

Camp Fusion



INTRODUCTION TO CAMP

THANK YOU!



BDoKY would like to thank you for volunteering your time to be a counselor at Camp Fusion! Camp counselors are leaders providing guidance to the children under their care. You serve as positive role models helping campers make better decisions, providing motivation and suggestions for overcoming challenges, and influencing the interpersonal dynamics of their groups!



The background of the image is a scenic view of a lake with a wooden dock, green hills, and a blue sky with clouds. In the foreground, there are several life jackets (green and blue) and a blue kayak on the grass. A person in a yellow shirt is standing on the dock. The text is overlaid on a semi-transparent white oval in the center of the image.

Camp Fusion Mission Statement

To create moments of connection and belonging that nurture the human spirit and empower the lives of individuals with bleeding disorders.

Counselor Responsibilities

- Encourage campers to participate in camp activities, field trips, and engagement with others.
- Ensure that campers are supervised at all times.
- Monitor camper health status and report to healthcare providers if concerned.
- Perform headcounts of participants throughout the day.
- Ensure participants are safe (properly hydrated, sunscreen, insect repellent, playing areas are free of hazards, etc.).
- Support the mental, emotional, and social health of all participants through being present and listening.
- Follow all protocols found in the camp operating procedures and Prep to Play manual.
- Interact with parents/guardians during drop-off and pick-up times as needed.
- Support campers during daily clean-up and care of the camp areas.
- Basic understanding of bleeding disorders (provided in orientation/training).

The Venue

1159 Claunch Rd.
Perryville, KY 40468



The Venue



A Day At Camp

TIME	ACTIVITY
7:45-8:15	Polar Plunge
8:30-9:00	Breakfast
10:00-12:00	Activity Block Led By CHA/Fusion
12:00-12:45	Lunch
12:45-1:30	Recharge & Connect
1:45-3:45	Pool Activities

TIME	ACTIVITY
3:45-4:00	Change & Prep
4:15-6:15	Activity Block Led By CHA/Fusion
6:30-7:00	Dinner
7:15-8:45	Evening Activity Led by Fusion
8:45-10:00	Showers, Night Chats and Lights Out



ARCHERY & PUTT PUTT GOLF

KAYAKING & FISHING



SWIMMING

AND MORE!



TRUST THE PROCESS.
LOTS OF PLANNING AND
INTENTIONAL THOUGHT
WENT INTO EACH
ASPECT OF THE
SCHEDULE

Seek medical
assistance as
needed from our
Medical Team

Staff around you
serve as your
support system. We
work as a team!
Your team members
provide
assistance, advice,
support and insight.

Utilize the
help of your
co-
counselors

seek advice,
support and
instruction from
your Leadership
staff

DO NOT email or post
photos that include
campers electronically-
this includes all social
media.

Understanding Your Campers

~School~

A child's primary role is to attend school, where they learn about their environment, peers, and social interactions. School also teaches routines, rules, and guidance from non-guardians. However, when a child is sick or hospitalized, they miss out on these experiences. Many campers have been affected by disruptions in their school routine due to medical issues, leading to gaps in important social skills like sharing, patience, and conflict resolution.



It's crucial to recognize that while these behaviors may be frustrating, we can model and reinforce skills in five days to empower the child to change.



Kids need a sense of control over their environment. The ability to assess risk and make safe decisions doesn't fully develop until late adolescence. For kids with chronic illnesses, losing this control can be frightening and affect their relationships with peers and adults, leading to issues like mistrust, a desire for control, or variations in maturity, manifesting as either precociousness or social delays.

Understanding Your Campers



Allowing children to choose programs and providing a schedule enhances their sense of routine. Offering "two positive choices" empowers them in decision-making. Additionally, assisting campers in conflict resolution develops their social skills, encouraging participation in discussions with prompts like, "Where do we go from here?"

S T R U C T U R E

A COMMON CHALLENGE THAT STAFF WILL FACE IS THAT CAREGIVERS (COUNSELORS AND PARENTS, ALIKE) FEEL CONFLICTED OVER SETTING LIMITS WITH CHILDREN WHO HAVE LIVED WITH CHRONIC HEALTH CHALLENGES. THE CONFLICT LIES IN WANTING TO TREAT THE CHILD “NORMAL” WHILE ALSO WANTING TO HELP THAT CHILD AVOID STRUGGLES AND MOMENTS OF UNHAPPINESS.

THOUGH IT MAY FEEL CHALLENGING, ESTABLISHING CLEAR EXPECTATIONS AND ENFORCING THEM FROM DAY ONE IS AN INTEGRAL KEY TO PROVIDING A CHILD WITH SUCCESS AND CLARITY AND MAINTAINING A SENSE OF MENTAL WELL-BEING FOR THE STAFF MEMBER. “HERE AT CAMP...” IS A GREAT PHRASE THAT HELPS TO NORMALIZE OUR ENVIRONMENT AND EXPECTATIONS FOR THE CAMPERS.

Different Conditions

Remember that health alterations bring its own set of challenges to the child and their family. Most of these children were born with their condition.

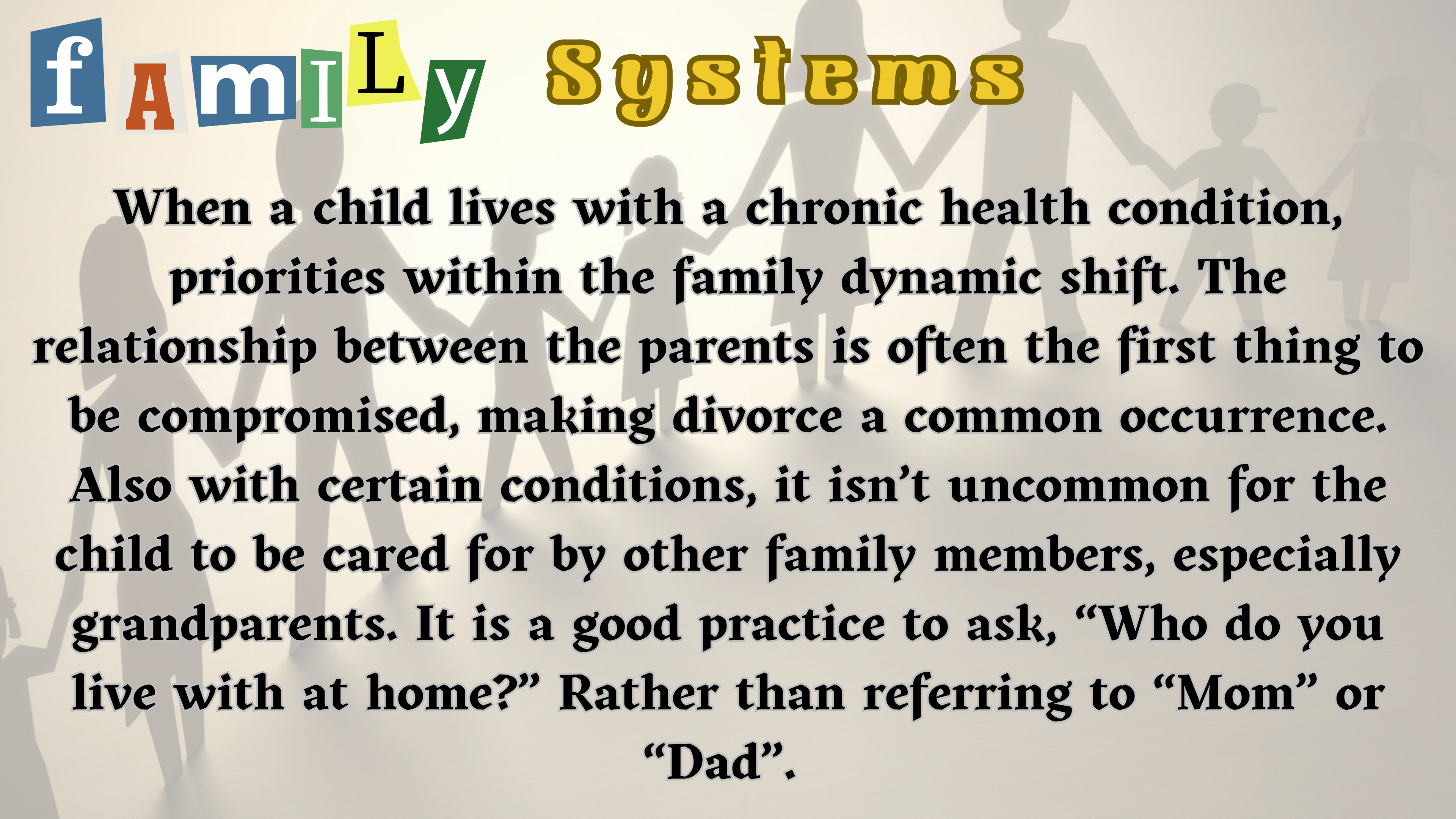
Different Protocols:

Each camper will have their own perspective on their condition shaped by their own understanding of the condition, their families' reaction, and how the condition impacts or doesn't impact their daily life.

MOST OFTEN, CAMP IS AN OPPORTUNITY FOR THE CAMPER TO GET AWAY FROM THE EXPECTATIONS AND LIMITATIONS AT HOME AND SCHOOL AND PROMOTE THEIR OWN SELF-IDENTITY!



Our goal is to allow them to shine as individuals and as a part of a team. Though it can be frustrating, it is a natural part of the camp and life experience to attempt new challenges, cope with the frustrations that arise, and celebrate small and large accomplishments.

A background image showing the silhouettes of a family of six (two adults and four children) holding hands in a circle. The silhouettes are light gray and positioned behind the text.

fAMILY Systems

When a child lives with a chronic health condition, priorities within the family dynamic shift. The relationship between the parents is often the first thing to be compromised, making divorce a common occurrence. Also with certain conditions, it isn't uncommon for the child to be cared for by other family members, especially grandparents. It is a good practice to ask, "Who do you live with at home?" Rather than referring to "Mom" or "Dad".

QUIZ BREAK

Click below to test your knowledge on the previous slides.



Considerations for Younger Campers

Based on a camper's school, medical, family, & peer experiences, consider that your camper may have:



Delayed or
heightened
maturity



Reduced
social skills



Comfort with
medical
terminology &
procedures



Limited
experience
with peers



A focus on
instant
gratification



Learned
helplessness

PROMOTING HEALTHY DEVELOPMENT



Use age-appropriate language



Be aware of nonverbal needs for support



Take cues from campers of what they understand



It is always okay to cry when something is scary or hurts



Be supportive of regression or excessive bravery



Provide companionship when a child struggles to find a way with a group



Encourage independence in personal hygiene



Encourage peer interaction when a child needs it



Ask campers to share coping techniques for medical procedures



Let camper's natural talents shine



Considerations for Teens

Need for freedom and independence.

Help them see that they are in control, but we are in charge.

Building rapport is important.

Teens care most about having a safe and private space.

Identity may still be undefined.

Camper initiated conversations about their conditions are normal.

Don't hover, give space when possible. We call this "Unsupervised Supervision."

Puberty and a lack of social experience can be a challenging.

Brain development is occurring, but not the ability to assess risk.

Camp often becomes a place where they feel a part of a community for the first time.

Be aware of language and tone of voice. Don't "talk down to."

Allow for choices in the camp experience.

Strong desire to fit in & create a peer group.

Show that you are there to listen and help without judgment.

Be aware of the cultural reliance on technology.



QUIZ BREAK

Click below to test your knowledge on the previous slides.



Behavior Management

Proactive techniques can prevent many camp issues. Although it requires more initial effort from staff, being proactive is beneficial. Engage with campers during unstructured times to foster positive relationships.



Your main role as a counselor is to provide entertainment and engage your campers, not watch them have fun without you.

Benefits of PLAY

- They will be less likely to find inappropriate methods of entertainment on their own.
- Relationships are created during play. Children will respond more positively to a counselor with whom they have established a positive connection.
- Times that can normally be stressful with the potential for poor camper behavior (group time, transition to a new area of camp, waiting for meals or new activities) can become fun moments where cheers are taught, new games or jokes are tried out, and laughs are shared by all.

Behavior Management

Invest in campers from the moment they arrive: Help with luggage, start conversations, and actively listen to make them feel valued. This connection fosters better communication during interventions.

- Talk about topics campers enjoy: First time at camp? Favorite color? Sports? Movies?
Avoid school-related subjects–campers may have missed significant time due to medical routines
- Match their excitement about topics and ask for explanations.
- Draw commonalities with other campers.

Read the Camper: Observe their behavior and adjust your approach accordingly. A shy child may respond better to a gentle counselor, while a high-energy child may thrive with someone who matches their enthusiasm. If a child becomes bored, use tools from your “Camp Counselor Survival Kit,” such as putty or stress balls, to help re-engage them.

Establish a Community Agreement: Children are more effective at following the expectations of camp when they are clear from day one. Each den should take the time on the first day as a group and establish a community agreement that will be followed by everyone (campers and staff) living in the cabins during the week.

Be a great role model: Children will mimic action before they respond to instruction. What we expect from campers we have to emulate as adults. Children also have a strong sense of what is fair and can lose investment in a counselor or camp when rules are inconsistently enforced.

Behavior Management Continued...

Supervise your campers at all times: Campers are to be supervised at all times. Consistent supervision prevents the majority of behavior issues and reduces the risk for physical or emotional harm. The types of coverage that we utilize at camp are:

- “One on one”– for children that may struggle to interact with other campers, or need direct care to navigate camp, a counselor is assigned in shifts to be the camper’s “buddy.” A buddy is never left alone with a camper.
- 3:1–the common ratio for dividing a group due to behavioral purposes or to go to separate areas of camp. This would be 2 campers and one counselor or 1 camper and 2 counselors.
- A 3:1 cannot be used if it leaves a counselor in an isolated moment with a camper (Ex. The three people should remain together, and one individual should not leave the group creating a potential 1:1 situation).

Provide consistency: Routines and expectations create a safe space for campers and provide a sense of control over the camp experience.

- Practice a consistent approach to behavior regardless of the camper avoids feelings of resentment or favoritism among campers.
- When a camper knows when they do and don’t have choices they feel safe and in control.
- Morning & bedtime are important times to have a routine.

Be a unified front: Children are extremely adept at figuring out if counselors are not on the same page and do a wonderful job of taking advantage of it. As a group, create a daily routine and establish norm behaviors. Work together, communicate, and find a system that works effectively for your group. Everyone will benefit from it.

catch a camper doing something

GOOOD

**RECOGNIZE CAMPERS' POSITIVE ACTIONS TO
ENCOURAGE CONTINUED GOOD BEHAVIOR.**

- Specific and personal praise is most effective.
- Provide feedback in casual settings, like during activities or meals.
- Publicly praise campers to elevate behavioral expectations.
- Use group recognition tools like star charts and stickers to foster bonding.
- Initiate a “Pat on the Back” to acknowledge good behavior. We will have large foam hands that staff or other campers can use to give an actual “pat on the back” when a camper does something positive or meaningful without being asked or guided.



Redirection

Children usually focus on one task at a time, so counselors redirect inappropriate behavior to acceptable activities. This redirection is easier than intervention but requires counselors to be entertaining, sometimes acting as comedians, musicians, or dancers.

Proximity Control helps children "save face" among peers by drawing their attention when an adult stands nearby, often stopping negative behavior. A gentle touch on the shoulder or whisper can also aid in refocusing their attention.

Give two Positive Choices: Children thrive on feeling in control, and offering them two positive choices empowers them.

- Ensure both options are win/win to avoid negative outcomes.
- Use positive language.
- Avoid phrases like "or else!" when presenting choices.

Nonverbal Cues: Children can be redirected by an adult's body language or eye contact (known as "the look") at the right time.

Hurdle Hopping: Unfamiliar or difficult tasks at camp can frustrate campers. To prevent negative behaviors, offer assistance with tasks like making beds, starting arts and crafts, or packing luggage at the week's end.

Friendly Challenge can encourage hesitant campers to engage in activities. Examples:

- Hydration challenge: "Let's drink our drinks as fast as we can when you say go!"
- Cleaning competition: "Who can make this bed faster, you or me?"
- Activity participation: "If you join Fun and Games, I'll sing a silly song in the dining hall today."

Redirection Cont.

Fresh Face: Changing group dynamics by introducing a new person can positively influence camper behavior. Adjusting activity pairings or staff assignments may help eliminate inappropriate behavior.

Tap Out: When a camp staff member needs a break from a camper, they can "tap out" by patting their head, allowing another staff member to temporarily take over.

Incentive Structuring involves motivating campers to comply with requests, such as encouraging them to listen to rules for quicker access to the pool. While effective, it shouldn't be the only redirection technique used, as it may lead campers to rely solely on it.

Planned Ignoring addresses harmful or ridiculing behavior while allowing minor annoyances to be ignored. Key points include:

- Use a triangle hand signal to notify staff.
- Avoid eye contact or verbal acknowledgment of the behavior.
- Do not react emotionally or discuss the behavior later.
- Praise and focus on the camper during appropriate behavior to reinforce positive actions.

Tolerate: Learn to differentiate between escalating behaviors and merely annoying ones. It's acceptable to have expectations for campers, understanding that some behaviors may be their way of releasing energy, tension, or anxiety, as long as they are safe.

QUIZ BREAK

Click below to test your knowledge on the previous slides.



INTERVENTION

At this stage in the behavioral model your camp director should be involved.



Even with proactive measures, campers may exhibit behaviors that require direct intervention. In emotionally charged or unsafe situations, adults must decisively address unacceptable behaviors, reinforcing camp standards. Think: Here at camp, this behavior is not acceptable.

Behaviors requiring intervention include:

- Dangerous activities (e.g., throwing rocks, climbing unsafe areas)
- Physical aggression towards others
- Verbal abuse or threats
- Ignoring camp safety rules (e.g., wandering off, pushing others)
- Sexualized behavior (e.g., inappropriate touching)
- Violating personal boundaries (e.g., stealing, property destruction)
- Disobeying adult instructions.

Behaviors that don't require intervention include:

- Negative interpersonal actions like crying, bragging, clinging, or being bossy (planned ignoring may be effective).
- Refusal to join camp activities (challenge by choice).
- Lack of cooperation with the group (reinforce positive behaviors).
- Picky eating or poor table manners (role modeling may help).
- Inappropriate behaviors like burping, nose picking, or nail biting.
- Indirect use of profanity (calling out may redirect anger).

INTERVENTION CONT.

At this stage in the behavioral model your camp director should be involved.



Unsafe Situations:

- *Do not chase a runaway camper; walk to follow them, giving space.**
 - *If a camper looks back, they may want you to follow.**
- *Inform the camper you need to keep them in sight for safety; approach slowly if they calm down.**
- *If a child heads towards camp entry or the main road, alert someone for assistance.**
 - *Use a cell phone only for necessary communication; announce a “package moving towards the main road.”**
- *If possible, position yourself between the camper and the road, as they may turn back towards camp.**

Bullying

Bullying is a deliberate act intended to harm and instill fear, leading to significant long-term effects for children, such as feeling unsafe at camp. The camp addresses bullying through direct intervention rather than conflict resolution.

There are three types of bullying:

Verbal: Insults and cruel statements aimed at the victim, the most common type.

Physical: Hitting, pushing, or intimidation

Relational: Actions intended to damage relationships, difficult to detect, and commonly used in new group dynamics, especially at camp.

There are two components to focus on when attempting to eliminate bullying within your group:

Address the Bullied:

- Supervise campers closely, as victims may not report abuse due to distrust.
- Act swiftly to stop bullying at the first sign, making it clear that such behavior is unacceptable. Communicate this to the entire group rather than isolating the bully.
- Establish a “No Bullying” rule to address the behavior immediately.

Addressing the Bully:

- DO NOT bully the bully: Your behavior cannot be retaliatory, or else you risk sending a very inconsistent message.
- Proactively name acceptable behaviors: safe, respected and loved (Is what you’re doing creating that?).
- Teach coping mechanisms by guiding bullies to express frustration appropriately, such as speaking to a counselor or taking a break.
- Model acceptance of children's quirks to promote inclusivity among campers.
- Do not force apologies, as this can escalate the situation and prevent genuine resolution.

Sexually Inappropriate Behavior

Camp provides a unique environment to explore socially sensitive topics, such as sexuality, gender preference, and personal interests, in a way that challenges comfort zones. Counselors are often seen as peers rather than authority figures, facilitating open discussions beyond typical school or home settings.

There is a strong difference between the topic of sex and the topic of sexuality. Sex is a topic that we do not engage in ever.



Navigating discussions about sexuality with children can be complex. Counselors may feel qualified to offer guidance based on personal experience, but they also represent the Camp and Foundation. Potential pitfalls include misinterpretation of advice, fabrication of information, and lack of parental consent for discussing sexual topics.

Guidelines for Discussing Sexual Topics with Campers:

- Role Modeling: Staff should demonstrate healthy interactions and relationships, as campers observe and link staff together based on their behavior.
- No Initiation: Staff must never initiate discussions about sexuality. Immediate intervention is needed if a counselor brings up the topic.

Sexually Inappropriate Behavior

Guidelines for Discussing Sexual Topics with Campers Continued:

- Redirecting Conversations: If campers repeatedly ask about sexuality, involve the camp director. Redirect discussions toward relationships, focusing on:
 - Signs of genuine affection
 - The importance of personal space
 - Differentiating love and affection
 - Understanding sexual orientation without keeping secrets
- Assessing Intent: Determine if the camper's interest is sincere or for "shock value". If conversations become inappropriate or silly, calmly halt them using phrases like:
 - "That talk isn't acceptable at camp."
 - "What you discuss with friends is your business, but not here."
 - Clarify that not all parents approve of such discussions.
- Private Conversations: Take the camper away from the group to prevent disruption and avoid giving them an audience for their provocative behavior.



Provocative or graphic talk about sex is simply unacceptable!

QUIZ BREAK

Click below to test your knowledge on the previous slides.



Abuse & Physical Contact

There are four main types of abuse: Physical, sexual, emotional and neglect.

Physical Abuse involves physical injury to a child, including poisoning, where it is known that the injury was deliberately inflicted.

Suggestive Features of Physical Abuse

- bruises or physical bites
- burns
- mouth injuries
- limb injuries that have not been addressed

Common behavioral indicators of abuse:

- overly compliant behavior
- lack of trust
- inability to concentrate
- regressive behavior
- suicidal or self-destructive
- non-participation
- aggressively acting out
- poor peer relationships
- depression
- sleep disturbances
- withdrawal

Sexual Abuse

Sexual Abuse is the use of children by others for sexual gratification. It can take many forms and include rape and other forms of sexual assaults, allowing children to view sexual acts or be exposed to or involved in pornography, exhibitionism and other perverse activities. It is the involvement of dependent, developmentally immature children and adolescents in sexual activities that they do not fully comprehend and to which they are unable to give informed consent.

Suggested Indicators of Sexual Abuse

- sexually compulsive behavior
 - self-mutilation
 - hints about sexual activity
 - suicide attempts
- sexually aggressive behavior towards others
 - fear of bedtime
- excessive attachment to adults
- reluctance to join activities that involve removing clothing



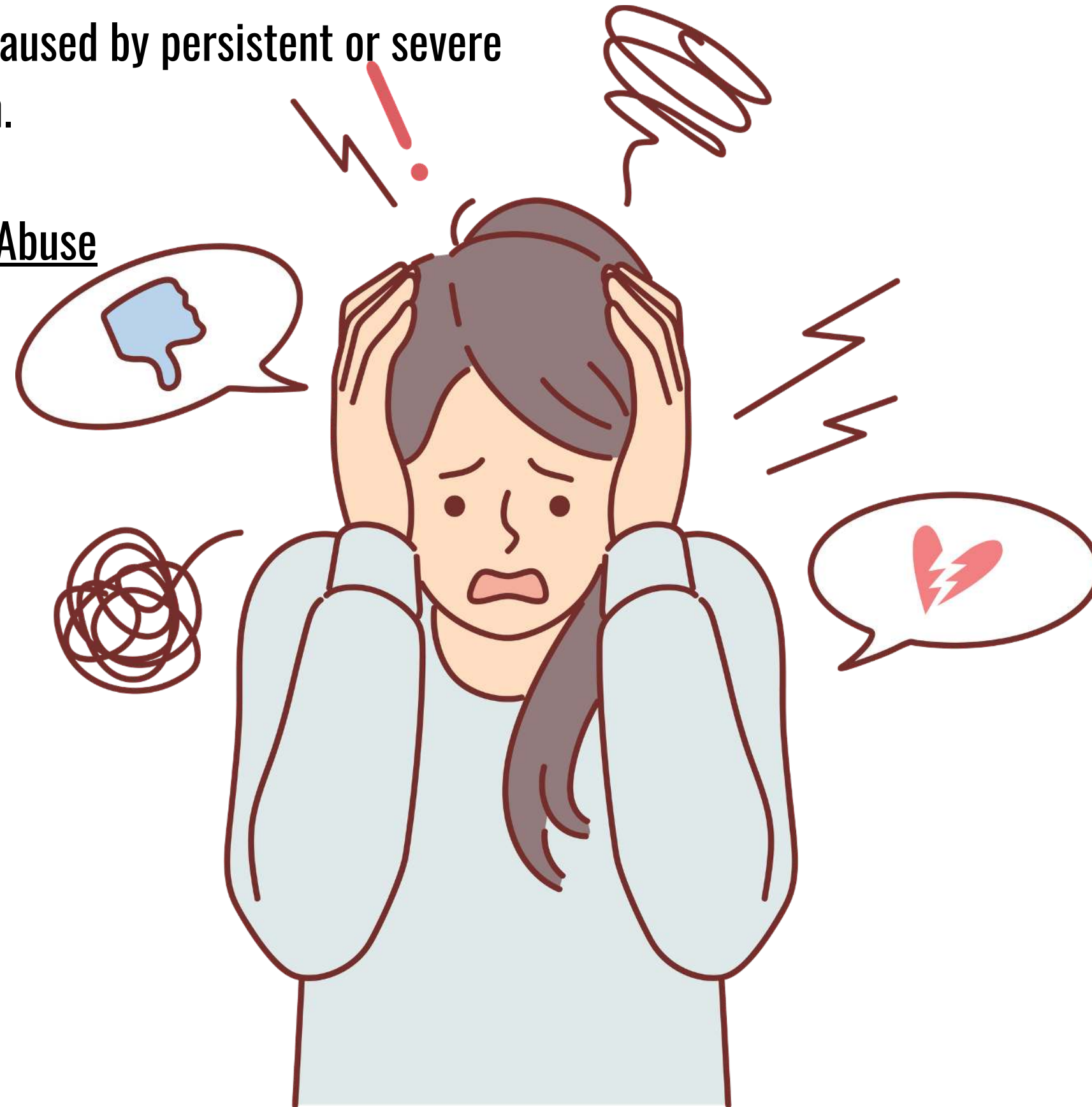
It's important to know that the above indicators are not by themselves a clear indication of abuse. In many cases, there are several indicators that contribute to a child being abused.

Emotional Abuse & Neglect

Emotional Abuse is the adverse effect on the behavior and emotional development of a child caused by persistent or severe emotional ill treatment or rejection.

Suggested Indicators of Emotional Abuse

- severe behavioral problems
- inability to play
- excessive sadness or fearfulness
- indiscriminate attachment
- loss of self-esteem



Neglect involves the failure to provide care, food and physical conditions including protection from danger, which will allow a child to develop normally. Children can be neglected intentionally or unintentionally. Unintentional neglect may be due to sufficient awareness and understanding on the part of the parents/guardians of their child's health, nutritional or developmental needs.

Disclosure and Your Reaction

If a child discloses abuse or you suspect that a child may have been abused, as staff we have a legal obligation to report these incidents. The following steps are applied:

- 1. Listen. Do not ask any questions. Avoid expressing shock or disbelief. Be neutral in your reaction.**
- 2. Reassure the child. It's ok to let a child know that you are glad they told you and that you believe them. Avoid making any promises, like keeping a secret, or telling the child that it will all be ok. It is helpful to let the child know that there are people whose job it is to help children in this exact situation.**
- 3. As soon as possible, write down the information that you heard.**
- 4. Do not react or ask questions of the child. It could count as an interview, which could be detrimental to the case.**
- 5. Report this incident to the Camp Director or Health Director as soon as possible.**
- 6. There may be a need to follow up with the camper in some incidents.**
- 7. The Camp Director or Health Director will report the incident to the authorities if appropriate.**
- 8. Do not discuss this with any other staff members! Confidentiality is crucial!**

Please Remember:

Thoughts of abuse must be reported to the Camp Director or Medical Director immediately! You cannot promise confidentiality. You have a legal duty to report what you have learned. If comfortable, explain to the child that you will need some help to deal with what they have told you. Explain to the child what you need to do next and to whom you have to speak.



PRECAUTIONS

Take these precautions to ensure that you are always in a position to avoid accusations of any kind:

1. Never be alone in a closed room with a camper or group of campers where you cannot be observed. At camp we call this No Isolated Moments. Always be in the line of sight of other staff members or in an open area when there is a need to speak to a child alone. Do not go back to your den with a camper without bringing someone else.
2. If a camper is tired and wants to lie down and rest, take them to the Health staff to make arrangements for rest.
3. Have other staff present when supervising showers. Keep the door open and monitor between the bathroom and the sleeping area.
4. Never lay down on a bed with a child for any reason. Always sit up with at least one foot on the ground.
5. Do not ask another camper to climb into bed with you.
6. Allow campers to initiate hugs or placing arm around you. It is ok for a child to reject a form of affection. It is safer for you as a staff member to let the child initiate the contact. It is important to factor the age and the gender of the child when allowing affection. We encourage hand bumps and high fives!
7. Protect your privacy. Children will look up to you and will want to learn as much about you as possible. Keep your life private when it comes to topics such as dating, how you spend your social time, and with some older campers, sexual topics. This is primarily common sense, and it should be practiced daily. Also be aware of the conversations you have within earshot of the campers.
8. Respect the child's privacy. As you attempt to create a friendship and connection with your campers, be mindful that they may not want to share a great deal of information with you. Allow them to choose what they share outside of what is necessary to monitor the health and safety of the child.
9. Allow campers to apply their own sunscreen and lotion bug spray.

Touch can communicate kindness, but it can also create serious issues for children who have been physically or sexually harmed. As a trusted adult, the way you interact matters. Keep a balance between being supportive and keeping yourself out of situations that could be taken the wrong way.

Appropriate:

- Sitting beside children
- Lightly and briefly patting a child on the back or arm
- Holding hands (when age appropriate)
- Gently ruffling a child's hair
- Combing, Brushing or braiding hair (don't share combs, or brushes)
- Hugs – if requested or initiated by camper (get on their level)

Inappropriate:

- Roughhousing (wrestling or hot hands)
- Pulling arms, pinching, hitting
- Placing a hand on the back of a child's neck to guide
- Forcing a hug on a child
- Allowing a child to lie down next to you on the bed
- Back rubs
- Kissing the child anywhere on their face or body
- Physically guiding children where you want them to go

ALWAYS REMEMBER TO CONSIDER THE AGE OF ANY CAMPER WHEN MAKING A DETERMINATION ABOUT WHAT IS/IS NOT APPROPRIATE. WHAT WORKS WITH A SEVEN-YEAR-OLD MAY NOT WORK WITH A 15-YEAR-OLD.

QUIZ BREAK

Click below to test your knowledge on the previous slides.



Important Reminders!

- A MEMBER OF THE HEALTHCARE STAFF WILL BE AVAILABLE AT ALL TIMES WHEN CAMPERS ARE ON SITE.
- ALL CAMPERS AND STAFF WEAR SUNSCREEN EVERY DAY! SUNSCREEN WILL BE PROVIDED. APPLY BEFORE GOING OUTSIDE AND REAPPLY THROUGHOUT THE DAY, EVERY 4-6 HOURS. IT IS NOT ACCEPTABLE FOR US TO SEND CAMPERS HOME WITH SUNBURNS THAT COULD HAVE PREVENTED!
- HANDWASH OR HAND SANITIZER FREQUENTLY!
- REMEMBER TO USE UNIVERSAL PRECAUTIONS WITH EVERYONE.
- EVERYONE NEEDS TO GET ENOUGH SLEEP TO HAVE ENERGY FOR LONG, FUN-FILLED DAYS - CAMPERS AND STAFF!
- ADEQUATE HYDRATION IS A VITAL PART OF CAMP LIFE! ENCOURAGE FLUIDS THROUGHOUT THE DAY. WATER STATIONS WILL BE AVAILABLE AT EACH ACTIVITY AREA
- APPLY INSECT REPELLENT FOR ALL OUTDOOR AND EVENING ACTIVITIES. BUG-BITTEN KIDS DO NOT MAKE FOR HAPPY CAMPERS. BE AWARE THAT AEROSOL AND PUMP BUG SPRAYS CAN TRIGGER ASTHMA ATTACKS IN SOME PEOPLE.
- FEMALES MUST WEAR A MODEST ONE-PIECE SWIMSUIT OR TANKINI STYLE SWIMSUIT. BIKINI BATHING SUITS AREN'T ALLOWED WHEN CAMPERS ARE PRESENT. MEN MAY NOT WEAR RACING OR "SPEEDO" TYPE BATHING SUITS.
- SHIRTS MUCH COVER THE MIDRIFF. SHORTS MUST BE AN APPROPRIATE LENGTH (SHORTS MUST REACH TO THE FINGERTIPS OF THE EXTENDED ARM). NO LOW-CUT TOPS ALLOWED. SANDALS MUST HAVE STRAPS ON THE HEELS.
- ALL CAMP STAFF SHOULD BRING A BACKPACK FOR ESSENTIAL CAMPER AND STAFF ITEMS THAT MAY BE NEEDED THROUGHOUT THE DAY. ALL STAFF WILL BE PROVIDED SUNSCREEN, BUGSPRAY, AND OTHER COUNSELOR SURVIVAL ITEMS.



Remember...You are a role model for your campers. You need to model good behavior. They will do what you do. That means YOU need to wear SUNSCREEN, get enough REST, drink plenty of FLUIDS, HANDWASHING, and use INSECT REPELLENT.

thank you

THANK
you

THANK
YOU

thank
★ you ★

Thank You!