

**REQUIRED FORMS PACKET**

Dear Teachers,

Soon you and your students will begin the California Time Capsule Overnight Program! During the program, the students build an Indian brush shelter and compare it to an adobe brick house. They explore Indian plant uses and grind corn to make tortillas. They pan for gold and dig for artifacts. They explore the spectrum of lifestyles contained within the tapestry of California's history.

As the program date nears, please review the administrative check list and program agreement for final preparations before your program.

In order to help you better prepare for your field trip, we have provided a Required Forms Package that include the following forms:

- Program Information Sheet (2 pages)
- Cabin Group list
- Activity Group list
- Parent Information Packet
- Chaperone Information Packet

Please note that this packet contains forms that must be photocopied and distributed to your parents and chaperones. These forms must then be brought with you on the day of your program. Please make sure that you are familiar with the information and forms contained in all the packets, and that you collect all forms prior to boarding the bus for your field trip.

We look forward to working with your class! Please feel free to contact us if you have any questions regarding either the program, or the necessary paperwork and forms.

Sincerely,

Sara Ludovise  
Outdoor Education Program Director  
Ocean Institute

Phone: (949) 496-2274, extension 344  
Email: [sludovise@ocean-institute.org](mailto:sludovise@ocean-institute.org)

# California Time Capsule Overnight

## Program Information Sheet

**School:** \_\_\_\_\_ **Program Date(s):** \_\_\_\_\_

**Names of Teachers Attending:** \_\_\_\_\_

**Number of Participants:** Students: \_\_\_\_\_ Adults: \_\_\_\_\_ Teachers: \_\_\_\_\_

**Number of Cabins Needed:** Boy Cabins: \_\_\_\_\_ Girl Cabins: \_\_\_\_\_

(Max 10 people per cabin; must have at least one chaperone in each cabin)

**Will you need separate accommodations for your teachers?** \_\_\_\_\_

**How is your luggage being transported?** Bus Cars U-haul Other \_\_\_\_\_

**Will your bus drive on the 1.5 mile dirt road to the Lazy W Ranch?** \_\_\_\_\_

**Will any individuals be picked up before the end of camp? If yes, explain:** \_\_\_\_\_

**Will your parent chaperones drive separately?** \_\_\_\_\_ **If yes, how many?** \_\_\_\_\_

**\*\*Reminder!\*\*** Please schedule your bus to pick you up 30 minutes prior to your departure time on Day 2.

**Meal Selection:** Your group will need to bring lunch on Day 1 of the program. All other meals will be provided at camp. Please indicate your choices for dinner on Day 1 and breakfast and lunch on Day 2 below. All breakfasts include cereal, milk, and juice. All dinners include a salad bar, milk, water, and dessert.

**Breakfast** (select one):

- Make-Your-Own Breakfast Burrito, Eggs, Potatoes, Salsa & Cheese, and Fresh Fruit
- Scrambled Eggs, Bagels, and Fresh Fruit
- Pancakes, Sausage, and Fresh Fruit
- French Toast, Bacon, and Fresh Fruit

**Lunch** (select one):

- Grilled Cheese Sandwiches, Chips, and Fruit
- Turkey Hot Dogs, Chips, and Fruit
- Turkey Sandwiches, Chips, and Fruit

**Dinner** (select one):

- Make-Your-Own Burritos, Beans, Rice, and Chips & Salsa
- Chicken Enchiladas, Beans, Rice, and Chips & Salsa
- Baked or BBQ Chicken (*Circle One*), Rice Pilaf, Steamed Vegetables, and Corn Bread
- Spaghetti or Lasagna (*Circle One*), Green Beans, and Garlic Bread
- Roast Beef, Mashed Potatoes, Honey Glazed Carrots, and Dinner Rolls
- Roasted Turkey, Dressing, Mashed Potatoes, Steamed Vegetables, and Dinner Rolls
- Chicken Stir Fry and White Rice
- Chicken Strips, Macaroni & Cheese, and Steamed Vegetables

**Please note that we need to receive your Program Information Sheet at least one month before your program date to ensure that the Lazy W kitchen is prepared for your meal selections.** If the Program Information Sheet is not received at least one month in advance, different meals may be substituted as the kitchen staff cannot guarantee that they will be able to make your specific meal selections.

**What is the grade level of the students and how much of the curriculum will they have covered by the program? Explain:** \_\_\_\_\_  
\_\_\_\_\_

**Time of departure from school on the first day of the program:** \_\_\_\_\_

**Time of departure from Time Capsule program on the second day:** \_\_\_\_\_

**Special Dietary Needs:** The Lazy W Ranch can accommodate vegetarians and most allergies if notified in advance. Please help us prepare for your meals by completing a list of any dietary needs your students and chaperones may have. A list of our definitions is provided to prevent communication errors. Please use an additional page if necessary.

- Vegan: eats no animals or animal products. (Participant should bring additional food to supplement meals.)
- Vegetarian: eats no animals.
- Meat Restrictions: does not eat certain meat products. Please list restriction (pork, beef, chicken)
- Kosher: eats no meat products, cannot use same dishes that were used for meat. (Participant should bring additional food and necessary dishes to supplement meals.)
- Allergies: Please list EVERYTHING (including non-food items) to which a student or adult is allergic. Please be specific (for example, list whether a person is allergic to all nuts or just peanuts). Since the severity of allergies can vary, please use the scale of severity listed below. **Indicate severity by putting a number by the allergy listed.**
  1. Will have a small reaction, such as itchiness or hives.
  2. Will have a severe itchiness; requires medical attention.
  3. Will have trouble breathing.
  4. Will stop breathing immediately
  5. Will stop breathing immediately, even if someone else touched the item, and then touched their skin.

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

**Other Special Needs:** Please help us make all students comfortable and better able to learn by letting us know prior to your program about any physical, mental, or emotional limitations that students may have. These may include casts, ADHD, wheelchairs, learning disabilities, hearing impairments, history of heat exhaustion, etc.

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

Name: \_\_\_\_\_ Restriction: \_\_\_\_\_

If you need more room for special dietary needs or other special needs, please list them on an additional sheet of paper.

**PLEASE COMPLETE AND EMAIL TO [rgomez@ocean-institute.org](mailto:rgomez@ocean-institute.org) OR FAX TO (949) 496-4296 AT LEAST ONE MONTH BEFORE YOUR PROGRAM DATE.**

## CABIN GROUPS

Use this worksheet to help make your cabin groups. There are fourteen cabins available for our use at the Lazy W Ranch. Each cabin can accommodate a total of ten people. Cabin groups consist of nine students (same sex) and one adult chaperone. You may have two chaperones and eight students in each cabin. Please do not bring more than two adults for each cabin on the field trip. Please bring at least one copy of this list with you on the first day of the program.

Cabin:	
1	
2	
3	
4	
5	
6	
7	
8	
9	
Chaperone(s):	

Cabin:	
1	
2	
3	
4	
5	
6	
7	
8	
9	
Chaperone(s):	

Cabin:	
1	
2	
3	
4	
5	
6	
7	
8	
9	
Chaperone(s):	

Cabin:	
1	
2	
3	
4	
5	
6	
7	
8	
9	
Chaperone(s):	

Cabin:	
1	
2	
3	
4	
5	
6	
7	
8	
9	
Chaperone(s):	

Cabin:	
1	
2	
3	
4	
5	
6	
7	
8	
9	
Chaperone(s):	

### ACTIVITY GROUPS

Use this worksheet to prepare your activity groups for your program at the Lazy W Ranch. Each activity groups should have up to 15 boys and girls. Bring at least one copy of the activity group list with you on the first day of the program.

Activity Group Name (color):	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
<b>C</b>	
<b>C</b>	

Activity Group Name (color):	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
<b>C</b>	
<b>C</b>	

Activity Group Name (color):	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
<b>C</b>	
<b>C</b>	

Activity Group Name (color):	
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
<b>C</b>	
<b>C</b>	

**C** = Chaperone

**PARENT INFORMATION PACKET**

Dear Parents,

Your child is about to participate in an exciting adventure ranging from your classroom to the hills of the Cleveland National Forest as we take you on a journey through California history. The California Time Capsule Overnight program began in 1989 as a hands-on exploration of several of the cultures that have played a major part in the development of the California we know today. Our objective is to give your students a hands-on experience with the daily lives, adventures, and accomplishments of those who have lived in California. We will begin with pre-historic Indian survival and thread our way through time until we reach into the 21<sup>st</sup> century. Along the way, we will learn about the Acjachemem Indians, the Spanish settlers at the missions, the Mexicans on the Ranchos, the forty-niners heading to the gold fields, and, ultimately, about ourselves.

The California Time Capsule is designed as an experience that complements the fourth grade social science curriculum. Your students will focus on four different cultural periods that, in part, make up California history. During the program, the students will build an Indian brush shelter and compare it to an adobe brick house. They will explore Indian plant uses and grind corn to make tortillas. They will pan for gold and dig for artifacts. They will explore the spectrum of lifestyles contained within the tapestry of California's history.

In order to help you prepare your child for their field trip, we have provided the Parent Information Package that includes the following information and forms:

- Wildlife and Safety Precautions
- Student Clothing and Supply List
- Student Medical form
- Administration of Medication form
- Acknowledgement of Risk and Waiver

Each child must arrive the first day with a completed Medical Form and an Acknowledgement of Risk. If your child requires any prescription or over-the-counter medication during the day, you must have the Administration of Medication form(s) completed by your doctor. The medication must be in the original container with clear instructions on both schedule and dosage.

If you have any questions, please contact your child's classroom teacher. We are looking forward to hosting your child on our program!

## WILDLIFE AND SAFETY PRECAUTIONS

The Lazy W Ranch is located in the Cleveland National Forest, which is a designated wilderness area. Animal residents of the area that make precautions necessary include mountain lions, bobcats, coyotes, rattlesnakes, scorpions, and bees. While encounters with these animals are rare, both adults and students must be aware of camp policies and procedures. Close supervision of students by the accompanying adults is essential, and strict adherence to the camp rules is necessary.

All teachers, chaperones, and students attending the Chaparral to Ocean California Time Capsule program must read and understand the following wildlife and safety rules before their visit:

- All students must remain in close proximity of an instructor or chaperone. Close proximity shall be strictly defined as “visual contact.” Students are never to go anywhere alone. Students will be advised of the “visual contact” rule and the seriousness of compliance.
- Two adults will accompany each activity group. A California Time Capsule instructor will lead the group and a designated chaperone will follow.
- At least one chaperone will oversee the recreation area during the recreation periods. At least one chaperone will oversee the cabin and shower areas before and after dinner.
- Food (including gum and candy) is not allowed in the cabins or on the trails.
- Shoes must be worn at all times (except for sleeping and showering). Students will be required to wear long pants on trails.
- Littering is not tolerated.
- Students and chaperones must stay with their instructor on established trails. On winding and narrow trails the instructor will stop regularly to allow students to catch up. The distance between the instructor and the adult at the end shall not exceed 30 yards.
- Students should not touch any of the camp animals or pets, including the cats and dogs.
- The stream area is off limits unless accompanied by an instructor during an organized activity.
- Students must remain in their cabins from “lights out” until 7:00 AM, except for bathroom visits. Chaperones must accompany students on night bathroom visits.
- Instructors will carry walking sticks, whistles, and emergency first aid kits on hiking trails. In addition, all instructors are First Aid and CPR certified.
- Cabin raiding is not allowed.
- Students will report any injury or illness to an instructor or chaperone immediately.
- Students are expected to follow established classroom guidelines.

---

**STUDENT CLOTHING AND SUPPLY LIST**

Remember, pack as carefully as possible! You will have to carry your own belongings. Also, the weather can be unpredictable. Make sure that you are prepared for all kinds of weather. Everyone needs a rain jacket with a hat or a rain poncho. You will also be getting dirty and wet. Mark all of your belongings with your name.

- 1 Lunch with a drink for the first day
- 1 Sleeping bag
- 1 Pair of pajamas
- 2 Pair of pants (no shorts, please)
- 1 Sweater or sweatshirt
- 1 Jacket
- 2 Shirts
- 2 Pair of underwear
- 2 Pair of tennis shoes with good tread (they will get muddy)
- 4 Pair of socks
- Towel and washcloth
- Toilet Kit: soap, toothbrush and toothpaste, comb, etc.
- Rain gear: raincoat, poncho, or waterproof jacket
- Sunscreen
- Hat
- Water Bottle
- Flashlight

**Optional Items:**

- Pillow
- Shower shoes
- Camera
- Book
- Hair dryer
- Mittens and stocking cap

**Do Not Bring:**

- Candy, food other than lunch, gum
- Knives
- Radios, personal listening devices, or electronic games
- Curling irons

# STUDENT MEDICAL FORM

## **PLEASE PRINT CLEARLY**

I/We, the parent(s) or guardian(s) of the participant named below, wish to register my/our child in the Ocean Institute's \_\_\_\_\_ Program. Dates attending \_\_\_\_\_ to \_\_\_\_\_.

Participant's Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_) \_\_\_\_\_ Birth date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

In case of emergency, please notify: Parent(s)/Guardian(s) Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Daytime Phone Number (\_\_\_\_) \_\_\_\_\_ \*Business Number (\_\_\_\_) \_\_\_\_\_

\*Employer \_\_\_\_\_ \*Social Security Number \_\_\_\_\_

Alternate Person in case of emergency, please notify: \_\_\_\_\_ at (\_\_\_\_) \_\_\_\_\_

Name/Phone number of Family Physician \_\_\_\_\_

Name/Number of family medical insurance carrier \_\_\_\_\_

\* For Medical Insurance Claims only

### **PARTICIPANT HEALTH INFORMATION**

1. Does the participant have any physical or medical conditions or restrictions? Yes \_\_\_\_ No \_\_\_\_

If so, please describe: \_\_\_\_\_

If your child has a special medical or physical condition, your physician should understand that the participant will be away from home for two full days. Please have your physician write a note indicating agreement that the participant is fit enough to fully participate in the program and to also include any special instructions.

2. Is your child subject to any of the following? Please circle:

Homesickness                  Sleepwalking                  Bed wetting (send extra bedding)                  Car/motion sickness

3. Does your child have any dietary requirements or restrictions? Yes \_\_\_\_ No \_\_\_\_

If so, please describe: \_\_\_\_\_

4. Does your child have any allergies that may be of concern? Yes \_\_\_\_ No \_\_\_\_

If so, please describe the severity: \_\_\_\_\_

5. Has the participant recently been ill or exposed to any communicable diseases? Yes \_\_\_\_ No \_\_\_\_

If so, please explain: \_\_\_\_\_



ADMINISTRATION OF MEDICATION, PAGE 1

Name of Participant \_\_\_\_\_

Dates Attending \_\_\_\_\_

The nature of the program requires that all children participate in a variety of learning and social activities involving vigorous walking and hiking. Standardized, well-balanced meals are provided.

It is understood that the Ocean Institute is not legally obligated to administer medication to my/our child, and therefore, I/we agree to hold the Ocean Institute and its personnel free from any and all responsibility for the results of such medication, or the manner in which it is administered and to indemnify each of them against the loss of reason of any civil judgement arising out of these arrangements which may be rendered against them.

**INSTRUCTIONS**

No one is to administer medication to any child without authorization of the parent(s) or guardian(s). If you wish your child to receive medication you must fill out Part I: Prescription Medication and/or Part II: Non-Prescription Medication. These forms will be kept with the medication. **A parent/ guardian and physician's signature is required for each of these sections.**

**Part I: Prescription Medication**

**MEDICATION 1**

Diagnosis \_\_\_\_\_ Date of Examination \_\_\_\_\_

Medication Prescribed \_\_\_\_\_ Dosage \_\_\_\_\_

Schedule and Method of Administration \_\_\_\_\_

Comments \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Parent(s)/Guardian(s) Signature \_\_\_\_\_

**MEDICATION 2**

Diagnosis \_\_\_\_\_ Date of Examination \_\_\_\_\_

Medication Prescribed \_\_\_\_\_ Dosage \_\_\_\_\_

Schedule and Method of Administration \_\_\_\_\_

Comments \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Parent(s)/Guardian(s) Signature \_\_\_\_\_

ADMINISTRATION OF MEDICATION, PAGE 2

Name of Participant \_\_\_\_\_

Dates Attending \_\_\_\_\_

**Part II: Non-Prescription Medication**

**MEDICATION 1**

Medication \_\_\_\_\_ Dosage\_\_\_\_\_

Reason for Administration on Medication \_\_\_\_\_

Schedule and Method of Administration \_\_\_\_\_

Comments \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Parent(s)/Guardian(s) Signature \_\_\_\_\_

**MEDICATION 2**

Medication \_\_\_\_\_ Dosage\_\_\_\_\_

Reason for Administration on Medication \_\_\_\_\_

Schedule and Method of Administration \_\_\_\_\_

Comments \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Parent(s)/Guardian(s) Signature \_\_\_\_\_

**MEDICATION 3**

Medication \_\_\_\_\_ Dosage\_\_\_\_\_

Reason for Administration on Medication \_\_\_\_\_

Schedule and Method of Administration \_\_\_\_\_

Comments \_\_\_\_\_

Physician's Signature \_\_\_\_\_

Parent(s)/Guardian(s) Signature \_\_\_\_\_

## ACKNOWLEDGEMENT OF RISK AND WAIVER FOR ALL PARTICIPANTS

Welcome to the Ocean Institute! We want you and everyone to have a memorable and safe experience.

The Ocean Institute's environment, vessels, facilities, and activities are unique and different from your usual surroundings and activities. There are many inherent risks, dangers, and hazards and everyone must exercise caution at all times in order to avoid or minimize the risk of damage, injury, and death.

Examples of these risks, dangers, and hazards include, without limitation: (a) walking and standing surfaces that may be wet, slippery, moving, irregular, unstable, and rough; (b) open areas such as hatches into which someone could fall; (c) low or irregular lighting, or no lighting at all; (d) objects and equipment that could fall on someone; (e) low ceilings; (f) ropes, chains, and other items that could strike or entangle someone; (g) extreme and variable physical, weather, and ocean conditions, including darkness, sun glare, storms, and hot and cold temperatures; (h) vessels, docks, buildings, ladders, and stairs from which someone could fall; (i) vessels and docks that could pitch, roll, capsize, flood, collide, and sink; (j) gaps between a vessel and a dock that could open or close suddenly and unpredictably; (k) possible encounters with wildlife and plants; and (l) unavailability of medical attention and treatment.

If you attend and Ocean Institute activities, then you must exercise caution at all times to protect yourself and others from these risks, dangers, and hazards. If children or other persons under your care attend any Ocean Institute activities, then discuss these risks, dangers, and hazards with them as they too must exercise caution at all times.

Program Name:

Program Date:

### Participant Name:

Last:

First:

Birth date:

### Guardian Name:

Last:

First:

Home Phone:

Cell Phone:

Work Phone:

Address:

City:

State:

Zip:

Email:

If you attend any Ocean Institute activities, and/or if others under your care attend any Ocean Institute activities, then by checking the box below you, on behalf of yourself and such other persons, shall be deemed to have read and understood this document and to have irrevocably waived any and all claims against the Ocean Institute and its directors, officers, employees, contractors, volunteers, agents, and insurers for damage, injury, accident, illness, or death occurring during or by reason of such activities.

Additionally, I authorize the use of photos taken of me and others under my care by the Ocean Institute for its promotional purposes.

As the Parent/Guardian, I have read and agree to the statements made on this document.

Today's Date:

## **CHAPERONE INFORMATION PACKET**

Dear Chaperones,

Welcome! Thank you for your help in making this program a success. We recognize and appreciate the personal commitment that you have made. This brief introduction will help you prepare for this unique and challenging educational experience. In addition to this introduction, the onsite director will meet with you at the beginning of your program to answer any questions that you might have.

The California Time Capsule program takes place at several different sites. We begin at Mission San Juan Capistrano. The one-hour investigation of the Mission gives us a chance to become acquainted with the students and to introduce the content of the program. After an hour at the Mission, we move to the Lazy W Ranch, off the Ortega Highway, where we spend the afternoon and evening hiking through history. The students build brush shelters, work on our adobe brick house, learn native plants and their uses, and swing at a piñata. The next morning, they pan for gold and dig for artifacts.

You, as a chaperone, play an important role in all phases of the program. Below is a brief description of your responsibilities. Please take a few minutes to read this information. If you have any questions, comments, or concerns please contact your classroom teacher.

### **ROLE OF CHAPERONES**

Chaperones assist both the students and the staff with the operation of the California Time Capsule program. We ask you, as chaperones at California Time Capsule, to fill three roles.

- **SUPERVISOR:** As chaperones, you are asked to monitor students on the trails, in the cabins, and in the recreation areas. While chaperones are supervising students, the “visual contact” rule shall be strictly enforced. The students for whom the chaperone is responsible must be within the chaperone’s view. For example, at recreation time, the chaperone will oversee her/his own cabin group either in the cabin or in the recreation area.
- **ROLE MODEL:** Chaperones are asked to serve as role models for the students. We have found that the students’ experience is influenced greatly by positive adult role models. Please follow the same rules and guidelines as the students.
- **PARTICIPANT:** Chaperones get to have fun, too! You will hike alongside the students and spend time with them on the playground and in the cabins. We hope that you, as well as the students, learn something from your experience with us, and always encourage chaperones to find quiet moments to ask questions.

We truly appreciate all of your help. You have a strong influence on the students’ success and enjoyment during the California Time Capsule, and we could not run the programs without your support and participation.

## **SAFETY PRECAUTIONS AT THE LAZY W RANCH**

The Lazy W Ranch is located in the heart of the Cleveland National Forest. Safety is always our primary concern at the Lazy W Ranch. All of the Ocean Institute instructors are certified in First Aid and CPR. Upon arrival at the Lazy W Ranch, the program administrator will instruct the group in the proper safety procedures.

### **WILDLIFE**

The National Forest is a wilderness area and wildlife abounds. Animal residents of the area that necessitate precautions include mountain lions, bobcats, coyotes, rattlesnakes, scorpions, ticks, and bees. These animals may travel near, or through, the camp. While encounters with these animals are rare, both adults and students must be aware of California Time Capsule policies and procedures to ensure the safety of all. Close supervision of students by the accompanying adults is essential and strict adherence to the California Time Capsule rules is necessary.

### **VISUAL CONTACT**

The Visual Contact rule has been implemented at California Time Capsule to ensure the safety of the students. This rule stipulates that students must be within view of an adult any time they are outside of a building. Students must be accompanied by their cabin chaperones to and from the recreation/meeting area, cabin area, dining hall, and restrooms. The Visual Contact rule will be strictly enforced throughout the campers' stay at California Time Capsule.

### **SUPERVISION ON THE TRAIL**

Classroom teachers assign a chaperone to each activity group. On the trail, chaperones assist California Time Capsule instructors in a variety of ways. First, chaperones assist the instructor in enforcing the Visual Contact rule. Students must always be within view of the adults in the group. Chaperones are always the last person in an activity group and make sure that the distance from the instructor to the last student never exceeds 30 yards. In case of a student illness, injury, or restroom need, the chaperone may be asked to escort the student back to camp. In addition, chaperones help the instructor maintain behavioral standards during the hikes and will assist with disciplinary procedures.

### **SUPERVISION DURING RECREATION AND SHOWER TIME**

Chaperones supervise their cabin group during assigned recreation and shower times. During this time, chaperones strictly enforce the Visual Contact rule. Chaperones accompany their cabin group to the restroom during their assigned shower time and to the recreation area. In order to accommodate a large number of students in a short period of time in the showers, students are asked to spend not more than three minutes in the shower. At the recreation area, chaperones watch students to make sure they are using recreation equipment properly and safely. Chaperones will also promote positive behavior. The stream area is off limits during recreation times.

### **SUPERVISION IN THE DINING HALL**

Chaperones are responsible for maintaining order and promoting positive behavior of students at their assigned table during meals. The staff reviews dining hall expectations with the students before the first meal. The use of good manners and quiet voices is essential for a pleasant dining hall experience. Generally, the dining hall groups are not the same as cabin and activity groups. Parents may not be able to sit with their own child during the meal. Finally, chaperones assist students in the post-meal clean-up procedure. Each student has a separate cleaning responsibility at the table.

### **SUPERVISION IN THE CABINS**

Chaperones are responsible for maintaining order in the cabins. Chaperones should expect students to behave appropriately during cabin time. Classroom teachers and staff are available to assist with any management problems that arise. The cabin group moves from place to place in camp as a group and with their chaperone in view at all times. Students will never go anywhere alone—this includes returning to the cabin or meeting area to collect items that have been left behind. At night, chaperones remain with students in the cabin from "Lights Out" until breakfast (with the exception of attending to personal needs or during an emergency situation when help from staff or classroom teacher is necessary). Further, chaperones may be asked to remain in the cabin with a student in the event of a medical or behavioral problem. No student shall ever be left alone in a cabin. Finally, chaperones will not allow students outside a cabin after "Lights Out" unless it is on a visit to the restroom or an emergency situation deems it necessary.

Cabin raids and after hours night hikes are strictly forbidden due to safety considerations.

## WILDLIFE AND SAFETY PRECAUTIONS

The Lazy W Ranch is located in the Cleveland National Forest, which is a designated wilderness area. Animal residents of the area that make precautions necessary include mountain lions, bobcats, coyotes, rattlesnakes, scorpions, and bees. While encounters with these animals are rare, both adults and students must be aware of camp policies and procedures. Close supervision of students by the accompanying adults is essential, and strict adherence to the camp rules is necessary.

All teachers, chaperones, and students attending the Time Capsule program must read and understand the following wildlife and safety rules prior to their visit

- All students must remain in close proximity of an instructor or chaperone. Close proximity shall be strictly defined as “visual contact.” Students are never to go anywhere alone. Students will be advised of the “visual contact” rule and the seriousness of compliance.
- Two adults will accompany each activity group. A California Time Capsule instructor will lead the group and a designated chaperone will follow.
- At least one chaperone will oversee the recreation area during the recreation periods. At least one chaperone will oversee the cabin and shower areas before and after dinner.
- Food (including gum and candy) is not allowed in the cabins or on the trails.
- Shoes must be worn at all times (except for sleeping and showering). Students will be required to wear long pants on trails.
- Littering is not tolerated.
- Students and chaperones must stay with their instructor on established trails. On winding and narrow trails the instructor will stop regularly to allow students to catch up. The distance between the instructor and the adult at the end shall not exceed 30 yards.
- Students should not touch any of the camp animals or pets, including the cats and dogs.
- The stream area is off limits unless accompanied by an instructor during an organized activity.
- Students must remain in their cabins from “lights out” until 7:00 AM, except for bathroom visits. Chaperones must accompany students on night bathroom visits.
- Instructors will carry walking sticks, whistles, and emergency first aid kits on hiking trails. In addition, all instructors are First Aid and CPR certified.
- Cabin raiding is not allowed.
- Students will report any injury or illness to an instructor or chaperone immediately.
- Students are expected to follow established classroom guidelines.

Upon arrival at the program, the on-site administrator will review these rules and guidelines with the students and chaperones. If there are discipline or safety concerns during the program, the on-site administrator will work with the teachers to resolve issues appropriately following the school’s normal procedures.

## FREQUENTLY ASKED QUESTIONS

### ***What are my responsibilities as a chaperone?***

The most important responsibility of the chaperone is to ensure the safety of the students. Chaperones are also responsible for overseeing a group of students during the times between activities, at meals, in the cabin, and in the dining hall. In addition, chaperones are responsible for accompanying an activity group on the trails during activities with a California Time Capsule instructor.

### ***Will I get any sleep?***

The answer to this question varies from person to person. In order to at least be sure that the students get some sleep, and to assist you at the same time, enforce the Lights Out policy. Generally, Lights Out is set for between 9:30 and 9:45 PM. A strategy that works well is to turn off the lights at that time, and then let the children talk quietly until about 10:00 PM. After that, they should plan on settling down for some much-needed sleep. Also effective is to have the students play word games or tell stories as they are settling down for the night. In addition, we have several books and games available for quiet time in the cabins. Finally, encourage the students not to disturb others if they wake up early.

### ***What can I do with the students during recreation and rest time?***

We encourage you and your cabin group to spend the recreation time outdoors in the recreation area (weather permitting). The recreation area has a volleyball net, ping pong tables, a basketball court, and playground equipment. In addition, a variety of balls and other equipment are available for the children's use. Word and card games are also suggested.

### ***How do I establish a rapport with nine students I may not know?***

When students arrive at California Time Capsule, they will have about one-half hour to organize their belongings in their cabin and prepare for their hikes. Take time to learn the students' names and perhaps their hobbies, then review the California Time Capsule behavioral and safety guidelines, and explain your personal expectations of them.

### ***What are my options for handling an uncooperative student?***

The discipline policy is outlined for the students at school and when they arrive at California Time Capsule. In addition, the students will know the rules and the guidelines of the program. Take time to review the guidelines with your cabin group, and expect that they follow these rules and guidelines. Let the students know that you, just as the teachers and the California Time Capsule staff, will implement the "warning system." Please let the teachers and director know if you need assistance with students and discipline/safety issues.

### ***Can I make phone calls from the Lazy W Ranch?***

Cell phones and pagers generally do not work at the Lazy W Ranch. We do have a landline that is available in case of an emergency. If you need to make a phone call while at the Lazy W, please let the program administrator know and s/he will direct you to the phone line.

## MISCELLANEOUS INFORMATION

- The Lazy W Ranch is located in an area of high fire danger. As a result, smoking is not allowed at the Lazy W Ranch.
- The Lazy W Ranch provides our adult chaperones, teachers, and staff with coffee and hot water in the dining hall. Only the adults are allowed to make use of this amenity.
- Cellular phones and pagers do not operate in our canyon. There is a landline available in our Nature Center for any phone calls that must be made.
- On the trails, students are required to wear long pants. Adults may wear shorts if desired (please be aware that there is poison oak as well as other hazards in the area).
- The Lazy W Ranch can accommodate some dietary needs (e.g. vegetarian or no pork) if notified in advance. Please contact your classroom teacher at least 2 weeks prior to the trip if you have such a need. The Lazy W Ranch cannot accommodate such needs as low-fat or low-sodium diets. Those with special diets or food allergies will need to bring along suitable food substitutions.
- Each of the cabins at the Lazy W Ranch is equipped with a heater and electrical outlets. Chaperones should bring an alarm clock, watch, and flashlight.

**ADULT CLOTHING AND SUPPLY LIST**

Pack as carefully as possible! Remember, the weather can be unpredictable. Make sure that you are prepared for all kinds of weather. Everyone needs a rain jacket with a hat or a rain poncho. You will also be getting dirty and wet.

- 1 Lunch with a drink for the first day
- 1 Sleeping bag
- 1 Pair of pajamas
- 2 Pair of pants
- 1 Sweater or sweatshirt
- 1 Jacket
- 2 Shirts
- 2 Pair of underwear
- 1 Pair of tennis shoes with good tread (they will get muddy)
- 3 Pair of socks
- Towel and washcloth
- Toilet Kit: soap, toothbrush and toothpaste, comb, etc.
- Rain gear: raincoat, poncho, or waterproof jacket
- Sunscreen
- Hat
- Water Bottle
- Watch and Alarm Clock
- Flashlight

**Optional Items:**

- Pillow
- Shower shoes
- Camera
- Book
- Hair dryer
- Mittens and stocking cap
- Shorts

**Do Not Bring:**

- Candy, food other than lunch, gum
- Knives
- Radios, personal listening devices, or electronic games
- Curling irons

ADULT MEDICAL FORM

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone Number ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Age \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**Closest Relative (to notify in the event of an emergency)**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone Number ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Work Telephone Number ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**Additional Emergency Contact**

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Telephone Number ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Work Telephone Number ( \_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

**Insurance Information**

Medical Insurance Group Name and Number \_\_\_\_\_

**Additional Information**

Do you have any physical or medical conditions or restrictions?

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any allergies? Please specify \_\_\_\_\_

\_\_\_\_\_

Do you regularly take any prescription medications? Please specify \_\_\_\_\_

\_\_\_\_\_

## ACKNOWLEDGEMENT OF RISK AND WAIVER FOR ALL PARTICIPANTS

---

Welcome to the Ocean Institute! We want you and everyone to have a memorable and safe experience.

The Ocean Institute's environment, vessels, facilities, and activities are unique and different from your usual surroundings and activities. There are many inherent risks, dangers, and hazards and everyone must exercise caution at all times in order to avoid or minimize the risk of damage, injury, and death.

Examples of these risks, dangers, and hazards include, without limitation: (a) walking and standing surfaces that may be wet, slippery, moving, irregular, unstable, and rough; (b) open areas such as hatches into which someone could fall; (c) low or irregular lighting, or no lighting at all; (d) objects and equipment that could fall on someone; (e) low ceilings; (f) ropes, chains, and other items that could strike or entangle someone; (g) extreme and variable physical, weather, and ocean conditions, including darkness, sun glare, storms, and hot and cold temperatures; (h) vessels, docks, buildings, ladders, and stairs from which someone could fall; (i) vessels and docks that could pitch, roll, capsize, flood, collide, and sink; (j) gaps between a vessel and a dock that could open or close suddenly and unpredictably; (k) possible encounters with wildlife and plants; and (l) unavailability of medical attention and treatment.

If you attend and Ocean Institute activities, then you must exercise caution at all times to protect yourself and others from these risks, dangers, and hazards. If children or other persons under your care attend any Ocean Institute activities, then discuss these risks, dangers, and hazards with them as they too must exercise caution at all times.

---

Program Name:

Program Date:

---

### Participant Name:

Last:

First:

Birth date:

---

### Guardian Name:

Last:

First:

Home Phone:

Cell Phone:

Work Phone:

Address:

City:

State:

Zip:

Email:

---

If you attend any Ocean Institute activities, and/or if others under your care attend any Ocean Institute activities, then by checking the box below you, on behalf of yourself and such other persons, shall be deemed to have read and understood this document and to have irrevocably waived any and all claims against the Ocean Institute and its directors, officers, employees, contractors, volunteers, agents, and insurers for damage, injury, accident, illness, or death occurring during or by reason of such activities.

Additionally, I authorize the use of photos taken of me and others under my care by the Ocean Institute for its promotional purposes.

As the Parent/Guardian, I have read and agree to the statements made on this document.

Today's Date: