

TEEN WINTER CAMP 2025

FEBRUARY 28- MARCH 2, 2025

(Registration deadline is February 21, 2025)

Welcome!! Teens who are 12-18 years of age/ 6th-12th grade as of January 1, 2025 may attend. Teens do not have to be involved in 4-H to participate in Teen Winter Camp.

Campers will arrive at camp on Friday February 28th before dark. Our bus will pick teens up at three stations: Flying J in Twin Falls (Jerome), Valley Country Store in Shoshone (North Side of Railroad Tracks), & Albertsons in Hailey (*see bus schedule on following pages*). We encourage teens to ride the bus, however parents may transport their teen to camp.

The Central Idaho 4-H Camp is located 17 miles North of Ketchum, ID (mile marker 146). Winter Camp is accessible only by snowcat, ski's, or snowshoes. The phone number at the camp is **208-726-4519**.

****Please note that you must have a calling card to call out FROM camp.**

*Registration is \$100.00, including transportation.

*Registration fees cover the cost of staying at the camp, hot meals, snacks and activities.

***If you would like to come but cannot afford the registration, please call Don or Darren – contact information is on page 2. Limited amounts of scholarships may be available.**

What to Bring:

- **Limit your baggage.** Everything, including drinking water has to be brought into camp by the snowcat.
- Plenty of warm clothing
- A waterproof coat, hat, boots and gloves are REQUIRED. Bring EXTRA!!
- Sleeping bag and pillows. Bring at least one extra blanket.
- Flashlight with new batteries and extra batteries.
- Backpack and/or fanny pack with **sunscreen**, and water bottle.

Please have luggage, sleeping bags and pillows in WATER RESISTANT BAGS AND BRING EXTRA BAGS FOR THE RETURN TRIP OUT OF CAMP ON SUNDAY. HEAVY DUTY GARBAGE BAGS WORK GREAT!

PLEASE LABEL THE OUTSIDE OF ANY WATER RESISTANT BAG WITH THE CAMPER'S NAME – DUCT TAPE AND A PERMANENT MARKER ARE PREFERRED

****Also, keep coats, boots, snow pants, hats and gloves handy. When teens get to camp, they will ride on a sled pulled by the snowcat into camp. The ride will be mighty chilly and wet without warm and waterproof clothes.**

RESPONSIBILITIES:

- All campers and counselors will show respect to each other.

- No inappropriate language, name calling, degrading others or disrespectful actions will be tolerated.
DO NOT BRING ILLEGAL SUBSTANCES, TOBACCO, ALCOHOLIC BEVERAGES, FIREARMS, KNIVES OR FIREWORKS TO CAMP, INCLUDING VAPING DEVICES.
- Teens should conduct themselves as intelligent, responsible and mature individuals at all times.
- This camping experience is fun, but not without responsibilities. A major cooperative effort will be asked of all campers and adults in cooking, cleaning and other responsibilities.
- If a problem arises, parents will be called from camp and teens will be sent home at the parents' expense.
- Adult chaperones must know where you are at all times.

RULES:

- Campers stay in the heated lodge.
- No boys upstairs or girls downstairs at night (except to go to the restroom and you must have a buddy).
- Hands visible at all times.
- Water is at a premium, do not waste it. **But please drink lots of it!!!**
- Everyone must sign up for kitchen duty. This includes set-up and clean-up.
- All campers are to stay with their assigned activities.
- Campers must stay within set Teen Winter Camp boundaries.
- Campers must participate in scheduled activities.
- Do not leave the area without an adult present.
- Buddy system at all times when out of the lodge!! (NO mixed buddy systems).
- Make sure you close the lodge door when you go through it.
- No YELLOW snow ... ☺
- Keep sleeping bags/blankets away from the fireplace and heaters.
- You **MUST** wear appropriate clothing at ALL times.
- No running or horseplay in the lodge, the floor is slippery when wet.
- No snow in the lodge.
- The snowcat and snow machines are for adult/emergency use, please do not touch!
- If you need something, just ask, we are always willing to help.
- Please clean up after yourself.
- **PLEASE KEEP YOUR SLEEPING AREA CLEANED UP.**

CAMP BOARD & VOLUNTEERS ARE NOT RESPONSIBLE FOR LOST OR STOLEN ITEMS.

The purpose of Teen Winter Camp is to provide positive youth development, to meet the needs of young people and to experience belonging, mastery, independence, and generosity.

If you have any questions, please contact:

Don Van Kleck, Central Idaho 4-H Camp Board President - 208-731-8526

Darren Taber, Winter Camp Coordinator – 208-308-2830

PLEASE INCLUDE THE FOLLOWING ITEMS WITH YOUR APPLICATION:

1. **Registration – page 5**
2. **Health information form – Pages 6-7**
3. **Acknowledgement of Risk and Waiver of Liability/ Parent/Guardian Permission – Pages 8-9**
4. **Check or Money Order for camp registration - \$100.**
Make checks payable to: Central Idaho 4-H Camp



The University of Idaho is an equal opportunity/affirmative action employer and educational organization. We offer our programs to persons regardless of race, color, national origin, gender, religion, age, sexual orientation, or disability. In

compliance with the Americans with Disabilities Act of 1990, those requesting reasonable accommodations need to contact a county extension office.

Pickup Schedule

***Flying J: 2:00 p.m. *Shoshone Valley Co Op: 3:00 p.m. *Albertsons in Hailey: 4:15 p.m.**

TENTATIVE SCHEDULE:

***FRIDAY, February 28th**

BUS LOADING – SEE PICKUP SCHEDULE ABOVE

6:00 p.m.	Arrive at Camp, get settled, sign up for kitchen duties
6:30	Camp Orientation
7:00	Dinner
8:00	Campfire Activities/S'mores
12:00 midnight	Lights Out

***SATURDAY, March 1st**

7:00 a.m.	Breakfast
9:00 – 11:30	Activities/Lesson
11:30 – 12:30	Lunch
12:30 – 5:00	Team Building Activity
5:00 – 6:00	Relax, & Warm up
6:00 – 7:00	Dinner
8:00 – 11:00	Fun Times
	-Night Tubing
	-Games/Music/Movies/Dance
	-S'mores & Snacks
12:00 midnight	Lights Out

***SUNDAY, March 2nd**

8:00 a.m.	Rise & SHINE
8:30 – 9:00	Breakfast
10:00 – 12:00	Activities, Lunch, Clean up, GROUP PHOTO!!
1:00 p.m.	Bus departure

DROP OFF SCHEDULE:

Albertsons in Hailey 2:00 p.m. Shoshone Valley Co Op 3:00 p.m. Flying J 4:00 p.m.

**PARENTS/GUARDIANS DROPPING TEENS OFF WILL NEED TO BE AT THE ROAD
(MILE MARKER 146) BETWEEN 4PM AND 6 PM FRIDAY FEBRUARY 28th.**

PICKUP WILL BE AT 1 PM ON SUNDAY MARCH 2nd.

Teen Winter Camp 2025 Registration Form and Fee

(\$100 FEE required)

(First come, first served. Payment must be made with application to reserve your place)

TO REGISTER – complete this form, Teen Winter Camp Health Form, the Acknowledgement of Risk and Waiver of Liability Form and a payment **by Friday February 21st (must be in our PO Box by February 21st)**. Please call Don or Darren, contact information is on page 2, if you won't get it turned in by February 21st but still want to go.

Return completed application and payment (no cash) to:

Central Idaho 4-H Camp
PO Box 148
Shoshone, ID 83352

If you are wanting to use a credit/debit card to pay, please see our online registration form.

<https://form.jotform.com/donvankleek/twc2025registration>

Name: _____

Address: _____

City: _____ State _____ Zip Code: _____

Main Phone: _____ Alternate Phone: _____

Email Address: _____

Age: _____ Grade: _____ Gender: _____

Bus Pickup/Drop Off Location

Flying J – Jerome Valley Country Store – Shoshone Albertsons – Hailey

PARENT/GUARDIAN DROP OFF AND PICKUP FROM CAMP (NO BUS FEE REQUIRED)

DROP OFF AT ROAD BETWEEN 4PM & 6PM ON FEBRUARY 28

PICKUP AT ROAD AT 1 PM ON SUNDAY MARCH 2

My teen and I have read and understand camper expectations, responsibilities, and rules.

Parent/Guardian Signature _____

Teen Winter Camp Health Form

Adapted from the University of Idaho 4-H Youth Development Health Form

PLEASE NOTE: Hospitals require proof of coverage before providing treatment unless a life-threatening situation exists. It is suggested that participants bring a copy of their insurance card. Central Idaho 4-H Camp carries a Certificate of Liability Insurance and provides limited protection for injuries or illnesses while participants are participating in Teen Winter Camp. The participant's family is responsible for all medical expenses not covered by liability insurance.

Insurance Information

Medical Insurance Company Name: _____

Policy Number: _____

Health Conditions

Does your teen have any of the following health conditions? If yes, please check all that apply:

Asthma: ___ Diabetes: ___ Convulsions/seizure: ___

Migraine Headaches: ___ Bronchitis: ___ Hay Fever: ___

Ear Infections: ___ Heart/cardiovascular problems: ___

Chronic bone, muscle or joint injuries: ___

Other conditions, please list/describe: _____

Is your teen currently taking any prescribed or over-the-counter medications: YES NO

If yes, please record the condition/ailment, name of medication, dosage amount(s) of day:

Allergies

Does your teen have allergies? YES NO

If yes, please check all that apply:

Bee stings: ___ Peanut: ___ Soy: ___

Gluten: ___ Penicillin: ___ Sulfa: ___

Dairy: ___

Allergies, Additional Information/Special Instructions:

Accommodations

Are accommodations needed? ()YES ()NO

If so, please describe (wheelchair access, special dietary needs, translator, audio aids)

Consent for medical treatment: I give permission to the Central Idaho 4/H camp staff to administer over the counter medicine to my camper to treat non-life-threatening ailments and to provide basic first aid. Over the counter medicine includes, but is not limited to Tylenol, Aspirin, Ibuprofen, Benadryl, stomach aid, antihistamines, sunscreen, calamine lotion and/or cough drops. Basic first aid includes, but is not limited to, bandages to cover wounds, not requiring emergency services.

Medical Consent (Select One) ()YES ()NO

Acknowledgement of Risk and Waiver of Liability Parent/Guardian Permission

Both participants and a parent or guardian of participants must read this Acknowledgement of Risk and Waiver of Liability carefully and in its entirety. It is a binding legal document. Please read this, sign and return this form along with your registration form for Teen Winter Camp. If a participant is under the age of 18, this form must be signed by the participant AND by a parent or legal guardian of the participant. The term "undersigned" when used herein shall include both the participant and the custodial parent/guardian signing at the end of the document unless such term is qualified to mean one or the other. The term "Activity" or "Activities" means the 4-H Program along with any and all associated activities, events, clinics, or classes conducted by the University of Idaho (UI) in conjunction therewith.

The undersigned acknowledge that they are aware that participation in an Activity or Activities as well as any or all University of Idaho activities, events, clinics, and classes associated therewith, may include activities that are risky and dangerous, which may include, but not be limited to, risks of injury, illness or death arising out of Activities involving animals, whether wild, domestic or feral; exposure to weather conditions, such as heat, cold, rain, snow, ice, hail, lightning, wind or other weather events; hazards from deserts, forests, mountains, canyons, lakes, rivers, streams, urban, suburban, or rural places or other areas where the Activities occur; forces of nature or Acts of God, such as fire, earthquake, avalanche, rock fall, flood, falling trees, poisonous plants or other occurrences; recreational or educational activities, such as archery, orienteering, skiing, swimming, biking, canoeing, kayaking, fishing, hiking, camping, shooting, horseback riding, operation of, or being a passenger in, or observer of motorized equipment or other items associated with the Activities, or food, drink, lodging or travel to, during, from or otherwise related to, the Activities. These risks may arise from negligent acts or omissions of the participant, other participants, leaders, volunteers, or third parties occurring during, or otherwise associated with, the Activities. The undersigned acknowledge and accept the risks and give permission for participation in the Activities.

In consideration of the University of Idaho (UI) and Central Idaho 4-H Camp, Inc permitting participation in Activities, the undersigned **hereby voluntarily accept all risks associated with participation. To the extent permitted by law, the undersigned agree to indemnify, defend, save, hold harmless, discharge, and release the Central Idaho 4-H Camp Board, Inc., State of Idaho, the Regents of the University of Idaho, their agents, and employees from any and all liability, claims, causes of action or demands of any kind and nature whatsoever that may arise out of or in connection with such participation in any Activities.**

It is the express intent of the undersigned that this Acknowledgement of Risk and Waiver of Liability shall serve as a release, discharge, and acceptance of risk for the heirs, estate, executor, administrator, assigns and all members of the undersigned's family. The venue of any dispute that may arise out of participation in any Activity, if the University is a party to the dispute, shall be in Latah County, Idaho.

The undersigned acknowledge and agree that if a vehicle not owned and operated by the University is provided by the undersigned or any of them for transportation to, at, or from any Activity site, or if the undersigned or any of them are a passenger in such vehicle, the University is not responsible for any damage or injury caused by or arising from any use of such transportation. Furthermore, the undersigned acknowledge sole responsibility for any action taken by the undersigned or any of them, that is outside the scope of the Activity or Activities, and any events, clinics and classes associated with the Activity or Activities, regardless if occurring before, during or after the period of the activity or activities. The undersigned acknowledge that the University makes no representation with respect to the safety of

any personally owned vehicle in which the undersigned or any of them may travel, or with the respect to the qualifications of the driver of any personally owned vehicle. The undersigned acknowledges that if traveling in a personally owned vehicle it is the responsibility of the undersigned to determine the safety of the vehicle and qualifications of the driver.

The Undersigned hereby certify that, with or without accommodation, the participant named above is able to perform the essential functions of the Activities, and does not present a danger to the participant of others and the undersigned know of no medical reason why the participant is not able to participate in the Activity or Activities, Events, Clinics and Classes. The undersigned hereby consent to first aid, emergency medical care and if necessary, admission to an accredited hospital when necessary for executing such care, for treatment for injuries or illness that I/he/she may sustain while participating in any activity associated with the above-named Activities and events, clinics and classes associated with the above-named Activity or Activities.

The undersigned acknowledge that any insurance provided through Activity Insurance provides only limited protection for injuries that occur while participating and that the undersigned remains responsible for all medical expenses not covered by Activity Insurance.

If the participant above has a disability, food or drug allergy, dietary requirements, or any condition requiring accommodation, the undersigned will contact the Central Idaho 4-H Camp Board, Inc. at least one week (7 days) prior to the start of the Activity. If you feel there are personal medical concerns beyond this form, you may contact the camp nurse directly: Dusty Votroubek RN 208-404-6680. If for any reason your teen sustains an injury prior to camp, please notify the nurse, as certain activities might need to be withheld.

I have read, understand and accept responsibility as a participant and accept terms of the Acknowledgement of Risk and Waiver of Liability: () YES () NO

Parent/Legal Guardian Signature: _____

Participant Signature: _____