include heart failure, paralysis, breathing problems, coma, and death. Serious symptoms and effects of tetanus include “locking” of the jaw, difficulty swallowing and breathing, seizures, painful tightening of muscles in the head and neck, and death. Serious symptoms and effects of pertussis (whooping cough) include severe coughing fits that can cause vomiting and exhaustion, pneumonia, seizures, brain damage, and death. For more information: <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/dtap.pdf> and <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/tdap.pdf>

Haemophilus influenzae type b (Hib) - Unvaccinated children may be at increased risk of developing invasive Hib disease if exposed to this disease. Serious symptoms and effects include bacterial meningitis, pneumonia, severe swelling in the throat, permanent neurologic damage including blindness, deafness, and mental retardation, infections of the blood, joints, bones, and covering of the heart, and death. For more information: <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/hib.pdf>

Hepatitis B - Unvaccinated children may be at increased risk of developing hepatitis B if exposed to this disease. Serious symptoms and effects include jaundice, life-long liver problems such as liver damage, scarring, liver cancer, and death. For more information: <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/hep-b.pdf>

Inactivated poliovirus (IPV) - Unvaccinated children may be at increased risk of developing polio if exposed to this disease. Serious symptoms and effects include paralysis of muscles that control breathing, meningitis, permanent disability, and death. For more information: <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/ipv.pdf>

Measles, mumps, rubella (MMR) - Unvaccinated children may be at increased risk of developing measles, mumps, and/or rubella if exposed to these diseases. Serious symptoms and effects of measles include pneumonia, seizures, brain damage, and death. Serious symptoms and effects of mumps include meningitis, painful swelling of the testicles or ovaries, sterility, deafness, and death. Serious symptoms and effects of rubella include rash, arthritis, and muscle or joint pain. If a pregnant woman gets rubella, she could have a miscarriage or her baby could be born with serious birth defects such as deafness, heart problems, and mental retardation. For more information: <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/mmr.pdf>

Pneumococcal conjugate (PCV13) or polysaccharide (PPSV23) - Unvaccinated children may be at increased risk of developing pneumococcal disease if exposed to this disease. Serious symptoms and effects include pneumonia, lung infections, blood infections, meningitis and death. For more information: <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/pcv13.pdf> and <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/ppv.pdf>

Varicella (chickenpox) - Unvaccinated children may be at increased risk of developing varicella if exposed to this disease. Serious symptoms and effects include severe skin infections, pneumonia, brain damage, and death. For more information: <http://www.cdc.gov/vaccines/hcp/vis/vis-statements/varicella.pdf>

Required Vaccines for School Entry - Place an “X” next to each vaccine you are declining.

<input type="checkbox"/>	Diphtheria, tetanus, pertussis (DTaP)	<input type="checkbox"/>	Inactivated poliovirus (IPV)
<input type="checkbox"/>	Tetanus, diphtheria, pertussis (Tdap)	<input type="checkbox"/>	Measles, mumps, rubella (MMR)
<input type="checkbox"/>	Haemophilus influenzae type b (Hib)	<input type="checkbox"/>	Pneumococcal conjugate (PCV13) or polysaccharide (PPSV23)
<input type="checkbox"/>	Hepatitis B	<input type="checkbox"/>	Varicella (chickenpox)

I am the parent/guardian of the above-named student or am the student himself/herself (emancipated or over 18 years of age) and am declining the vaccine(s) indicated above due to a religious or personal belief that is opposed to vaccines. The information I have provided on this form is complete and accurate.

- I may change my mind at any time and accept vaccination(s) for my child/myself in the future.
- I can review evidence-based vaccine information at www.colorado.gov/cdphe/immunization-education, or www.ImmunizeforGood.com for additional information on the benefits and risks of vaccines and the diseases they prevent.
- I can contact the Colorado Immunization Information System (CIIS) at www.ColoradoIIS.com or my health care provider to locate my child’s/my immunization record.³

I acknowledge that I have read this document in its entirety.

Parent/Guardian/Student (emancipated or over 18 yrs old) signature: _____ Date: _____

I authorize my/my student’s school to share my/my student’s immunization records with state/local public health agencies and the Colorado Immunization Information System, the state’s secure, confidential immunization registry.

Parent/Guardian/Student (emancipated or over 18 yrs old) signature: _____ Date: _____

³ Under Colorado law, you have the option to exclude your child’s/your information from CIIS at any time. To opt out of CIIS, go to: www.colorado.gov/cdphe/ciis-opt-out-procedures. Please be advised you will be responsible for maintaining your child’s/your immunization records to ensure school compliance.

FOOD ALLERGY ACTION PLAN



In an effort to provide the safest dining experience for the campers, we abide by this policy to accommodate kids who have dietary allergies. If your child has dietary allergies, we ask that you take the following steps.

1. If your child has anaphylactic reactions, it is mandatory that your child's MD/NP/RN complete the Colorado Allergy and Anaphylaxis Emergency Care Plan (on second page) and note all dietary allergies before your child can attend camp.
2. A menu can be requested after May 1st. We ask that parents view the menu and if necessary provide alternatives to foods their camper cannot have if necessary. In order to ensure safety, we also ask that families who are providing food prepare the components of the meal as much as possible prior to their arrival at camp. We will have a microwave, toaster, refrigerator and freezer available for cooking and storing food items at Base Camp. Please label each container with the camper's name and meal it is replacing so that it can be prepared for them to eat.
3. Please bring this form completed with you on Opening Day. We ask that you also discuss your camper's allergy/restrictions with the kitchen staff upon arrival.
4. Facility Statement: Food brought to camp will be stored and prepared separately from our regular inventory. However, please note that our facility is not allergen-free and the kitchen and dining hall will process and serve other foods that contain allergens.
5. Snack Shack: Camp opens a Snack Shack daily to campers and this store sells various candy, ice cream, and soft drink items. If your child is allergic to items sold at the Snack Shack, we ask that parents/guardians review the store with their child to discuss what can and cannot be eaten.
6. If you should need further assistance, wish to speak to someone regarding your child's allergies, have questions about Beyond Timberline meals or would like the menu, please email kitchen@camptimberline.com.

Camper Name: _____ Dietary Allergy(ies) or Restrictions: _____

Day	Breakfast	Lunch	Dinner
Sunday	X	X	
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday		X	X

Camper's Cabin/Group: _____

Assigned Counselor(s): _____

See Next Page for Allergy Emergency Care Plan >

Colorado Allergy and Anaphylaxis Emergency Care Plan and Medication Orders

Student's Name: _____ D.O.B. _____ Grade: _____

School: _____ Teacher: _____

ALLERGY TO: _____

HISTORY: _____



Asthma: YES (higher risk for severe reaction) NO

◇ STEP 1: TREATMENT ◇

SEVERE SYMPTOMS: Any of the following:

- LUNG: Short of breath, wheeze, repetitive cough
- HEART: Pale, blue, faint, weak pulse, dizzy,
- THROAT: Tight, hoarse, trouble breathing/swallowing
- MOUTH: Significant swelling of the tongue and/or lips
- SKIN: Many hives over body, widespread redness
- GUT: Repetitive vomiting, severe diarrhea
- OTHER: Feeling something bad is about to happen, confusion

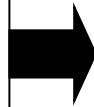


1. INJECT EPINEPHRINE IMMEDIATELY

2. Call 911 and activate school emergency response team
 3. Call parent/guardian and school nurse
 4. Monitor student; keep them lying down
 5. Administer Inhaler (quick relief) if ordered
 6. Be prepared to administer 2nd dose of epinephrine if needed
- *Antihistamine & quick relief inhalers are not to be depended upon to treat a severe food related reaction . **USE EPINEPHRINE**

MILD SYMPTOMS ONLY:

- NOSE: Itchy, runny nose, sneezing
- SKIN: A few hives, mild itch
- GUT: Mild nausea/discomfort



1. Alert parent and school nurse
2. Antihistamines may be given if ordered by a healthcare provider,
3. Continue to observe student
4. If symptoms progress **USE EPINEPHRINE**
5. Follow directions in above box

DOSAGE: Epinephrine: inject intramuscularly using auto injector (check one): 0.3 mg 0.15 mg

If symptoms do not improve _____ minutes or more, or symptoms return, 2nd dose of epinephrine should be given

Antihistamine: (brand and dose) _____

Asthma Rescue Inhaler: (brand and dose) _____

Student has been instructed and is capable of carrying and self-administering own medication. Yes No

Provider (print) _____ Phone Number: _____

Provider's Signature: _____ Date: _____

If this condition warrants meal accommodations from food service, please complete the medical statement for dietary disability

◇ STEP 2: EMERGENCY CALLS ◇

1. If epinephrine given, **call 911**. State that an allergic reaction has been treated and additional epinephrine, oxygen, or other medications may be needed.
2. Parent: _____ Phone Number: _____
3. Emergency contacts: Name/Relationship Phone Number(s)
 - a. _____ 1) _____ 2) _____
 - b. _____ 1) _____ 2) _____

EVEN IF PARENT/GUARDIAN CANNOT BE REACHED; DO NOT HESITATE TO ADMINISTER EMERGENCY MEDICATIONS

I give permission for school personnel to share this information, follow this plan, administer medication and care for my child and, if necessary, contact our health care provider. I assume full responsibility for providing the school with prescribed medication and delivery/monitoring devices. I approve this Severe Allergy Care Plan for my child.

Parent/Guardian's Signature: _____ Date: _____

School Nurse: _____ Date: _____

To be completed by healthcare provider



Behavioral Health Management Overnight Camp Programs

The safety and health of your camper is first priority at Camp Timberline. Our location, environment and staff availability are how we determine the best scenario in meeting camper medical and behavioral needs. We want it to be a successful and safe experience for each camper. Therefore, our staff must be notified of each medical and/or behavior condition prior to attending camp. Each condition is considered on a case by case basis and final acceptance is at the sole discretion of the Camp Director after consultation with the medical team.

These conditions may be one of the following:

Medical and/or Dietary:

These are conditions that require careful monitoring of the camper's physical condition.

- Medical Concerns: Diabetes, Cystic Fibrosis, Hemophilia, Epilepsy, and heart conditions need to be reviewed by our directors.
- Dietary Concerns: Celiac Disease, peanut allergies and dairy allergies need to be reviewed with our directors and food service staff.

Program Restrictions:

- For overnight camp programs, any food items required outside of the regular camp menu will need to be brought separately by the camper, labeled by day and meal, and stored in a cooler for the food service team to prepare. A Food Allergy Action Plan must be completed during registration and discussed with a director prior to arrival.
- Due to the remote locations and rustic meal plan for our backpacking program (Beyond Timberline), campers who have diabetes and/or severe food allergies should consider a different program.

Social/Emotional/Behavioral:

These are conditions in which the camper and the lives of those around them are impacted.

- Depression, Anxiety, Suicidal Tendency, Learning Disability, Language Delay, Observed Behavior Challenges, Autism, Asperger's, and Down's Syndrome are some examples.

Essential Functions of a Camp Timberline Camper:

Ultimately, each child is expected to thrive within the Essential Functions of Camp Timberline as defined below.

- Function Independently – In a remote, rustic environment for a full week without requiring one-on-one supervision. All health and behavioral issues need to be self-managed in a successful way.
- Live Cooperatively with Others – Campers must be able to effectively interact in a group-based or community living environment.
- Be Attentive and Follow Directions – Campers need to respond well to authority and follow directions from the counseling staff over a sustained period of time. Safety is priority and each camper is responsible to follow the guidelines and rules set forth by the Camp Timberline staff.
- Maintain Physical Activity at 9,400 Feet Above Sea Level - Our program is very active and physically challenging for campers. Daily activities include 3 hours of sports and mountain adventure at a higher altitude. Campers must be able to engage in activities both indoors and outdoors within these conditions, on land and water.

Bullying:

Camp Timberline is a place where each and every person is known and loved. Our core values promote inclusion, kindness, patience, positivity, gratitude, forgiveness and safety. Therefore, behavior that contradicts these actions in the form of direct or indirect bullying that causes physical, verbal, social or emotional harm to a camper will NOT BE TOLERATED at Camp Timberline. A Camp Director will immediately address any incident of reported bullying and reserves the right to dismiss a camper from camp without refund based upon the severity of the behavior. Each incident will be evaluated and reviewed on a case-by-case basis.

Overnight Camp Illness Prevention & Health Policy



Camp Timberline is dedicated to keeping our campers and staff as healthy as possible while they are on camp property. As such, we continue to take a proactive stance on all communicable and influenza-like illnesses. In accordance with CDC resources, the American Camping Association (ACA), the Association of Camp Nursing (ACN), as well as our state and local health department guidelines, the following procedures have been put in place to minimize the spread of illness and are subject to change with fluctuations in our county and state.

- Upon arrival, campers will receive a temperature reading along with a 24-Hour Health Screening form to address current symptoms, exposure, and medication.
- If a camper has **ONE** of the **MAJOR** symptoms below, the camper will be immediately isolated and may be sent home as recommended by our health staff and county health department.
 - a. New or worsening cough or
 - b. Shortness of breath or difficulty breathing or
 - c. GI Issues (nausea/vomiting/diarrhea) or
 - d. Temperature of 100.4° or greater
- If a camper has **TWO** of the **MINOR** symptoms below, the camper will be evaluated by our health staff, deferring to the most current county health department guidelines to determine the appropriate next steps:
 - a. Runny nose or congestion
 - b. Headache
 - c. Sore throat
 - d. Does not feel well (achy/fatigue)
- If a camper is placed in isolation, the parent/guardian will be notified to pick up their child.
- If a camper is sent home to isolate, he/she may return for a different session during the current summer, pending availability.

Other Camp Safety Measures:

- Campers are monitored by their counselors throughout the week for any symptoms.
- Staff will be pre-screened before arrival and follow all public health guidelines while employed.
- Staff are educated on the importance of hand washing and guide their campers in this effort throughout the day.
- Alcohol based hand cleaner is provided, as well as soap in each cabin and hand-washing stations around camp.
- Increased ventilation is provided in the common areas of camp and in each cabin.
- The common camp areas and cabins will be cleaned and sanitized regularly by our staff.

Safe Re-Entry to Camp: Campers may return for a different session during the current summer pending availability. Camp Timberline's health team will need to be contacted to verify the camper is healthy enough to attend camp.

For other illnesses, a camper may return if symptoms are improving, Camp Timberline's health staff have been consulted, and the camper is fever-free for 24 hours without fever reducing medications, unless the fever is caused by an illness that requires them to stay home longer.

Agency Connections for More Information:

National: Center for Disease Control & Prevention - www.cdc.gov and American Camp Association – www.acacamps.org

State: Colorado Department of Public Health - www.cdphe.state.co.us

Local: Larimer County Department of Public Health - www.larimer.org/health

Parent/Guardian Agreement: I have read and agree to the Camp Timberline Illness Prevention & Health policy.

Parent/Guardian Signature

Date

Updated 4-5-23