

**Outdoor Extension Mission Statement** - To incorporate authentic learning experiences from the outdoors and provide enrichment opportunities for students to explore nature through academics and community building activities. Through our partnership with the **Youth Opportunities Program** and as youth outdoor leaders, we will be able to create more experiences for students in the outdoors with a focus on team building, practicing student leadership, developing resilience, and independence.

The outdoor club activities will include but are not limited to: day hikes, rock climbing, team building and various ideas from outdoor education.

### **Overnight Field Trip Proposal Fall Festival at Noble View Outdoor Center**

1. This outdoor opportunity will only allow for us to take ten students in grades 6-8 who are part of the Outdoor Club.
2. The trip will give students an opportunity to put their learning into practice while celebrating the season. It will expose students to outdoor activities such as hiking and camping and provide students with the opportunity to develop leadership skills which they can utilize when returning to school.
3. The Outdoor Club curriculum which will be utilized on this trip include activities such as knot tying, "Leave No Trace" techniques, orienteering, etc...
4. Outdoor Adventure Details:
  - a. Information attached. Please see flyer
  - b. Our destination is to Noble View Outdoor Center in Russell , Ma (see attached flyer). The center is owned by the Appalachian Mountain Club (AMC) and the trip will be run by AMC staff. We will depart from the school parking lot at 7:30am on Saturday, 10/3, and return on Sunday, 10/4, at 4pm.
5. Transportation will be provided by Steve Cullen and Jaime Moody.
6. Overnight accommodations will be organized by AMC/YOP staff. Boys and girls will sleep in tents which will be arranged in separate parts of the Outdoor Center.
7. The total cost of the trip is \$15 per student. (\$12 for registration plus \$3 for transportation)
8. Ten of the nineteen Outdoor Club members will participate in the trip along with two adults.
9. Steve Cullen and Jaime Moody will chaperone the trip along with AMC/YOP staff. All adults at the Noble View Center are required to have CORI checks.
10. Information packet is included.
11. Medical care will be provided by AMC/YOP staff. All students are required to complete an AMC permission/ health form packet.
12. Permission slip is attached.

13. Please see attached agenda. Parent meeting will take place on Friday, September 25th at 4pm in room 1145
14. Outdoor Club students who are interested in attending the trip will write an essay about why they should be selected to attend. Ten students will be selected. Students who are not selected will be given priority for the January overnight trip.
15. Field trip forms are attached

**The Lincoln School  
Field Trip Permission Slip**

September 12, 2015

On Saturday-Sunday, October 3-4, students in the Lincoln School's Outdoor Club will have the opportunity to participate in an overnight field trip at the AMC's Noble View Outdoor Center in Russell, Massachusetts. This trip allows students the opportunity to utilize the skills learned in the Outdoor Club and to be exposed to outdoor opportunities such as hiking and camping. The AMC sponsored Fall Festival will be led by AMC staff and will allow the students to enjoy: a day of hiking, camping out, seasonal foods, campfire stories, campsite decorating contests, the "Heroes & Villains" theme with costumes provided and of course, the beautiful fall foliage in Western Mass. The total cost of the trip is \$15.00 (\$12 for registration plus \$3 for transportation).

Sincerely,

Steve Cullen & Jaime Moody

\_\_\_\_\_

I \_\_\_\_\_ hereby consent to my son / daughter's participation in the trip to The Noble View Outdoor Center on October 3-4. We will be leaving school on Saturday, 10/3 at 7:30 a.m. and returning on Sunday, 10/4, at 4:00p.m.

I understand that transportation and supervision will be provided by Steve Cullen and Jaime Moody. I hereby also consent to whatever arrangements are made for my son or daughter generally consistent herewith, and any reasonable arrangement in case of emergency, including arrangements for emergency transportation and/or medical care, which is deemed necessary in such situation by the teacher, or if unavailable, by any other adult supervisor. I understand that reasonable precautions for safety will be taken.

Name of Child \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Please return this form along with \$15.00.

**\*\*Mandatory parent meeting on Friday, September 25<sup>th</sup> at 4pm in room 1145.**

Lincoln Public Schools  
Lincoln, Massachusetts

Oct 3<sup>rd</sup> & 4<sup>th</sup>

# LATE NIGHT AND OVERNIGHT FIELD TRIP PROPOSAL

» to be submitted 3 months prior to approval date «

Please refer to School Committee Policy File: ICCA

School: Lincoln School (Brooks) Grade(s): 6-8  
 Number of Students: 10 % Class/Group: ~~100~~ Outdoor Club  
 Destination: Noble View Outdoor Center Russell, MA  
 Address: \_\_\_\_\_ Telephone# \_\_\_\_\_  
 Dates: Oct. 3-4  
 Departure Time: 7 am (10/3) Return Time: (10/4) 4 pm

## Costs for the Trip:

Transportation: 0 # of Buses \$ 0

Admissions: 10 # students x \$ 12 /each = \$ 120  
2 # adults x \$ 12 /each = \$ 24

Total \$ \_\_\_\_\_

## Accommodations:

Teacher Stipends (overnight trip): \_\_\_\_\_ # teachers x \$ 0 /each \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Cost Per Student: \$ 12-

Supervising Teacher: Steve Cullen [Signature]

Teacher(s)/Chaperone(s) Name (Print)\*

Steve Cullen

Jane Moody

Signature

Steve Cullen

Jane Moody

\*If chaperones are not identified at the time the trip is proposed, a complete list must be provided by the supervising teacher to the Principal prior to departure.

Have arrangements been made to ensure that all students can participate? ☒ yes ☐ no

Describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Who will be responsible for: first aid \_\_\_\_\_ medications \_\_\_\_\_  
 epi pen \_\_\_\_\_

Nurse Contacted: ☐ Yes ☐ No

Nurse's Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ Approved

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ Disapproved

☐ Approved

Superintendent's Signature \_\_\_\_\_ Date \_\_\_\_\_

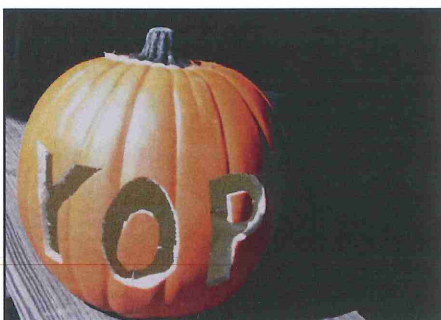
☐ Disapproved

Attach statements addressing each of the following: relevance to educational program and explanation of purpose of trip; destinations and itinerary of trip; explanation of transportation plan; explanation of arrangements for accommodations; copies of information and communications to be given to parents; agenda for parent information meeting(s). [See Policy IICA for more details.]



# Fall Festival

Noble View Outdoor Center Russell, MA | October 3-4



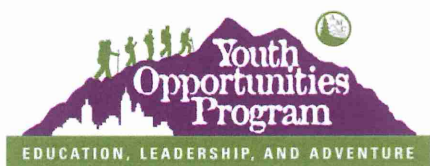
- Join YOP staff, volunteers, members and youth to celebrate the season at our Noble View Fall Fest!
- Campsites are available for groups of 12 or less.
- Witness the spectacular fall foliage in Western Mass.
- Enjoy a day of hiking and YOP led activities.
- Savor seasonal cuisine and a moon lit walk through the Noble View forest .
- Settle down by the fire and enjoy a special dessert and plenty of campfire stories about this unique and historic New England homestead.
- Snacks, Dinner and breakfast provided (Lunch on your own)
- Cost: \$12 per person

## Register Now!

Return the attached registration form. Pre-registration is required.

## Questions?

Lindsay Watkins | *Appalachian Mountain Club - Youth Opportunities Program*  
5 Joy Street  
Boston, MA 02108  
617-391-6591  
[lwatkins@outdoors.org](mailto:lwatkins@outdoors.org)



Photos by Jennifer Bauer



# Noble View Fall Festival

Once you have returned this registration form, you will receive a confirmation packet with medical and release forms and other details. **The medical and release forms must be filled out and signed by youth and parents and returned to YOP at least one week before the trip.**

Food, lodging and festive fall games and activities included. Meet Saturday morning, depart Sunday afternoon.

## REGISTRATION FORM

Event	Cost	Event Date
<input type="checkbox"/> Noble View Fall Festival	\$12 per person	October 3-4, 2015

YOP Leader Name: \_\_\_\_\_

Agency: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Number of staff: \_\_\_\_\_ Number of youth: \_\_\_\_\_

Date of equipment PICK UP at Joy St for this event: \_\_\_\_\_ Time: \_\_\_\_\_

Date of equipment DROP OFF at Joy St for this event: \_\_\_\_\_ Time: \_\_\_\_\_

**PAYMENT in full is required when registering for all youth events.**

**I would like to register for the event indicated and have enclosed full payment of \$ \_\_\_\_\_.**

☐ Personal Check ☐ Agency Check ☐ Money Order

Please make checks payable to Appalachian Mountain Club/YOP

Please bill my credit card: ☐ Visa ☐ MasterCard ☐ American Express

Card Holder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### CANCELLATION

Cancellation received more than 14 days in advance will result in a full refund. Cancellation received less than 14 days before the event will result in loss of refund. If you cancel and YOP is able to fill your space, 100% of the payment will be returned. A full refund will be issued if the event is cancelled. Pre-trip meetings are considered the start of a workshop. Please note that all programs are heavily grant-funded and cancellations have a negative impact on YOP's budget.

### THE YOUTH OPPORTUNITIES PROGRAM

Since 1968, the Appalachian Mountain Club's (AMC) Youth Opportunities Program (YOP) has introduced over 100,000 youth to the outdoors. YOP offers outdoor leadership and skills training to Boston and New York City area youth workers so that they may in turn lead the youth they serve outdoors. Once successfully trained on an Outdoor Leadership Training youth workers may borrow YOP equipment at no cost to make outdoor trips with their youth a reality. Workshops are taught by experienced youth workers, accomplished in leading outdoor trips, who understand the specific needs and challenges of taking groups of youth into the woods. Free equipment use, reduced rates at AMC lodging destinations, trip planning assistance, and networking are just a few of the many exciting resources YOP has to offer.

### FOR MORE INFORMATION CONTACT:

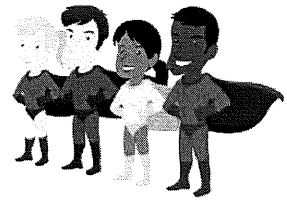
Youth Opportunities Program / Appalachian Mountain Club, 5 Joy Street, Boston, MA 02108  
Phone: 617-391-6637 Fax: 617-523-0722 [www.outdoors.org/yop](http://www.outdoors.org/yop)

### THE APPALACHIAN MOUNTAIN CLUB

Founded in 1876, the Appalachian Mountain Club is America's oldest conservation and recreation organization. We promote the protection, enjoyment, and understanding of the mountains, forests, waters, and trails of the Appalachian region. We believe these resources have intrinsic worth and also provide recreational opportunities, spiritual renewal, and ecological and economic health for the region. Because successful conservation depends on active engagement with the outdoors, we encourage people to experience, learn about, and appreciate the natural world. The AMC is a nonprofit membership organization with over 100,000 members, advocates, and supporters. Our 12 chapters reach from Maine to Washington D.C. Our goal is to be a community which is comfortable, inviting, and accessible for people of any age, gender, race, religion, ethnicity, ability, sexual orientation, or socioeconomic status.



FALL FEST 2015 PRESENTS...

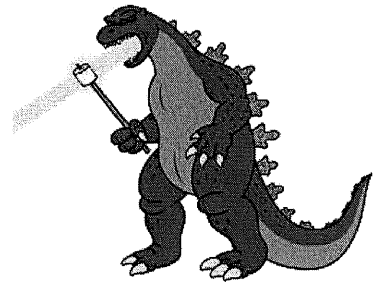


# SUPERHEROES AND VILLIANS!



Join us at Noble View October 3<sup>rd</sup> and 4<sup>th</sup> where you will meet some of the greatest outdoor superheroes and evilest supervillains of our time, such as...

- Captain Leave No Trace
- The Incredible Tarp Man
- The Human Flame
- Trashzilla



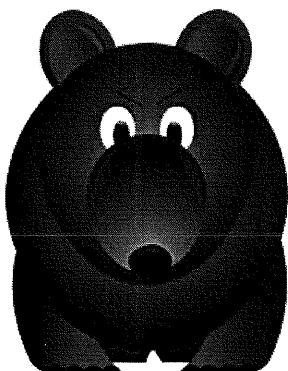
And for the first time in Fall Fest history, be ready for the...

## CAMPSITE DECORATING CONTEST!

- Groups will have one hour to set up tents and decorate their site
- Come prepared with the materials you need – to be villains or heroes!
- All decorations must be Leave No Trace appropriate
- We will vote on the best campsite!



\*\*\*Costumes are very encouraged!\*\*\*





## FREQUENTLY ASKED QUESTIONS

### FALL FESTIVAL AT NOBLE VIEW OUTDOOR CENTER

#### What's with the Fall Fest theme?

#### Where are we going exactly?

We will meet at 11:00 AM the morning of Saturday, October 3 at Noble View Outdoor Center in Russell, MA. Please find and check in with YOP Staff who will give your group a short tour of the facilities and show you your assigned camp space. Groups will then eat lunch and enjoy the rest of the day. Directions and other details can be found in this packet. If you are traveling on I-90 please bring money for tolls.

#### How many kids can I bring?

The maximum number of participants from any agency will be 12. This includes **1-2** staff, one of whom must be an OLT trained YOP member. When we have a better idea of exact numbers it may be possible for agencies to bring more kids. Call us if you are looking to bring more kids and we will do our best but there are no guarantees.

#### Can we wear Costumes?

Absolutely! Be creative! Costumes are definitely welcome but not mandatory, and group costumes are even better! We **DEFINITELY** recommend planning to decorate your campsite! **If you have any favorite fall activities or customs that you would like to add to our agenda, please email Lindsay so we can add it into the schedule!**

#### Do I have to get gear (tents, sleeping bags, etc.) for my kids?

Yes! We ask that you fill out your equipment request form and make an appointment well in advance to pick up all personal gear and group gear you will need for the trip. Your group will need all gear and clothing necessary to camp and be comfortable outside for 2 days. Please fill out an Equipment Request Form and participant list with sizes so we can make sure all requested gear will be available for Fall Festival participants. We will do our best to outfit you with gear from the closest gear site (Boston, Worcester, or Noble View). You will be responsible for picking up and returning gear!

#### Where will my group be sleeping?

Groups will be sleeping in tents near the cabins and the bathhouse, which includes toilets and showers. Groups will gather outside for meals and activities. Meals will be served inside if we have inclement weather.

#### What if it rains?

Fall Fest will run rain or shine. In the case of severe inclement weather YOP may cancel the event. Lindsay will call you the night before the event if bad weather causes a cancellation and you will receive a full refund. Fall Fest 2014 was a blast despite heavy rain all day on Saturday—we will plan accordingly and have fun regardless!

#### What about water?

Noble View Outdoor Center has a bathhouse. Though there is no running water anywhere else onsite, the bathhouse is used for filling up water jugs for cooking and cleaning. There are also shower facilities and toilets in the bathhouse.

#### What about food?

YOP will provide dinner on Saturday, breakfast on Sunday, and plenty of snacks. **AGENCIES ARE RESPONSIBLE FOR LUNCH ON OCTOBER 3-4.** If there are special dietary needs please make sure they are noted on the medical forms **and** communicated to Lindsay well in advance. If you need help planning your lunch menu, we are happy to suggest some good options. YOP staff and volunteers will hold a **SOUP OFF competition** on

Saturday evening. Groups are welcome to make a soup (in advance or at Noble View) to participate and have a chance at the 2015 Soup Off title. Please let Lindsay know if you are planning to participate in the Soup Off so that we can plan kitchen space accordingly. **Groups should bring plates, bowls, silverware, and mugs for all participants!**

**Our agency does not have a medical kit... what should I do?**

YOP encourages all who take kids outdoors to take a Wilderness First Aid course and have a properly stocked medical kit. For this trip, YOP will have two First Aid Kits available for all groups. YOP encourages you and your staff to take the initiative with any medical issues concerning your group, but do not hesitate to ask the staff for help or advice.

**What are the supervision expectations for agency staff, YOP staff, and volunteers?**

As with any other trip, you and your staff are responsible for your youth. Different agencies have different guidelines concerning supervision guidelines. YOP will facilitate many activities and games throughout the trip. We encourage youth from different agencies to interact during the activities and ask that all be respectful of the different educational and supervision methods agencies employ with their kids. All staff and youth should plan on participating in all planned activities.

**What will we do during the Fall Festival?**

There will plenty of fall-themed games, skill building activities, initiatives, and fun for all at Noble View. Groups will also have time for their own activities, including hikes, games, and group meetings. All groups will have their own space camping. Please become familiar with the attached agenda to plan your free time. Night time activities will include a YOP-led night walk and campfire.

**What items should be left at home?**

In order for all to enjoy the natural and historic setting of Noble View Outdoor Center, YOP asks that you have your kids leave the following at home: iPods, cell phones, other electronics, and any other items you feel may be distracting. **Alcohol, illegal drugs, and firearms are prohibited. Smoking is illegal for anyone under the age of 18.** YOP will provide a "Bag of Tricks" (balls, Frisbees, etc.) and encourages agencies to bring their own props and games as well.

**Can my group have some "alone time"?**

Absolutely. Time has been built into the itinerary for your group to spend any way you want. YOP asks that all groups help with setting up and breaking down camp and cleanup of the cottages on Sunday, and that all groups participate in all activities.

**Is there cell phone service?**

Yes, there is cell phone service at Noble View **in case of an emergency**. Please have at least one adult leader bring a cell phone in case of an emergency on the trail. Contact Lindsay Watkins the day of the trip (717-329-3073) if you are going to be late to the event.

## 4<sup>TH</sup> ANNUAL YOP FALL FESTIVAL AT NOBLE VIEW OUTDOOR CENTER

OCTOBER 3-4, 2015

### SATURDAY 10/3

- 10:30-11:30am GROUPS ARRIVE /Greeted by staff and volunteers/ unload and find camping areas  
Tour of facilities and safety talk with YOP volunteers  
SET UP CAMP  
Short walk/hike if time
- 11:45am Leader Meeting with Lindsay in Double Cottage (YOP member from each group).  
Review itinerary for the day, review activities and plan station rotation
- 12:30pm Lunch (Please bring lunch for Saturday and Sunday)
- 1:00pm Large group icebreakers and games
- 2-4:30pm FALL FEST ACTIVITIES!  
**Apple baking at the Fire Pit:** Design and bake your own apple treat on an open fire  
**The Fire Building Challenge:** Learn how to build a fire and keep it burning  
**Outdoor Cooking:** Learn to make your own kettle corn on a camp stove  
**Toxic Pumpkin Juice:** Challenge your team to a mind bending, team building initiative  
**Navigation:** Learn the basics of navigating the woods at Noble View with a compass  
**Andy Goldsworthy Nature Art:** Create art with nature
- 5:00pm Flex time before dinner
- 5:30-6:30pm SOUP OFF! DINNER/ANNOUNCEMENTS
- 7:00-9:00pm Evening activities:  
**Night Walk**  
**Campfire**  
**Stargazing**
- 9:00 CAMPFIRE and dessert, free time
- 10:00 Group check-ins: Plans for tomorrow/quiet time begins
- 11:00 LIGHTS OUT/campfires out. (You are responsible for making sure youth are quiet and respectful of other groups around them and that your fire is safely extinguished)

### SUNDAY 10/4

- 7:00am Group wake-up call
- 8:00am BREAKFAST AND ANY LAST MINUTE REMINDERS AND ANNOUNCEMENTS
- 9:00am ENERGIZER GAME and closing activity with all groups  
Theme awards!  
Leader check in with maps and plans for the day
- 9:30am Time to pack and load gear  
Groups on their own for hikes and lunch on the trail
- 3:00pm YOP staff depart from Noble View. Groups are welcome to stay, but please remove all items from the cottages before 3:00pm so staff can clean and lock up.

## **2015 FALL FEST TRIP PLANNING CHECKLIST**

### **ASAP**

- ☐ Distribute recommended packing list to all participants
- ☐ Distribute AMC forms and waivers to ALL participants and adult leaders on the trip
- ☐ Fill out a gear request form and make a pick up and drop off appointment with Lindsay ([lwatkins@outdoors.org](mailto:lwatkins@outdoors.org)) or Ian Dulin ([idulin@outdoors.org](mailto:idulin@outdoors.org))

### **2 WEEKS BEFORE THE TRIP (AROUND SEPTEMBER 18)**

- ☐ Trip invoice paid to YOP. (If you cancel less than 14 days before your trip date you will be responsible for the full cost.)
- ☐ Make a gear pick up and drop off appointment with Ian if you have not done so already
- ☐ Optional but suggested: hold a pre-trip meeting with trip participants to go over expectations for the trip, the itinerary and packing list, and to brainstorm ideas for your campsite!

### **THE WEEK BEFORE THE TRIP (AROUND SEPTEMBER 25)**

- ☐ Confirm final headcount with YOP **NO LATER THAN SEPTEMBER 30**
- ☐ Inform YOP staff of any allergies or special dietary issues **BY SEPTEMBER 30 PLEASE!**
- ☐ Make sure you have picked up gear for your group
- ☐ Be sure you have collected AMC medical forms, liability waivers, and photo release forms for all participants

### **THE DAY OF THE TRIP (SATURDAY, OCTOBER 3, 2015)**

- ☐ Arrive at Noble View Outdoor Center at **10:30** with lunch for both Saturday and Sunday and **ALL ORIGINAL FORMS** (medical, waiver, photo release) **FOR ALL PARTICIPANTS!**
- ☐ Be prepared to set up your campsite with your youth and have your itinerary handy
- ☐ Ensure that you bring any medication that participants may need
- ☐ Be prepared to lead games with your youth
- ☐ Bring toll money (if needed)
- ☐ Attend the trip leader meeting at 11:45am in Double Cottage
- ☐ Have fun!

### **AFTER YOUR TRIP**

- ☐ Schedule an appointment with Ian to return all YOP gear to the gear site from which you borrowed it
- ☐ Submit a trip report and evaluation to Lindsay and send along any great photos!





**Appalachian Mountain Club – Youth Opportunities Program  
Confidential Health Questionnaire**

**Participant Name:** \_\_\_\_\_  
First Middle Last

**YOP Program Name:** \_\_\_\_\_ **Course Start Date:** \_\_\_\_\_

**Birthday:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ ☐ Male ☐ Female  
Month/Day/Year

**Home Address:** \_\_\_\_\_  
Street City State Zip code

**Phone #s:** \_\_\_\_\_  
Day Evening Cell

**Emergency Contact:** \_\_\_\_\_  
Name Relationship

**Emergency Contact's Phone #s:** \_\_\_\_\_  
Day Evening Cell

**SEVEN-QUESTION HEALTH QUESTIONNAIRE**

*Parent or legal guardian should complete form for all children under 18 years participating in AMC activity.*

	Yes	No
<b>1. Have you experienced an asthma attack at any time in your life?</b> (Asthma can potentially be affected by exercising at altitude, in dry air, extreme cold, etc.)		
<b>2. Have you ever been diagnosed with type I or type II diabetes?</b> (A diabetic can easily become dehydrated in backcountry environments. Further, long, arduous days/hikes can lead to hypoglycemia, etc.)		
<b>3. Have you ever visited a medical professional for a serious allergic reaction, or have you ever been given a shot of epinephrine for an allergy or anaphylaxis?</b> (Some people are allergic to stinging insects; nut products or other food products which a co-participant might be carrying or may be included in a meal prepared by AMC staff; iodine, which might be used to treat drinking water and/or clean wounds, etc.)		
<b>4. Have you ever received medical treatment for angina, a heart attack, or any type of heart disorder/disease?</b>		
<b>5. Have you ever been diagnosed with or are you currently being treated for high blood pressure?</b> (The environment and workload associated with AMC courses can sometimes affect BP and/or the efficiency of some BP medications.)		
<b>6. Have you ever seen a medical professional following a seizure, or are you currently being treated for any type of seizure disorder?</b> (Some seizures are triggered by fatigue and dehydration [which can occur following a long hike], significant change in diet, stress, etc.)		
<b>7. Is there anything else you think we should know about your medical background?</b> (i.e., anything that could affect your safety or ability to participate fully?)		

**If you answered YES to ANY of the seven questions above please answer the following:**

- I was diagnosed with \_\_\_\_\_ in the last year.
- I have visited the emergency room in the last year due to \_\_\_\_\_
- I have had to use epinephrine following an asthma attack/allergies or anaphylaxis in the last year?
  - Will you be bringing/carrying epinephrine on the outing? \_\_\_\_\_
  - What are you allergic to? \_\_\_\_\_
- How often do you use your inhaler to treat your asthma or wheezing? \_\_\_\_\_
- Do you have poor circulation due to your diabetes? \_\_\_\_\_
- Will you be carrying insulin or wearing an insulin pump during your outing? \_\_\_\_\_
- Are you able to exert yourself for more than 30 minutes without experiencing angina (chest) pain? \_\_\_\_\_
- Are you currently taking medication for your seizures? \_\_\_\_\_
- Have you experienced a seizure within the past year? \_\_\_\_\_
- Is your blood pressure currently under control (i.e., systolic under 140 and diastolic between 60 and 100)? \_\_\_\_\_

If there is anything else you think we should know about your medical background, please explain below. Attach a separate sheet if necessary.

**DIETARY RESTRICTIONS:** Do you have any dietary restrictions? ☐ Yes – list below ☐ No

**Please be specific:** (food allergies, iodine/seafood allergy, vegetarian, no red meat, vegan, lactose intolerant, strong food dislikes, etc.) \_\_\_\_\_

**PLEASE READ CAREFULLY!** Participants (or parents/guardians, if appropriate) must read and sign below.

**Participant acknowledgement of accuracy and understanding.** By signing this form, I am declaring that, to the best of my knowledge, I have completed the questionnaire accurately. I also understand that by knowingly filling out the form inaccurately, or by withholding pertinent information about my health, I could potentially be increasing the risk to myself or others.

**Consent to accept aid.** By signing this form, I am giving consent and permission for AMC staff, volunteers, representatives, or contractors to provide medical care to me or to my child, to transport me or my child to a medical facility or to seek the aid of emergency medical services as deemed appropriate. I further authorize AMC staff, volunteers, representatives, or contractors to render whatever treatment they consider necessary for my or my child's health, and I agree to pay all costs associated with that care and transportation.

\_\_\_\_\_  
Participant's name (printed)

\_\_\_\_\_  
Participant's signature

\_\_\_\_\_  
Signature of parent/guardian (if applicant is under 18)

\_\_\_\_\_  
Date

**APPALACHIAN MOUNTAIN CLUB PARTICIPANT**  
**ACKNOWLEDGMENT AND ASSUMPTION OF RISKS & RELEASE AND INDEMNITY AGREEMENT**

**INTRODUCTION**

**PLEASE READ THIS ENTIRE TWO-PAGE DOCUMENT** (hereafter 'Document') **CAREFULLY BEFORE SIGNING.** All participants must sign this Document. For participants under 18 yrs. of age (hereafter sometimes 'minor' or 'child'), one or both parent/s or guardian/s (hereafter collectively 'parent/s') must also sign. In consideration of the services of the Appalachian Mountain Club, Inc., a charitable, not-for-profit corporation, organized and existing under the laws of Massachusetts, and its chapters, including all officers, directors, employees, representatives, agents, independent contractors, volunteers (including leaders and co-leaders), members and all other persons or entities associated with it (collectively referred to in this Document as 'AMC'), I (participant and parent/s of a minor participant), **acknowledge and agree as follows:**

Appalachian Mountain Club contracts with individuals or organizations that are independent contractors (not employees or agents of Appalachian Mountain Club) to conduct some of the activities participants may engage in. Although the Appalachian Mountain Club has made efforts to locate responsible contractors, it does not supervise or control these contractors and is not responsible for their conduct. Participant (and parent/s) acknowledge that they may independently investigate and assess these organizations and activities, if they choose to do so. **Further, Appalachian Mountain Club uses volunteers to assist with, and sometimes lead activities, workshops or programs. These individuals are not paid professional guides or leaders. In all activities, all participants share in the responsibility for their own safety and the safety of the group.**

**ACKNOWLEDGMENT & ASSUMPTION OF RISKS**

AMC instructional, educational and/or adventure activities (which may be scheduled or unscheduled, supervised or unsupervised and/or occur during free time) include, but are not limited to hiking, backpacking, camping, biking, skiing, snowboarding, snowshoeing, high and low ropes courses, trail work, maintenance of facilities, mountaineering, rock and ice climbing, canoeing, kayaking, sailing, swimming, environmental education, wilderness emergency medical training, first aid and rescue, participation in volunteer service projects, use of AMC huts or other facilities and transportation or travel to and from activities (referred to in this Document as 'activities' or 'these activities'). **These activities include inherent and other risks, hazards and dangers** (referred to in this Document as 'risks') **that can cause or lead to injury, damage, death or other loss to participant or others. The following includes some, but not all of those risks:**

**Risks present in an outdoor, mountainous or wilderness environment on land or water, both on and off trail.** Travel can be subject to storms, strong winds, avalanches, currents, waves, whitewater, lightning, rapidly moving rivers or other water bodies, difficult stream crossings, snow or ice, extremely hot, humid or cold weather or water, steep terrain, falling rock, stinging or disease carrying animals or insects, wild animals and other natural or human-made hazards and dangers. Hazards may not be marked and weather is unpredictable year-round.

**Risks in decision making,** including, without limitation, the risk that AMC may misjudge a participant's capabilities, health or fitness level, or misjudge some aspect of instruction, medical treatment, weather, terrain, water level, or route location.

**Personal health and participation risks.** The risk that a participant's mental, physical or emotional condition (disclosed or undisclosed, known or unknown) combined with participation in these activities could result in injury, damage, death or other loss.

**The risk that equipment used** in an activity may be misused, or may break, fail or malfunction.

**AMC activities may take place in remote places,** several hours or days from any medical facility, causing potential delays or difficulties with communication, transportation, evacuation and medical care.

**Risks connected with meals and/or cooking and camping chores.** Meals may include exposure to food allergens. Risks also include gas explosion, scalding or other burns associated with cooking over a gas stove or open fire, and water contamination from natural water sources. All water may be contaminated and should be disinfected, filtered or boiled before use.

**Risks associated with AMC facilities and premises,** including boulders, ruts, slippery walkways, ponds or other water sources, uneven ground or other conditions.

**Risks associated with transportation.** Travel can be on foot or by vehicle, bicycle, boat or other means and can be over rough and unpredictable terrain or via oceans or rivers, with wind, rain, or other adverse weather conditions.

**Volunteer community service.** Risks associated with activities such as (but not limited to) building, digging and trail maintenance, painting, construction and clean-up projects. Projects can include the use of tools and equipment (i.e. drills, saws, power tools) that can cause injury resulting from use, misuse or malfunction.

**Risks regarding conduct,** including the potential that the participant, or other participants or third parties (e.g. general public, rescue squad, medical facility) may act carelessly or recklessly.

**Participants may have limited, unsupervised time** during, before or after the start of an AMC program. This may include periods of free time, or periods of time alone while engaged in backcountry travel. **During both supervised and unsupervised activities, all participants share in the responsibility for their own safety and the safety of the group.**

**Other risks** that are generally associated with instructional, educational and/or adventure activities.

**These and other risks may result in participants falling, being struck, colliding with objects or people, experiencing vehicle or boat collision or capsizing, drowning, reacting to weather conditions or increased exertion, suffering gastro-intestinal complications or allergic reactions, becoming lost or disoriented, or experiencing other problems. These and other circumstances may cause hyperthermia, hypothermia, frostbite, dehydration, burns, heart or lung complications, broken bones, concussions, paralysis, mental or emotional trauma, or other injury, damage, death or loss.**

2/23/10 RMT

**I (participant and parent/s of a minor participant) agree:**

- To accurately complete all required forms (which may include, but is not limited to the AMC application, registration and medical forms), abide by the terms of those documents, and obey all AMC rules, regulations and policies;
- If participant has any mental, physical or emotional conditions or limitations that might affect his/her ability to participate I agree to disclose those to AMC, and represent that participant is fully capable of participating without causing harm to him/herself or others;
- AMC is, and has been available, should I have further questions about these activities and the associated risks;
- AMC cannot assure participant's safety or eliminate any of these risks.

**Participant is voluntarily participating with knowledge of the risks. Therefore, participant (and parent/s of minors) assume and accept full responsibility for the inherent and other risks (both known and unknown) of these activities, and for any injury, damage, death or other loss suffered by participant (and parent/s of minors), resulting from those risks and/or resulting from participant's negligence or other misconduct.**

**RELEASE AND INDEMNITY AGREEMENT**

**Please read carefully. This Release and Indemnity agreement contains a surrender of certain legal rights. I (adult participant, or parent/s for themselves and for and on behalf of their participating minor child) agree as follows:**

- (1) **to release and agree not to sue AMC**, with respect to any and all claims, liabilities, suits or expenses (including attorneys' fees and costs) (hereafter collectively 'claim' or 'claim/s') for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities, or use of AMC equipment, facilities or premises. **I understand I agree here to waive all claim/s I or my child may have against AMC, and agree that neither I, my child, or anyone acting on my or my child's behalf, will make a claim against AMC, as a result of any injury, damage, death or other loss suffered by me or my child;**
- (2) **to defend and indemnify** ('indemnify' meaning protect by reimbursement or payment) **AMC** with respect to any and all claim/s brought by or on behalf of me, my child or a family member for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities or use of AMC equipment, facilities or premises.

**This Release and Indemnity Agreement includes claim/s resulting from AMC's negligence (but not its gross negligence or intentional or reckless misconduct), and includes claim/s for personal injury or wrongful death (including claim/s related to emergency or medical response, assessment or treatment), property damage, breach of contract or any other claim.**

**CONCLUSION**

I (participant and parent/s of a minor participant) agree that the substantive laws of Massachusetts govern this Document, any dispute I have with AMC and all other aspects of my relationship with AMC, and that any mediation, suit, or other proceeding must be filed or entered into only in Massachusetts.

AMC reserves the right to remove any participant from the program who staff or leaders believe, in their discretion, presents a safety concern or medical risk, is disruptive, or acts in any manner detrimental to the program. If participant is dismissed or departs for any reason, participant (and his/her family) are responsible for all costs of early departure whether for medical reasons, dismissal, personal emergencies or otherwise. These costs include, but are not limited to medical evacuation and costs, plane, train or taxi fare, accommodations, and costs and compensation for staff accompanying participant.

**This Document is intended to be interpreted and enforced to the fullest extent allowed by law. Any portion of this Document deemed unlawful or unenforceable shall not affect the remaining provisions, and those remaining provisions shall continue in full force and effect.**

**Participant and parent/s of a minor participant agree: I have carefully read, understand and voluntarily sign this two-page Document and acknowledge that it shall be effective and binding upon me, my minor children and other family members, and my heirs, executors, representatives and estate. *One or both parent/s must sign below for any participating minor (those under 18 years of age).***

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

2/23/10 RMT



## PHOTO RELEASE

Your consent is greatly appreciated as it allows photos taken during this program to be used by the AMC in the future, but it is not required. The Youth Opportunities Program is funded by grants in order to make our trainings and trips affordable. Photos of our activities help our fundraising efforts. We'd greatly appreciate your consent!

I hereby authorize the Appalachian Mountain Club (AMC) and/or parties designated by the AMC (including periodicals, other printed matter, or electronic media, and their editors) to use my photograph for sale to or reproduction in any medium the AMC or its designees see fit for the purposes of education, advertising, display, exhibition, or editorial use.

Print Participant's Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Date \_\_\_\_\_

**If applicant is under 18 a parent or guardian signature is required:**

Signature of parent/guardian \_\_\_\_\_

Date \_\_\_\_\_

☐ I do not want my photo/my child's photo to be used.

**Outdoor Extension Mission Statement** - To incorporate authentic learning experiences from the outdoors and provide enrichment opportunities for students to explore nature through academics and community building activities. Through our partnership with the **Youth Opportunities Program** and as youth outdoor leaders, we will be able to create more experiences for students in the outdoors with a focus on team building, practicing student leadership, developing resilience, and independence.

The outdoor club activities will include but are not limited to: day hikes, rock climbing, team building and various ideas from outdoor education.

### **Overnight Field Trip Proposal Youth Mountain Adventure Program (YMAP)**

1. This outdoor opportunity will only allow for us to take nine students in grades 6-8 who are part of the Outdoor Club.
2. The trip will give students an opportunity to put their learning into practice while celebrating the season. It will expose students to outdoor activities such as hiking and camping and provide students with the opportunity to develop leadership skills which they can utilize when returning to school.
3. The Outdoor Club curriculum, which will be utilized on this trip, includes activities such as knot tying, "Leave No Trace" techniques, orienteering, etc...
4. Outdoor Adventure Details:
  - a. Information being provided is from last year's adventure. We will provide updated information when it becomes available.
  - b. Saturday, January 16th - Monday 18th (Martin Luther King Holiday Weekend). Our destination is the Pinkham Notch Visitor Center in Pinkham Notch, NH. The center is owned by the Appalachian Mountain Club (AMC) and the YMAP trip will be run by AMC staff. We will depart from the school parking lot at 7:00am on Saturday, 1/16, and return on Monday, 1/18 at 4pm.
5. For the January trip, transportation will be provided by YOP, a 12 passenger van.
6. Overnight accommodations will be organized by AMC/ YOP staff. Boys and girls will sleep in separate sections of the Visitor Center.
7. This outdoor adventure is cost neutral. There is no cost for the trip.

8. Nine of the nineteen Outdoor Club members will participate in the trip along with two adults.
9. Steve Cullen and Jaime Moody will chaperone the trip along with AMC/ YOP staff. All adults at the Pinkham Notch Visitor Center are required to have CORI checks.
10. Information packet is included.
11. Medical care will be provided by AMC/YOP staff. All students are required to complete an AMC Permission/health forms packet.
12. Permission slip is attached.
13. Parent meeting will take place at least 2 weeks prior to the trip. Date TBD.
14. Outdoor Club students who are interested in attending the trip will write an essay about why they should be selected to attend. Nine students will be selected. Students who were not selected for the Nobel View trip will be given priority.
15. Field trip forms are attached.

**The Lincoln School**  
**Field Trip Permission Slip**

On Saturday-Monday (MLK Day), January 16-18, students in the Lincoln School's Outdoor Club will have the opportunity to participate in an overnight field trip at the AMC's Pinkham Notch Visitor Center in Pinkham Notch, NH. This trip allows students the opportunity to utilize the skills learned in the Outdoor Club and to be exposed to outdoor opportunities such as hiking and camping. The AMC sponsored Youth Mountain Adventure Program will be led by AMC staff and will allow the students the opportunity to enjoy: snowshoeing, hiking, cross country skiing, and sledding. There is no charge for this trip.

Sincerely,

Steve Cullen & Jaime Moody

I \_\_\_\_\_ hereby consent to my son / daughter's participation in the trip to YMAP trip at the Pinkham Notch Visitor Center on. We will be leaving school on Saturday, 1/16 at 7:00 a.m. and returning on Monday, 1/18, at 4:00p.m.

I understand that transportation will be provided by AMC staff in a 12 passenger van and that the supervision will be by Steve Cullen and Jaime Moody. I hereby also consent to whatever arrangements are made for my son or daughter generally consistent herewith, and any reasonable arrangement in case of emergency, including arrangements for emergency transportation and/or medical care, which is deemed necessary in such situation by the teacher, or if unavailable, by any other adult supervisor. I understand that reasonable precautions for safety will be taken.

Name of Child \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**\*\*Mandatory parent meeting TBD.**



Lincoln Public Schools  
Lincoln, Massachusetts

Jan 16-18

# LATE NIGHT AND OVERNIGHT FIELD TRIP PROPOSAL

» to be submitted 3 months prior to approval date «

Please refer to School Committee Policy File: ICCA

School: Lincoln School Grade(s): 6-8

Number of Students: 9 % Class/Group: \_\_\_\_\_

Destination: Pinkham Notch, NH

Address: \_\_\_\_\_ Telephone# \_\_\_\_\_

Dates: Jan. 16-18

Departure Time: 7am Return Time: 4pm

## Costs for the Trip:

Transportation: \_\_\_\_\_ # of Buses \$ 0

Admissions: \_\_\_\_\_ # students x \$ \_\_\_\_\_ / each = \$ \_\_\_\_\_

\_\_\_\_\_ # adults x \$ \_\_\_\_\_ / each = \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Accommodations:

Teacher Stipends (overnight trip): \_\_\_\_\_ # teachers x \$ \_\_\_\_\_ / each \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL \$ 0

Cost Per Student: \$ 0

Supervising Teacher: Steve Cullen + Jaime Moody

Teacher(s)/Chaperone(s) Name (Print)\*

Steve Cullen  
Taine Moody

Signature

Steve Cullen  
Taine Moody

\*If chaperones are not identified at the time the trip is proposed, a complete list must be provided by the supervising teacher to the Principal prior to departure.

Have arrangements been made to ensure that all students can participate? ☒ yes ☐ no  
Describe: \_\_\_\_\_

Who will be responsible for: first aid \_\_\_\_\_ medications \_\_\_\_\_  
epi pen \_\_\_\_\_

Nurse Contacted: ☐ Yes ☐ No

\_\_\_\_\_  
Nurse's Signature

\_\_\_\_\_  
Date

☐ Approved

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

☐ Disapproved

☐ Approved

\_\_\_\_\_  
Superintendent's Signature

\_\_\_\_\_  
Date

☐ Disapproved

Attach statements addressing each of the following: relevance to educational program and explanation of purpose of trip; destinations and itinerary of trip; explanation of transportation plan; explanation of arrangements for accommodations; copies of information and communications to be given to parents; agenda for parent information meeting(s). [See Policy IICA for more details.]



Winter YMAP 2015

Dear YOP Member:

Thanks for your interest in YOP's Youth Mountain Adventure Program (YMAP)! We hope you and your youth can take part in one of these terrific trips!

As a limited number of trips are available, YOP will use the following guidelines for selecting groups:

- This is a great opportunity for youth workers who have recently completed YOP's Winter Exploration Workshop, although any current YOP Member is eligible to apply.
- Trips will be reserved on a first-come first-served basis with priority given to Boston area youth agencies that serve urban and at-risk youth.
- Youth may be ages 11 to 18. Groups may be coed or single gender.
- Groups should include 8-9 youth and 1-2 YOP members. While all trips must be led by at least one YOP member, a second youth worker who is not a YOP member may also attend.
- The organization understands that this trip is meant to be a catalyst for its own programming and agrees to lead an independent trip in 2015 with a trip report returned to YOP.

Attached is all the information you need to sign up your group for a YMAP trip. Please read both documents thoroughly:

- Agency Registration Form & Enrollment Agreement
- Frequently Asked Questions

The following is a checklist for your planning. These are the steps you will need to take in order to participate in a YMAP trip:

1. **Determine Availability.** Call 617-391-6599 to check if your preferred trip dates are available.
2. **Register.** Complete and submit the Agency Registration Form & Enrollment Agreement. If the trip dates have become unavailable, you may request to be put on the wait list.
3. **Confirmation.** Once you have returned the Agency Registration Form, you will receive a confirmation email with additional information and all participant paperwork.
4. **Schedule a pre-trip meeting** with Nathan Schumacher (nschumacher@outdoors.org or 617-391-6599).
5. **Recruit youth** to participate in the trip. (YOP also encourages agencies to start waitlists of interested youth in case registered youth are no longer able to attend.)
6. **Complete YMAP information packets.** Upon confirmation of your trip we will mail you 11 copies of the YMAP information packet. Distribute to youth and all attending staff. Remember – YOP only accepts originals. No photocopies or faxes please.
7. **Collect forms.** We'll need one set for each youth and staff participating. Everyone must have: (1) Youth Registration Form, (2) Trip Policies Form, (3) Medical Form, and (4) Release and Indemnity Agreement.
8. **Return all forms to YOP.** We must receive them *at least one week prior* to the trip date.

As always, if you have any questions, please call. YOP is here to help you not only with this trip, but any adventure you are planning. We hope YMAP is a winter highlight for your youth and we look forward to working with you!

Sincerely,

Nate

Nate Schumacher  
YOP Trip Leader & Logistics Coordinator  
617-391-6599  
nschumacher@outdoors.org



## **The Youth Mountain Adventure Program (YMAP)**

### **Frequently Asked Questions**

#### **Where are we going?**

This trip is based out of the White Mountains in New Hampshire. Groups will be sleeping in **AMC's Joe Dodge Lodge in Pinkham Notch** which is located in Gorham, NH. The heated lodge is surrounded by many hiking and skiing trails, and adjacent to a local ski touring center, Great Glen Trails, where YMAP groups will cross country ski. For more information about Joe Dodge Lodge please visit <http://www.outdoors.org/lodging/lodges/pinkham/>

#### **Who is responsible for trip leadership?**

The YOP member and YOP staff will have shared leadership responsibilities for this trip. Agency staff will be expected to share in the outdoor leadership aspects of the trip (based on their comfort and experience), as well as facilitate other aspects of the trip. YOP sees the adults on the trip working in partnership to ensure a successful experience for all involved. Agency staff know their youth and their agency's rules, making them best equipped to handle many situations, such as discipline, medication, and inappropriate behavior. All YOP staff, agency staff, and youth will be expected to follow safety guidelines established by AMC. In addition, youth will be given opportunities to practice leadership skills on the trip.

#### **How many youth can I bring?**

The maximum number of participants is 11, including agency staff. Groups should include 8-9 youth and 1-2 YOP members. While all trips must be led by at least one current YOP member, a second youth worker who is not a YOP member may also attend.

#### **Who will provide clothing and equipment for my youth?**

YOP will take care of the equipment needs and bring everything that is needed. At the pre-trip meeting, all participants will be sized for clothing and equipment, which will be issued at the start of the trip. This includes fleece, long underwear, snowshoes, cross-country skis, boots, and more. Youth will receive a personal packing list of what to bring for personal items at the pre-trip and in their registration paperwork. Youth agencies are responsible for lost equipment as they would be on independent trips.

#### **What about the cold and the snow?**

The weather conditions will be very cold and youth will be traveling in snow. YOP provides all participants with the appropriate gear and clothing for each person to stay warm. In addition, YOP instructors are trained to prevent and manage cold weather injuries. There are also a number of indoor spaces that groups can use if the weather conditions require that the group remain inside.

#### **What about food?**

AMC's lodges serve a buffet breakfast and five-course dinner each day. YOP will be providing trail lunches and snacks during the trip. If there are any special dietary needs please make sure they are noted on the individual's medical form. Agencies may want to pack snacks for the van rides.

#### **What will we do on the trip?**

This trip is a great opportunity to learn and practice outdoor skills including cross country skiing, building snow shelters, snowshoeing, and navigation. We will build leadership and communication skills through various games and activities. Being outdoors for three days is a great chance for youth to challenge themselves, gain a better understanding of the natural world, and learn how to be comfortable outside in the winter.

#### **Can my agency go on more than one trip?**

Due to the limited number of trips, we ask that each agency sign up for only one session this winter.

#### **What do my youth need to leave at home?**

In order for all to enjoy the natural setting of the mountains, YOP requires that you have your youth leave the following at home: cell phones, iPods, MP3 players, handheld games, other electronics, and any other items you feel may be distracting. Alcohol, smoking, illegal drugs, and dangerous objects of any kind are prohibited.





# SAMPLE AGENDA YMAP WINTER TRIP

**PRE-TRIP MEETING:** What to Expect; Full Values Contract; Comfort Zones; Slideshow;  
Clothing Demonstration; Sizing of Equipment

**Based on a trip during the Feb. Vacation Week or MLK Holiday weekend**

## **DAY 1**

### **Morning**

- Drive to Pinkham Notch, NH
- Lunch at arrival

### **Afternoon**

- Trip Introductions & Overview
- Name Game / Ice Breaker / Cooperative Game
- Clothing & Layering Workshop
- Snowshoe Hike to Lila's Ledge (modeling leadership)

### **Evening**

- Night Hike to Crystal Cascades
- Debrief the Day

## **DAY 2**

### **Morning**

- Group Energizer & Leadership Development (Leaders of the Day)
- Introduction to Cross-Country Skiing

### **Mid-Afternoon**

- Nordic Skiing at Great Glen
- Youth pick ski route and navigate (Leaders of the Day)

### **Late Afternoon**

- Snow Tubing at Great Glen
- Debrief the Day (Community Web)

### **Evening**

- Agency Led: Ideas- Teambuilding & Leadership Activities

## **DAY 3**

### **Morning**

- Group Energizer & Leadership Development
- Move out of Lodge
- Snowshoe Hike to Lost Pond
- Final clean up

- Debrief the morning
- Closing Activity (Group Shuffle)
- Lunch and Trip Evaluations
- Drive back to youth agency



## Youth Mountain Adventure Program (YMAP)

### AGENCY REGISTRATION FORM & ENROLLMENT AGREEMENT

Please register my agency for the following YMAP Session:

- |  |  |
|--|--|
| <input type="checkbox"/> Session 1: January 17-19, 2015  | <input type="checkbox"/> Session 2: February 6-8, 2015   |
| <input type="checkbox"/> Session 3: February 14-16, 2015 | <input type="checkbox"/> Session 4: February 18-20, 2015 |

Transportation: YOP may be able to provide transportation depending on availability of the YOP van. (Please check the box that applies to your agency.)

- ☐ My agency will provide transportation for this trip.  
☐ My agency may be able to provide transportation for this trip.  
☐ My agency cannot provide transportation for this trip.

Agency Name: \_\_\_\_\_

YOP Leader Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Total # of staff attending trip: \_\_\_\_\_ Number of youth attending trip: \_\_\_\_\_

Age range of youth: \_\_\_\_\_

**Payment – Refundable deposit:** The total cost to YOP per YMAP trip is \$5,000; the cost per youth is \$500. This includes our costs for staff, lodging, equipment, food, and materials. YOP has worked very hard to secure funding for the YMAP initiative in order to provide fun and affordable trips to qualifying YOP youth groups. It is vital that all registered groups understand how important this commitment is for the future of our funding and this project.

To ensure that each group is able to participate in the trip with the agreed upon number of youth and staff, YOP requires each agency to make a \$200 refundable deposit. The deposit will be refunded after the trip unless an agency cancels a trip or does not have enough participants for the trip. Deposit refunds will be determined on a case by case basis. This will allow us to have a successful winter, make the best use of our resources, and serve the most youth. We thank you for your understanding and assistance.

- ☐ I have enclosed a check for \$200  
☐ Please hold my credit card information

Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Fax: 617-523-0722

Email: [Nschumacher@outdoors.org](mailto:Nschumacher@outdoors.org)

Mail: Appalachian Mountain Club  
Youth Opportunities Program  
5 Joy Street  
Boston, MA 02108  
ATTN: Nate Schumacher



## YOUTH OPPORTUNITIES PROGRAM

### YOUTH MOUNTAIN ADVENTURE PROGRAM (YMAP)

#### GENERAL INFORMATION



Welcome to the Appalachian Mountain Club's Youth Opportunities Program! We have an exciting few days of outdoor adventure, exploration, and fun planned for you. Enclosed in this packet you'll find important information and several forms. Please read through everything carefully. After reviewing all of the enclosed materials, please call us with any questions at 617-391-6599. We're looking forward to seeing you this winter!

**Our Mission:** The mission of the Appalachian Mountain Club's Youth Mountain Adventure Program (YMAP) is to expose youth to the wonders of the outdoors. YMAP aims to develop leadership skills and self-esteem, foster an appreciation for the environment, instill a spirit of adventure, and promote teamwork and a sense of community through fun and educational outdoor experiences.

**Our Partnerships:** YMAP trips are a partnership between the AMC's Youth Opportunities Program (YOP) and the sponsoring youth organization. YOP provides trip instructors, food, lodging, and other trip necessities. The sponsoring youth organization coordinates with youth and parents and also sends one of their YOP trained staff on the trip. The sponsoring organization will be responsible for distributing information to families and determining which young people will attend the trip. Each trip should have at least one main contact person from the sponsoring youth organization who will be the point of contact for all trip questions. You may also contact YOP directly at 617-391-6599 with any questions.

**Our Staff:** The AMC's professional instructors are dedicated, energetic, and talented leaders experienced in working with youth. All our instructors are trained and/or certified in wilderness medicine, winter safety, Leave No Trace principles, and have strong backcountry skills and ethics. They come from a wide variety of backgrounds and life experiences and are committed to providing youth with a fun and educational experience in the outdoors while maximizing the safety of all participants. At least one AMC instructor, along with staff from the youth organization will be with the group for the entire trip.

**Our Expectations:** We don't require any prior outdoor experience to take part in YMAP - all ability levels are welcome and expected! Both experienced and non-experienced youth will find this trip rewarding. We expect all participants to come with a desire to try new things and face new challenges and cooperate with the group. Participants are expected to support each other through challenges and share chores with the help and guidance of the instructors. Enthusiasm, commitment, and a positive attitude will make this trip an adventure of a lifetime!

**Trip Location:** This YMAP trip will take place at the AMC's Joe Dodge Lodge located in the White Mountains of New Hampshire. Participants will stay in heated bunkrooms for two nights. This lodge is complete with common bathrooms, meeting spaces, library and dining facilities. All outdoor activities will take place in the area and trails surrounding the lodge or at a nearby skiing center.

**Level of Physical Activity:** Participants do not have to be super athletes to enjoy any of the activities, but they will have a more comfortable experience if they play sports or get some form of regular exercise. The hiking and snowshoeing is moderate - this means you will hike 1-5 miles, gain 2,000' in elevation, and the trails are icy, rugged and steep in parts. The instructors will teach the participants how to "keep going" when the trail gets challenging.

**Food:** Participants eat three full meals a day, including plenty of snacks. AMC's Lodges provide a breakfast buffet each morning and a five-course dinner at night. Lunches will be eaten on the trail. We easily accommodate most dietary restrictions; let us know in advance so we can plan accordingly. All the participants help prepare and clean up after lunch.

**Transportation:** The youth organization will be responsible for transportation to and from AMC's lodge as well as to the cross-country skiing facility. This may mean that the organization has approved travel in an AMC van. Parents and guardians are responsible for coordinating drop off and pick up for youth at the sponsoring youth organization.

**Clothing:** The weather in the mountains is quite unpredictable and can vary widely. It can get very cold and there will be snow and ice. Wearing the right clothes and having the proper equipment can make the difference between a safe, warm and enjoyable trip and a miserable experience. The AMC will provide all specialized outdoor clothing, and teach participants how to use it correctly. For clothing we teach the *layering system*: Start with a base layer, which should be polypropylene ("polypro,") then an insulating layer of fleece or wool, and last an outer layer which is wind/water proof. Synthetic or wool fabrics are best as they hold less moisture than other fabrics. Youth will be expected to bring their own shirts, pants, underwear, and other regular clothing items. Please refer to the packing list included in this packet for a complete list of what participants need to bring on the trip.

**Sleeping Arrangements:** The AMC provides bunkrooms in its lodging facilities. Boys and girls will have separate sleeping quarters. Bathrooms are available to ensure privacy for changing.

**Personal Hygiene:** Keep your toiletries simple: toothbrush, small toothpaste, comb and facecloth. There will be little time to shower during the trip, so primping won't be an option. Girls should bring necessary feminine products. Instructors will discuss tips for dealing with them at the beginning of the trip.

**Medications:** The youth organization staff are responsible for carrying and distributing ALL medications during the trip for the safety of your child as well as other participants. This includes painkillers and commonly used over the counter drugs. *Send your child's medications in the pharmacy's bottle with the full label attached.* Check in with the staff at the pre-trip meeting to clarify any questions about the medications. During the YMAP trip, your child will, and should, continue taking any medications he or she does on a regular basis.

**In Case of a Family Emergency:** An AMC staff person is on call 24 hours a day to respond to program needs. Do not plan on your child being able to call home during the trip as phones are not typically available. If you need to reach your child in case of a serious emergency during the trip, please call Pinkham Notch Visitor Center at 603-466-2721 x8117 until 10 PM. Tell the staff your child is part of the YOP/YMAP trip and they will do their best to contact the group. Please keep in mind that the group may be far from the lodge and it may take some time before they can be reached. If you prefer, an AMC/YOP staff member is also available in Boston 24 hours a day and can be reached during business hours by calling the number listed on the voicemail of 617-391-6599.

**Safety:** As participant safety is a high priority for all AMC-sponsored events, procedures and policies have been developed to attempt to limit participant risk. Participants are expected to work with staff to reduce risks and make the experience successful for all. In case of an emergency, the AMC staff is trained in Wilderness First Aid, carry first-aid kits, and follow a comprehensive Emergency Action Plan. The AMC uses radios or other communication devices – although these are not reliable in all locations and conditions. Despite such steps, parents and participants should be aware that there are risks associated with outdoor adventure activities, including but not limited to cooking and camp chores, adverse weather and environmental conditions, remote locations of our trips, and transportation in vehicles, on foot, by boat, or on a bike. Please carefully read and sign the *Participant Acknowledgement and Assumption of Risks and Release and Indemnity Agreement* and call if you have any questions. Parents' and participants' understanding of these risks and adherence to our policies and procedures can contribute to making this experience rewarding.

**Cost:** The YMAP program is provided through scholarships from many donors and is free to all participants. AMC will provide instruction, all meals from lunch on the first day through lunch on the last day, outdoor equipment, and all fees during the program. Please keep in mind that the value of this trip is \$500 per youth. Please let your sponsoring youth organization know immediately if your child cannot attend the trip so that another young person can have the opportunity.

**For More Information, Contact:** Nathan Schumacher at 617-391-6599 or [nschumacher@outdoors.org](mailto:nschumacher@outdoors.org), or the teacher or youth worker responsible for putting the trip together for your participating organization.



## YOUTH MOUNTAIN ADVENTURE PROGRAM EQUIPMENT & CLOTHING CHECKLIST

Conditions can be cold, wet, sunny and windy. Because cotton loses its insulating value when wet, it is essential to wear wool, fleece, and polypropylene. Cotton clothing is fine for pajamas but is not permitted while youth are outdoors. We cannot take anyone outdoors without proper clothing.

### *Please wear:*

- ☐ Comfortable warm clothes and shoes for the drive there and back

### *Please bring:*

- ☐ Book bag, small backpack, or small duffel bag (to pack personal clothes and items in)
- ☐ Sleep wear (not what you hike/ski in)
- ☐ 1 Full Change of Clothes w/ extra underwear
- ☐ Toiletries – see Personal Hygiene on page 2
- ☐ Any personal items such as medication, glasses

### *Please DO NOT bring:*

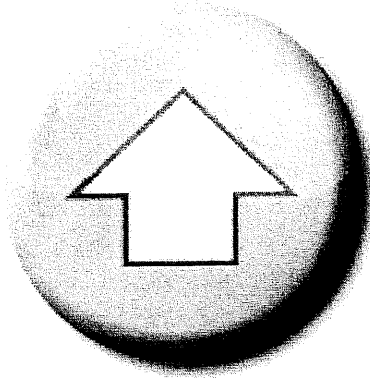
- ☐ Alcohol or illegal drugs
- ☐ All electronics including: cell phone, music player, electronic games, etc.
- ☐ Unsafe objects of any kind including knives
- ☐ Matches or lighters

### *Optional*

- ☐ Sunglasses or baseball hat
  - ☐ Chapstick, lip balm
  - ☐ Disposable camera
- 

### *We will provide the following for all participants:*

- 1 set of wool or polypropylene long underwear (top and bottoms)
- 1 set of fleece insulating layers (2 tops and 1 bottom)
- 1 set of waterproof raingear (jacket and pants)
- 1 pair of winter hiking boots
- 2 pairs of wool socks
- 1 wool or fleece hat or balaclava
- 1 pair of winter gloves or mittens
- 2 water bottles
- Water bottle insulator
- Backpack
- Snowshoes
- Cross Country Skis, Boots and Poles
- Trash bags & Ziploc bags to organize clothing & gear
- All food
- First-aid kit (carried by staff)
- Sunscreen
- Compass, maps and other activity supplies



**Please Detach All the Above  
Pages for Your Reference**

**FILL OUT ALL FORMS FOLLOWING  
THIS PAGE COMPLETELY TO  
ENSURE THE PARTICIPATION OF  
YOUR YOUTH**





**Appalachian Mountain Club – Youth Opportunities Program  
Confidential Health Questionnaire**

**Participant Name:** \_\_\_\_\_  
First Middle Last

**YOP Program Name:** \_\_\_\_\_ **Course Start Date:** \_\_\_\_\_

**Birthday:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ ☐ Male ☐ Female  
Month/Day/Year

**Home Address:** \_\_\_\_\_  
Street City State Zip code

**Phone #s:** \_\_\_\_\_  
Day Evening Cell

**Emergency Contact:** \_\_\_\_\_  
Name Relationship

**Emergency Contact's Phone #s:** \_\_\_\_\_  
Day Evening Cell

**SEVEN-QUESTION HEALTH QUESTIONNAIRE**

*Parent or legal guardian should complete form for all children under 18 years participating in AMC activity.*

- 1. Have you experienced an asthma attack at any time in your life?** (Asthma can potentially be affected by exercising at altitude, in dry air, extreme cold, etc.)
- 2. Have you ever been diagnosed with type I or type II diabetes?** (A diabetic can easily become dehydrated in backcountry environments. Further, long, arduous days/hikes can lead to hypoglycemia, etc.)
- 3. Have you ever visited a medical professional for a serious allergic reaction, or have you ever been given a shot of epinephrine for an allergy or anaphylaxis?** (Some people are allergic to stinging insects; nut products or other food products which a co-participant might be carrying or may be included in a meal prepared by AMC staff; iodine, which might be used to treat drinking water and/or clean wounds, etc.)
- 4. Have you ever received medical treatment for angina, a heart attack, or any type of heart disorder/disease?**
- 5. Have you ever been diagnosed with or are you currently being treated for high blood pressure?** (The environment and workload associated with AMC courses can sometimes affect BP and/or the efficiency of some BP medications.)
- 6. Have you ever seen a medical professional following a seizure, or are you currently being treated for any type of seizure disorder?** (Some seizures are triggered by fatigue and dehydration [which can occur following a long hike], significant change in diet, stress, etc.)
- 7. Is there anything else you think we should know about your medical background?** (i.e., anything that could affect your safety or ability to participate fully?)

Yes	No

**If you answered YES to ANY of the seven questions above please answer the following:**

- I was diagnosed with \_\_\_\_\_ in the last year.
- I have visited the emergency room in the last year due to \_\_\_\_\_
- I have had to use epinephrine following an asthma attack/allergies or anaphylaxis in the last year?
  - Will you be bringing/carrying epinephrine on the outing? \_\_\_\_\_
  - What are you allergic to? \_\_\_\_\_
- How often do you use your inhaler to treat your asthma or wheezing? \_\_\_\_\_
- Do you have poor circulation due to your diabetes? \_\_\_\_\_
- Will you be carrying insulin or wearing an insulin pump during your outing? \_\_\_\_\_
- Are you able to exert yourself for more than 30 minutes without experiencing angina (chest) pain? \_\_\_\_\_
- Are you currently taking medication for your seizures? \_\_\_\_\_
- Have you experienced a seizure within the past year? \_\_\_\_\_
- Is your blood pressure currently under control (i.e., systolic under 140 and diastolic between 60 and 100)? \_\_\_\_\_

If there is anything else you think we should know about your medical background, please explain below. Attach a separate sheet if necessary.

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**DIETARY RESTRICTIONS:** Do you have any dietary restrictions? ☐ Yes – list below ☐ No

**Please be specific:** (food allergies, iodine/seafood allergy, vegetarian, no red meat, vegan, lactose intolerant, strong food dislikes, etc.) \_\_\_\_\_

**PLEASE READ CAREFULLY!** Participants (or parents/guardians, if appropriate) must read and sign below.

**Participant acknowledgement of accuracy and understanding.** By signing this form, I am declaring that, to the best of my knowledge, I have completed the questionnaire accurately. I also understand that by knowingly filling out the form inaccurately, or by withholding pertinent information about my health, I could potentially be increasing the risk to myself or others.

**Consent to accept aid.** By signing this form, I am giving consent and permission for AMC staff, volunteers, representatives, or contractors to provide medical care to me or to my child, to transport me or my child to a medical facility or to seek the aid of emergency medical services as deemed appropriate. I further authorize AMC staff, volunteers, representatives, or contractors to render whatever treatment they consider necessary for my or my child's health, and I agree to pay all costs associated with that care and transportation.

\_\_\_\_\_  
Participant's name (printed)

\_\_\_\_\_  
Participant's signature

\_\_\_\_\_  
Signature of parent/guardian (if applicant is under 18)

\_\_\_\_\_  
Date

**APPALACHIAN MOUNTAIN CLUB PARTICIPANT  
ACKNOWLEDGMENT AND ASSUMPTION OF RISKS & RELEASE AND INDEMNITY AGREEMENT**

**INTRODUCTION**

**PLEASE READ THIS ENTIRE TWO-PAGE DOCUMENT** (hereafter 'Document') **CAREFULLY BEFORE SIGNING.** All participants must sign this Document. For participants under 18 yrs. of age (hereafter sometimes 'minor' or 'child'), one or both parent/s or guardian/s (hereafter collectively 'parent/s') must also sign. In consideration of the services of the Appalachian Mountain Club, Inc., a charitable, not-for-profit corporation, organized and existing under the laws of Massachusetts, and its chapters, including all officers, directors, employees, representatives, agents, independent contractors, volunteers (including leaders and co-leaders), members and all other persons or entities associated with it (collectively referred to in this Document as 'AMC'), I (participant and parent/s of a minor participant), acknowledge and agree as follows:

Appalachian Mountain Club contracts with individuals or organizations that are independent contractors (not employees or agents of Appalachian Mountain Club) to conduct some of the activities participants may engage in. Although the Appalachian Mountain Club has made efforts to locate responsible contractors, it does not supervise or control these contractors and is not responsible for their conduct. Participant (and parent/s) acknowledge that they may independently investigate and assess these organizations and activities, if they choose to do so. **Further, Appalachian Mountain Club uses volunteers to assist with, and sometimes lead activities, workshops or programs. These individuals are not paid professional guides or leaders. In all activities, all participants share in the responsibility for their own safety and the safety of the group.**

**ACKNOWLEDGMENT & ASSUMPTION OF RISKS**

AMC instructional, educational and/or adventure activities (which may be scheduled or unscheduled, supervised or unsupervised and/or occur during free time) include, but are not limited to hiking, backpacking, camping, biking, skiing, snowboarding, snowshoeing, high and low ropes courses, trail work, maintenance of facilities, mountaineering, rock and ice climbing, canoeing, kayaking, sailing, swimming, environmental education, wilderness emergency medical training, first aid and rescue, participation in volunteer service projects, use of AMC huts or other facilities and transportation or travel to and from activities (referred to in this Document as 'activities' or 'these activities'). **These activities include inherent and other risks, hazards and dangers** (referred to in this Document as 'risks') **that can cause or lead to injury, damage, death or other loss to participant or others.** The following includes some, but not all of those risks:

**Risks present in an outdoor, mountainous or wilderness environment on land or water, both on and off trail.** Travel can be subject to storms, strong winds, avalanches, currents, waves, whitewater, lightning, rapidly moving rivers or other water bodies, difficult stream crossings, snow or ice, extremely hot, humid or cold weather or water, steep terrain, falling rock, stinging or disease carrying animals or insects, wild animals and other natural or human-made hazards and dangers. Hazards may not be marked and weather is unpredictable year-round.

**Risks in decision making,** including, without limitation, the risk that AMC may misjudge a participant's capabilities, health or fitness level, or misjudge some aspect of instruction, medical treatment, weather, terrain, water level, or route location.

**Personal health and participation risks.** The risk that a participant's mental, physical or emotional condition (disclosed or undisclosed, known or unknown) combined with participation in these activities could result in injury, damage, death or other loss.

**The risk that equipment used in an activity may be misused, or may break, fail or malfunction.**

**AMC activities may take place in remote places,** several hours or days from any medical facility, causing potential delays or difficulties with communication, transportation, evacuation and medical care.

**Risks connected with meals and/or cooking and camping chores.** Meals may include exposure to food allergens. Risks also include gas explosion, scalding or other burns associated with cooking over a gas stove or open fire, and water contamination from natural water sources. All water may be contaminated and should be disinfected, filtered or boiled before use.

**Risks associated with AMC facilities and premises,** including boulders, ruts, slippery walkways, ponds or other water sources, uneven ground or other conditions.

**Risks associated with transportation.** Travel can be on foot or by vehicle, bicycle, boat or other means and can be over rough and unpredictable terrain or via oceans or rivers, with wind, rain, or other adverse weather conditions.

**Volunteer community service.** Risks associated with activities such as (but not limited to) building, digging and trail maintenance, painting, construction and clean-up projects. Projects can include the use of tools and equipment (i.e. drills, saws, power tools) that can cause injury resulting from use, misuse or malfunction.

**Risks regarding conduct,** including the potential that the participant, or other participants or third parties (e.g. general public, rescue squad, medical facility) may act carelessly or recklessly.

**Participants may have limited, unsupervised time** during, before or after the start of an AMC program. This may include periods of free time, or periods of time alone while engaged in backcountry travel. **During both supervised and unsupervised activities, all participants share in the responsibility for their own safety and the safety of the group.**

**Other risks** that are generally associated with instructional, educational and/or adventure activities.

**These and other risks may result in participants falling, being struck, colliding with objects or people, experiencing vehicle or boat collision or capsizing, drowning, reacting to weather conditions or increased exertion, suffering gastro-intestinal complications or allergic reactions, becoming lost or disoriented, or experiencing other problems. These and other circumstances may cause hyperthermia, hypothermia, frostbite, dehydration, burns, heart or lung complications, broken bones, concussions, paralysis, mental or emotional trauma, or other injury, damage, death or loss.**

2/23/10 RMT

I (participant and parent/s of a minor participant) agree:

- To accurately complete all required forms (which may include, but is not limited to the AMC application, registration and medical forms), abide by the terms of those documents, and obey all AMC rules, regulations and policies;
- If participant has any mental, physical or emotional conditions or limitations that might affect his/her ability to participate I agree to disclose those to AMC, and represent that participant is fully capable of participating without causing harm to him/herself or others;
- AMC is, and has been available, should I have further questions about these activities and the associated risks;
- AMC cannot assure participant's safety or eliminate any of these risks.

Participant is voluntarily participating with knowledge of the risks. Therefore, participant (and parent/s of minors) assume and accept full responsibility for the inherent and other risks (both known and unknown) of these activities, and for any injury, damage, death or other loss suffered by participant (and parent/s of minors), resulting from those risks and/or resulting from participant's negligence or other misconduct.

#### **RELEASE AND INDEMNITY AGREEMENT**

Please read carefully. This Release and Indemnity agreement contains a surrender of certain legal rights. I (adult participant, or parent/s for themselves and for and on behalf of their participating minor child) agree as follows:

- (1) to release and agree not to sue AMC, with respect to any and all claims, liabilities, suits or expenses (including attorneys' fees and costs) (hereafter collectively 'claim' or 'claim/s') for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities, or use of AMC equipment, facilities or premises. I understand I agree here to waive all claim/s I or my child may have against AMC, and agree that neither I, my child, or anyone acting on my or my child's behalf, will make a claim against AMC, as a result of any injury, damage, death or other loss suffered by me or my child;
- (2) to defend and indemnify ('indemnify' meaning protect by reimbursement or payment) AMC with respect to any and all claim/s brought by or on behalf of me, my child or a family member for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities or use of AMC equipment, facilities or premises.

This Release and Indemnity Agreement includes claim/s resulting from AMC's negligence (but not its gross negligence or intentional or reckless misconduct), and includes claim/s for personal injury or wrongful death (including claim/s related to emergency or medical response, assessment or treatment), property damage, breach of contract or any other claim.

#### **CONCLUSION**

I (participant and parent/s of a minor participant) agree that the substantive laws of Massachusetts govern this Document, any dispute I have with AMC and all other aspects of my relationship with AMC, and that any mediation, suit, or other proceeding must be filed or entered into only in Massachusetts.

AMC reserves the right to remove any participant from the program who staff or leaders believe, in their discretion, presents a safety concern or medical risk, is disruptive, or acts in any manner detrimental to the program. If participant is dismissed or departs for any reason, participant (and his/her family) are responsible for all costs of early departure whether for medical reasons, dismissal, personal emergencies or otherwise. These costs include, but are not limited to medical evacuation and costs, plane, train or taxi fare, accommodations, and costs and compensation for staff accompanying participant.

This Document is intended to be interpreted and enforced to the fullest extent allowed by law. Any portion of this Document deemed unlawful or unenforceable shall not affect the remaining provisions, and those remaining provisions shall continue in full force and effect.

**Participant and parent/s of a minor participant agree:** I have carefully read, understand and voluntarily sign this two-page Document and acknowledge that it shall be effective and binding upon me, my minor children and other family members, and my heirs, executors, representatives and estate. One or both parent/s must sign below for any participating minor (those under 18 years of age).

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

2/23/10 RMT

## PHOTO RELEASE

Your consent is greatly appreciated as it allows photos taken during this program to be used by the AMC in the future, but it is not required. The Youth Opportunities Program is funded by grants in order to make our trainings and trips affordable. Photos of our activities help our fundraising efforts. We'd greatly appreciate your consent!

I hereby authorize the Appalachian Mountain Club (AMC) and/or parties designated by the AMC (including periodicals, other printed matter, or electronic media, and their editors) to use my photograph for sale to or reproduction in any medium the AMC or its designees see fit for the purposes of education, advertising, display, exhibition, or editorial use.

Print Participant's Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Date \_\_\_\_\_

**If applicant is under 18 a parent or guardian signature is required:**

Signature of parent/guardian \_\_\_\_\_

Date \_\_\_\_\_

☐ I do not want my photo/my child's photo to be used.



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## FIELD TRIPS

### Definition/Application of Policy

Any trip organized or conducted by an employee of the Lincoln Public Schools which takes students away from the Lincoln or Hanscom Schools campuses shall be considered a field trip. All field trips shall be governed by this policy.

Field trips should be educational in nature and shall be preceded and followed by appropriate learning experiences related to the trip.

Students on field trips are representatives of their schools and are expected to behave appropriately at all times including time beyond school hours. School rules and regulations apply to all field trips.

### Funding

School system funds, grants, gifts and proceeds from fundraising may be used to fund field trips. Additionally, parents may be requested to pay for additional costs for field trips, including admission fees, housing, food, etc. However, it is the policy of the School Committee that organizers of field trips ensure that no child is excluded because of such additional costs. If fundraising efforts are not sufficient and / or the school budget cannot subsidize the cost of those children who are unable to pay, then the trip will be automatically disapproved.

Should students be involved in fundraising, the amount of time to be devoted to fundraising should be reasonable and commensurate with students' obligations for homework and after-school activities. Group fundraising activities are preferred. Students should not be assigned individual fundraising targets.

## DAY FIELD TRIPS

### Approval

1. Permission to take a day field trip shall be secured from the Principal prior to making any arrangements or advertising for the trip. A field trip form must be filed with the Principal who will authorize the trip by signing the request form and returning it to the teacher(s). A copy of the field trip form will be filed with the Superintendent's office.
2. Vehicles of common carriers or the transportation contractor may be used. Additionally, drivers designated by the administration and covered by the appropriate insurance may be used to transport students on day trips.
3. All proposals for day field trips must include appropriate notification for the school nurse who will prepare a medical needs list for the supervising teacher. The school nurse will coordinate delegation of medication to a trained teacher.

4. Parental permission slips must be secured for all trips. Permission slips shall specify, at a minimum, date, time, location and method of transportation. A separate permission slip must be signed for each field trip. At the start of each year parents may sign a blanket field trip permission slip allowing their child to participate in walking field trips that are contained on campus, i.e., Hanscom Air Force Base.
5. All field trips must be adequately supervised by classroom teachers. Additionally, classroom assistants and parent volunteers may assist as chaperones. Volunteer chaperones must have CORI checks in accordance with M.G.L c.71 s38R.

#### LATE NIGHT AND OVERNIGHT FIELD TRIPS

Definition: Any student travel sponsored by the Lincoln Public Schools that is planned to occur between the hours of midnight and 6:00 a.m., or that will include an overnight stay away from a student's home.

The Lincoln Public Schools will sponsor late night or overnight field trips only when these trips relate to the curriculum or extra-curricular activities at the specific school. Trips that do not relate to the educational program will not be approved. The School Committee shall vote to approve all late night or overnight field trips upon the recommendation of the Superintendent. From time to time teachers organize overnight trips that take place during school vacations. Teachers may distribute information about these trips providing all materials indicate that the trip is not sponsored by the Lincoln Public Schools and has not been approved by the School Committee.

Teachers proposing to take students on a late night or overnight field trip are required to submit a written proposal to their Principal who will review and approve the request prior to submission to the Superintendent for recommendation to and approval by the School Committee. Advance approval is required.

Except in unusual circumstances, proposals must be submitted a minimum of three months prior to the approval date. Sufficient time should be allowed to finalize plans after approval has been granted.

#### Proposals for late night and overnight field trips

Proposal must address each of these items:

1. Grades/classes participating.
2. Educational or extra-curricular purpose of the trip. Overnight Trips should offer significant educational benefits to students that clearly justify the time and expense of the trip. Such trips should be appropriate for the grade level.
3. Connections to the curriculum including learning activities in preparation for the trip and follow-up after the trip.
4. Details concerning destinations and itinerary (include departure date and time and estimated return time).



5. Transportation plans that take into account the following considerations:
  - a) Whenever possible, the trip schedulers should avoid planning student travel between the hours of midnight and 6 a.m., due to the increased risk vehicular accidents during this time period.
  - b) Transportation, unless provided by the district's transportation contractor, must be procured using the guidelines and regulations of Chapter 30B, State Procurement Act. No perks for students or teachers will be allowed, except for those specifically identified by the vendor through the procurement process.
  - c) The use of vans or private automobiles for trips planned to include late night or overnight student travel should generally be avoided. Such trips should generally use commercial motor coaches.
  - d) Trips planned to include late night or overnight student travel should involve pre-trip checks of vendors.
  - e) School officials should ensure that the selected carrier is licensed for passenger transportation by the Federal Motor Carrier Safety Administration (FMCSA). The district should not contract with any carrier that has an FMCSA safety ratio of "conditional" or "unsatisfactory." FMCSA carrier ratings are available at <http://mtmc.army.mil/content/504/aprovedlist>.
  - f) The contract with the carrier should prohibit the use of a subcontractor unless sufficient notice is given to the district to allow verification of the subcontractor's qualifications.
6. Accommodation plans  
Overnight accommodations should be made in advance with student safety and security in mind. All accomodations must be procured using the guidelines and regulations of Chapter 30B, State Procurement Act. No perks for students or teachers will be allowed, except for those specifically identified by the vendor through the procurement process.
7. Proposed cost of the trip per student, a complete budget for the trip (including funding for chaperones etc. teacher stipends as negotiated in the LTA contract) and sources of funding.
8. Number of students and adults participating, including percentages of the class/group. If substantially all members of a class are participating in a trip, the school should provide appropriate substitute activities for any students not participating.
9. Information about chaperones
  - a) Students shall be accompanied by a sufficient number of chaperones, taking into account the trip scheduling and logistics. All chaperones, including parents and volunteers, must have CORI check in accordance with M.G.L. C71 §38R.
  - b) CORI checks are recommended but not required by law for bus drivers who do not regularly work for the school district and who will not have direct and unmonitored contact with students. If such checks cannot be done, a chaperone must always be present whenever students are on the bus.
10. Sample of information packet prepared for parents (including information about optional trip insurance).

11. Notification of the School Nurse who will prepare a medical needs list for the supervising teacher. The school nurse will coordinate delegation of medication to a trained teacher.
12. Copy of permission slip to be used for the trip. Permission slips must include language releasing teachers, administrators, School Committee members, the school district and the Town from liability relating to the cost of sending a student home for disciplinary reasons.
13. An agenda for a parent meeting to describe the trip and its purpose.
14. Provisions to ensure that all students are able to attend the trip if they so desire.
15. Proposal for overnight trips must be signed by the faculty member(s) proposing such trip.

A complete copy of the itinerary, and roster of participants must be on file at the Principal's office for the duration of the trip.

*Voted at June 3, 2004 School Committee Meeting*

**Outdoor Extension Mission Statement** - To incorporate authentic learning experiences from the outdoors and provide enrichment opportunities for students to explore nature through academics and community building activities. Through our partnership with the **Youth Opportunities Program** and as youth outdoor leaders, we will be able to create more experiences for students in the outdoors with a focus on team building, practicing student leadership, developing resilience, and independence.

The outdoor club activities will include but are not limited to: day hikes, rock climbing, team building and various ideas from outdoor education.

### **Overnight Field Trip Proposal Fall Festival at Noble View Outdoor Center**

1. This outdoor opportunity will only allow for us to take ten students in grades 6-8 who are part of the Outdoor Club.
2. The trip will give students an opportunity to put their learning into practice while celebrating the season. It will expose students to outdoor activities such as hiking and camping and provide students with the opportunity to develop leadership skills which they can utilize when returning to school.
3. The Outdoor Club curriculum which will be utilized on this trip include activities such as knot tying, "Leave No Trace" techniques, orienteering, etc...
4. Outdoor Adventure Details:
  - a. Information attached. Please see flyer
  - b. Our destination is to Noble View Outdoor Center in Russell , Ma (see attached flyer). The center is owned by the Appalachian Mountain Club (AMC) and the trip will be run by AMC staff. We will depart from the school parking lot at 7:30am on Saturday, 10/3, and return on Sunday, 10/4, at 4pm.
5. Transportation will be provided by Steve Cullen and Jaime Moody.
6. Overnight accommodations will be organized by AMC/YOP staff. Boys and girls will sleep in tents which will be arranged in separate parts of the Outdoor Center.
7. The total cost of the trip is \$15 per student. (\$12 for registration plus \$3 for transportation)
8. Ten of the nineteen Outdoor Club members will participate in the trip along with two adults.
9. Steve Cullen and Jaime Moody will chaperone the trip along with AMC/YOP staff. All adults at the Noble View Center are required to have CORI checks.
10. Information packet is included.
11. Medical care will be provided by AMC/YOP staff. All students are required to complete an AMC permission/ health form packet.
12. Permission slip is attached.

13. Please see attached agenda. Parent meeting will take place on Friday, September 25th at 4pm in room 1145
14. Outdoor Club students who are interested in attending the trip will write an essay about why they should be selected to attend. Ten students will be selected. Students who are not selected will be given priority for the January overnight trip.
15. Field trip forms are attached

**The Lincoln School  
Field Trip Permission Slip**

September 12, 2015

On Saturday-Sunday, October 3-4, students in the Lincoln School's Outdoor Club will have the opportunity to participate in an overnight field trip at the AMC's Noble View Outdoor Center in Russell, Massachusetts. This trip allows students the opportunity to utilize the skills learned in the Outdoor Club and to be exposed to outdoor opportunities such as hiking and camping. The AMC sponsored Fall Festival will be led by AMC staff and will allow the students to enjoy: a day of hiking, camping out, seasonal foods, campfire stories, campsite decorating contests, the "Heroes & Villains" theme with costumes provided and of course, the beautiful fall foliage in Western Mass. The total cost of the trip is \$15.00 (\$12 for registration plus \$3 for transportation).

Sincerely,

Steve Cullen & Jaime Moody

\_\_\_\_\_

I \_\_\_\_\_ hereby consent to my son / daughter's participation in the trip to The Noble View Outdoor Center on October 3-4. We will be leaving school on Saturday, 10/3 at 7:30 a.m. and returning on Sunday, 10/4, at 4:00p.m.

I understand that transportation and supervision will be provided by Steve Cullen and Jaime Moody. I hereby also consent to whatever arrangements are made for my son or daughter generally consistent herewith, and any reasonable arrangement in case of emergency, including arrangements for emergency transportation and/or medical care, which is deemed necessary in such situation by the teacher, or if unavailable, by any other adult supervisor. I understand that reasonable precautions for safety will be taken.

Name of Child \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Please return this form along with \$15.00.

**\*\*Mandatory parent meeting on Friday, September 25<sup>th</sup> at 4pm in room 1145.**

Lincoln Public Schools  
Lincoln, Massachusetts

Oct 3<sup>rd</sup> & 4<sup>th</sup>

# LATE NIGHT AND OVERNIGHT FIELD TRIP PROPOSAL

» to be submitted 3 months prior to approval date «

Please refer to School Committee Policy File: ICCA

School: Lincoln School (Brooks) Grade(s): 6-8  
 Number of Students: 10 % Class/Group: ~~100~~ Outdoor Club  
 Destination: Noble View Outdoor Center Russell, MA  
 Address: \_\_\_\_\_ Telephone# \_\_\_\_\_  
 Dates: Oct. 3-4  
 Departure Time: 7 am (10/3) Return Time: (10/4) 4 pm

## Costs for the Trip:

Transportation: 0 # of Buses \$ 0

Admissions: 10 # students x \$ 12 /each = \$ 120  
2 # adults x \$ 12 /each = \$ 24

Total \$ \_\_\_\_\_

## Accommodations:

Teacher Stipends (overnight trip): \_\_\_\_\_ # teachers x \$ 0 /each \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_

Cost Per Student: \$ 12-

Supervising Teacher: Steve Cullen [Signature]

Teacher(s)/Chaperone(s) Name (Print)\*

Signature

Steve Cullen

Steve Cullen

Jane Moody

Jane Moody

\*If chaperones are not identified at the time the trip is proposed, a complete list must be provided by the supervising teacher to the Principal prior to departure.

Have arrangements been made to ensure that all students can participate? ☒ yes ☐ no

Describe: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Who will be responsible for: first aid \_\_\_\_\_ medications \_\_\_\_\_  
 epi pen \_\_\_\_\_

Nurse Contacted: ☐ Yes ☐ No

Nurse's Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ Approved

Principal's Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ Disapproved

☐ Approved

Superintendent's Signature \_\_\_\_\_ Date \_\_\_\_\_

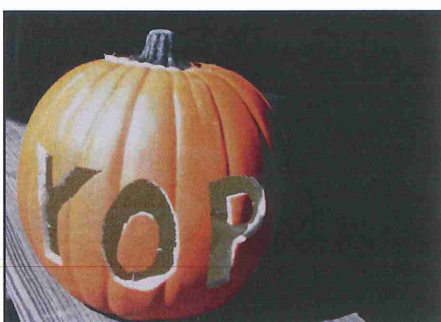
☐ Disapproved

Attach statements addressing each of the following: relevance to educational program and explanation of purpose of trip; destinations and itinerary of trip; explanation of transportation plan; explanation of arrangements for accommodations; copies of information and communications to be given to parents; agenda for parent information meeting(s). [See Policy IICA for more details.]



# Fall Festival

Noble View Outdoor Center Russell, MA | October 3-4



- Join YOP staff, volunteers, members and youth to celebrate the season at our Noble View Fall Fest!
- Campsites are available for groups of 12 or less.
- Witness the spectacular fall foliage in Western Mass.
- Enjoy a day of hiking and YOP led activities.
- Savor seasonal cuisine and a moon lit walk through the Noble View forest .
- Settle down by the fire and enjoy a special dessert and plenty of campfire stories about this unique and historic New England homestead.
- Snacks, Dinner and breakfast provided (Lunch on your own)
- Cost: \$12 per person

## Register Now!

Return the attached registration form. Pre-registration is required.

## Questions?

Lindsay Watkins | *Appalachian Mountain Club - Youth Opportunities Program*  
5 Joy Street  
Boston, MA 02108  
617-391-6591  
[lwatkins@outdoors.org](mailto:lwatkins@outdoors.org)



Photos by Jennifer Bauer



# Noble View Fall Festival

Once you have returned this registration form, you will receive a confirmation packet with medical and release forms and other details. **The medical and release forms must be filled out and signed by youth and parents and returned to YOP at least one week before the trip.**

Food, lodging and festive fall games and activities included. Meet Saturday morning, depart Sunday afternoon.

## REGISTRATION FORM

Event	Cost	Event Date
<input type="checkbox"/> Noble View Fall Festival	\$12 per person	October 3-4, 2015

YOP Leader Name: \_\_\_\_\_

Agency: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Number of staff: \_\_\_\_\_ Number of youth: \_\_\_\_\_

Date of equipment PICK UP at Joy St for this event: \_\_\_\_\_ Time: \_\_\_\_\_

Date of equipment DROP OFF at Joy St for this event: \_\_\_\_\_ Time: \_\_\_\_\_

**PAYMENT in full is required when registering for all youth events.**

**I would like to register for the event indicated and have enclosed full payment of \$ \_\_\_\_\_.**

☐ Personal Check ☐ Agency Check ☐ Money Order

Please make checks payable to Appalachian Mountain Club/YOP

Please bill my credit card: ☐ Visa ☐ MasterCard ☐ American Express

Card Holder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

### CANCELLATION

Cancellation received more than 14 days in advance will result in a full refund. Cancellation received less than 14 days before the event will result in loss of refund. If you cancel and YOP is able to fill your space, 100% of the payment will be returned. A full refund will be issued if the event is cancelled. Pre-trip meetings are considered the start of a workshop. Please note that all programs are heavily grant-funded and cancellations have a negative impact on YOP's budget.

### THE YOUTH OPPORTUNITIES PROGRAM

Since 1968, the Appalachian Mountain Club's (AMC) Youth Opportunities Program (YOP) has introduced over 100,000 youth to the outdoors. YOP offers outdoor leadership and skills training to Boston and New York City area youth workers so that they may in turn lead the youth they serve outdoors. Once successfully trained on an Outdoor Leadership Training youth workers may borrow YOP equipment at no cost to make outdoor trips with their youth a reality. Workshops are taught by experienced youth workers, accomplished in leading outdoor trips, who understand the specific needs and challenges of taking groups of youth into the woods. Free equipment use, reduced rates at AMC lodging destinations, trip planning assistance, and networking are just a few of the many exciting resources YOP has to offer.

### FOR MORE INFORMATION CONTACT:

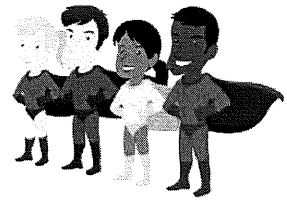
Youth Opportunities Program / Appalachian Mountain Club, 5 Joy Street, Boston, MA 02108  
Phone: 617-391-6637 Fax: 617-523-0722 [www.outdoors.org/yop](http://www.outdoors.org/yop)

### THE APPALACHIAN MOUNTAIN CLUB

Founded in 1876, the Appalachian Mountain Club is America's oldest conservation and recreation organization. We promote the protection, enjoyment, and understanding of the mountains, forests, waters, and trails of the Appalachian region. We believe these resources have intrinsic worth and also provide recreational opportunities, spiritual renewal, and ecological and economic health for the region. Because successful conservation depends on active engagement with the outdoors, we encourage people to experience, learn about, and appreciate the natural world. The AMC is a nonprofit membership organization with over 100,000 members, advocates, and supporters. Our 12 chapters reach from Maine to Washington D.C. Our goal is to be a community which is comfortable, inviting, and accessible for people of any age, gender, race, religion, ethnicity, ability, sexual orientation, or socioeconomic status.



FALL FEST 2015 PRESENTS...

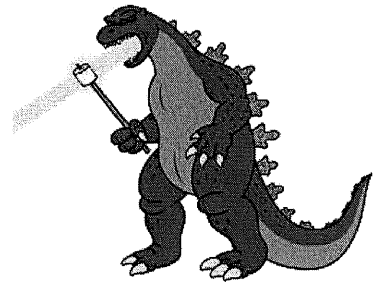


# SUPERHEROES AND VILLIANS!



Join us at Noble View October 3<sup>rd</sup> and 4<sup>th</sup> where you will meet some of the greatest outdoor superheroes and evilest supervillains of our time, such as...

- Captain Leave No Trace
- The Incredible Tarp Man
- The Human Flame
- Trashzilla



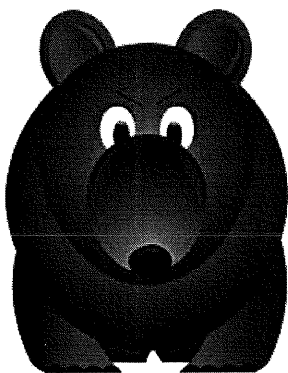
And for the first time in Fall Fest history, be ready for the...

## CAMPSITE DECORATING CONTEST!

- Groups will have one hour to set up tents and decorate their site
- Come prepared with the materials you need – to be villains or heroes!
- All decorations must be Leave No Trace appropriate
- We will vote on the best campsite!



\*\*\*Costumes are very encouraged!\*\*\*



## FREQUENTLY ASKED QUESTIONS

### FALL FESTIVAL AT NOBLE VIEW OUTDOOR CENTER

#### What's with the Fall Fest theme?

#### Where are we going exactly?

We will meet at 11:00 AM the morning of Saturday, October 3 at Noble View Outdoor Center in Russell, MA. Please find and check in with YOP Staff who will give your group a short tour of the facilities and show you your assigned camp space. Groups will then eat lunch and enjoy the rest of the day. Directions and other details can be found in this packet. If you are traveling on I-90 please bring money for tolls.

#### How many kids can I bring?

The maximum number of participants from any agency will be 12. This includes **1-2** staff, one of whom must be an OLT trained YOP member. When we have a better idea of exact numbers it may be possible for agencies to bring more kids. Call us if you are looking to bring more kids and we will do our best but there are no guarantees.

#### Can we wear Costumes?

Absolutely! Be creative! Costumes are definitely welcome but not mandatory, and group costumes are even better! We **DEFINITELY** recommend planning to decorate your campsite! **If you have any favorite fall activities or customs that you would like to add to our agenda, please email Lindsay so we can add it into the schedule!**

#### Do I have to get gear (tents, sleeping bags, etc.) for my kids?

Yes! We ask that you fill out your equipment request form and make an appointment well in advance to pick up all personal gear and group gear you will need for the trip. Your group will need all gear and clothing necessary to camp and be comfortable outside for 2 days. Please fill out an Equipment Request Form and participant list with sizes so we can make sure all requested gear will be available for Fall Festival participants. We will do our best to outfit you with gear from the closest gear site (Boston, Worcester, or Noble View). You will be responsible for picking up and returning gear!

#### Where will my group be sleeping?

Groups will be sleeping in tents near the cabins and the bathhouse, which includes toilets and showers. Groups will gather outside for meals and activities. Meals will be served inside if we have inclement weather.

#### What if it rains?

Fall Fest will run rain or shine. In the case of severe inclement weather YOP may cancel the event. Lindsay will call you the night before the event if bad weather causes a cancellation and you will receive a full refund. Fall Fest 2014 was a blast despite heavy rain all day on Saturday—we will plan accordingly and have fun regardless!

#### What about water?

Noble View Outdoor Center has a bathhouse. Though there is no running water anywhere else onsite, the bathhouse is used for filling up water jugs for cooking and cleaning. There are also shower facilities and toilets in the bathhouse.

#### What about food?

YOP will provide dinner on Saturday, breakfast on Sunday, and plenty of snacks. **AGENCIES ARE RESPONSIBLE FOR LUNCH ON OCTOBER 3-4.** If there are special dietary needs please make sure they are noted on the medical forms **and** communicated to Lindsay well in advance. If you need help planning your lunch menu, we are happy to suggest some good options. YOP staff and volunteers will hold a **SOUP OFF competition** on

Saturday evening. Groups are welcome to make a soup (in advance or at Noble View) to participate and have a chance at the 2015 Soup Off title. Please let Lindsay know if you are planning to participate in the Soup Off so that we can plan kitchen space accordingly. **Groups should bring plates, bowls, silverware, and mugs for all participants!**

**Our agency does not have a medical kit... what should I do?**

YOP encourages all who take kids outdoors to take a Wilderness First Aid course and have a properly stocked medical kit. For this trip, YOP will have two First Aid Kits available for all groups. YOP encourages you and your staff to take the initiative with any medical issues concerning your group, but do not hesitate to ask the staff for help or advice.

**What are the supervision expectations for agency staff, YOP staff, and volunteers?**

As with any other trip, you and your staff are responsible for your youth. Different agencies have different guidelines concerning supervision guidelines. YOP will facilitate many activities and games throughout the trip. We encourage youth from different agencies to interact during the activities and ask that all be respectful of the different educational and supervision methods agencies employ with their kids. All staff and youth should plan on participating in all planned activities.

**What will we do during the Fall Festival?**

There will plenty of fall-themed games, skill building activities, initiatives, and fun for all at Noble View. Groups will also have time for their own activities, including hikes, games, and group meetings. All groups will have their own space camping. Please become familiar with the attached agenda to plan your free time. Night time activities will include a YOP-led night walk and campfire.

**What items should be left at home?**

In order for all to enjoy the natural and historic setting of Noble View Outdoor Center, YOP asks that you have your kids leave the following at home: iPods, cell phones, other electronics, and any other items you feel may be distracting. **Alcohol, illegal drugs, and firearms are prohibited. Smoking is illegal for anyone under the age of 18.** YOP will provide a "Bag of Tricks" (balls, Frisbees, etc.) and encourages agencies to bring their own props and games as well.

**Can my group have some "alone time"?**

Absolutely. Time has been built into the itinerary for your group to spend any way you want. YOP asks that all groups help with setting up and breaking down camp and cleanup of the cottages on Sunday, and that all groups participate in all activities.

**Is there cell phone service?**

Yes, there is cell phone service at Noble View **in case of an emergency**. Please have at least one adult leader bring a cell phone in case of an emergency on the trail. Contact Lindsay Watkins the day of the trip (717-329-3073) if you are going to be late to the event.

## 4<sup>TH</sup> ANNUAL YOP FALL FESTIVAL AT NOBLE VIEW OUTDOOR CENTER

OCTOBER 3-4, 2015

### SATURDAY 10/3

- 10:30-11:30am GROUPS ARRIVE /Greeted by staff and volunteers/ unload and find camping areas  
Tour of facilities and safety talk with YOP volunteers  
SET UP CAMP  
Short walk/hike if time
- 11:45am Leader Meeting with Lindsay in Double Cottage (YOP member from each group).  
Review itinerary for the day, review activities and plan station rotation
- 12:30pm Lunch (Please bring lunch for Saturday and Sunday)
- 1:00pm Large group icebreakers and games
- 2-4:30pm FALL FEST ACTIVITIES!  
**Apple baking at the Fire Pit:** Design and bake your own apple treat on an open fire  
**The Fire Building Challenge:** Learn how to build a fire and keep it burning  
**Outdoor Cooking:** Learn to make your own kettle corn on a camp stove  
**Toxic Pumpkin Juice:** Challenge your team to a mind bending, team building initiative  
**Navigation:** Learn the basics of navigating the woods at Noble View with a compass  
**Andy Goldsworthy Nature Art:** Create art with nature
- 5:00pm Flex time before dinner
- 5:30-6:30pm SOUP OFF! DINNER/ANNOUNCEMENTS
- 7:00-9:00pm Evening activities:  
**Night Walk**  
**Campfire**  
**Stargazing**
- 9:00 CAMPFIRE and dessert, free time
- 10:00 Group check-ins: Plans for tomorrow/quiet time begins
- 11:00 LIGHTS OUT/campfires out. (You are responsible for making sure youth are quiet and respectful of other groups around them and that your fire is safely extinguished)

### SUNDAY 10/4

- 7:00am Group wake-up call
- 8:00am BREAKFAST AND ANY LAST MINUTE REMINDERS AND ANNOUNCEMENTS
- 9:00am ENERGIZER GAME and closing activity with all groups  
Theme awards!  
Leader check in with maps and plans for the day
- 9:30am Time to pack and load gear  
Groups on their own for hikes and lunch on the trail
- 3:00pm YOP staff depart from Noble View. Groups are welcome to stay, but please remove all items from the cottages before 3:00pm so staff can clean and lock up.

## **2015 FALL FEST TRIP PLANNING CHECKLIST**

### **ASAP**

- ☐ Distribute recommended packing list to all participants
- ☐ Distribute AMC forms and waivers to ALL participants and adult leaders on the trip
- ☐ Fill out a gear request form and make a pick up and drop off appointment with Lindsay ([lwatkins@outdoors.org](mailto:lwatkins@outdoors.org)) or Ian Dulin ([idulin@outdoors.org](mailto:idulin@outdoors.org))

### **2 WEEKS BEFORE THE TRIP (AROUND SEPTEMBER 18)**

- ☐ Trip invoice paid to YOP. (If you cancel less than 14 days before your trip date you will be responsible for the full cost.)
- ☐ Make a gear pick up and drop off appointment with Ian if you have not done so already
- ☐ Optional but suggested: hold a pre-trip meeting with trip participants to go over expectations for the trip, the itinerary and packing list, and to brainstorm ideas for your campsite!

### **THE WEEK BEFORE THE TRIP (AROUND SEPTEMBER 25)**

- ☐ Confirm final headcount with YOP **NO LATER THAN SEPTEMBER 30**
- ☐ Inform YOP staff of any allergies or special dietary issues **BY SEPTEMBER 30 PLEASE!**
- ☐ Make sure you have picked up gear for your group
- ☐ Be sure you have collected AMC medical forms, liability waivers, and photo release forms for all participants

### **THE DAY OF THE TRIP (SATURDAY, OCTOBER 3, 2015)**

- ☐ Arrive at Noble View Outdoor Center at **10:30** with lunch for both Saturday and Sunday and **ALL ORIGINAL FORMS** (medical, waiver, photo release) **FOR ALL PARTICIPANTS!**
- ☐ Be prepared to set up your campsite with your youth and have your itinerary handy
- ☐ Ensure that you bring any medication that participants may need
- ☐ Be prepared to lead games with your youth
- ☐ Bring toll money (if needed)
- ☐ Attend the trip leader meeting at 11:45am in Double Cottage
- ☐ Have fun!

### **AFTER YOUR TRIP**

- ☐ Schedule an appointment with Ian to return all YOP gear to the gear site from which you borrowed it
- ☐ Submit a trip report and evaluation to Lindsay and send along any great photos!





**Appalachian Mountain Club – Youth Opportunities Program  
Confidential Health Questionnaire**

**Participant Name:** \_\_\_\_\_  
First Middle Last

**YOP Program Name:** \_\_\_\_\_ **Course Start Date:** \_\_\_\_\_

**Birthday:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ ☐ Male ☐ Female  
Month/Day/Year

**Home Address:** \_\_\_\_\_  
Street City State Zip code

**Phone #s:** \_\_\_\_\_  
Day Evening Cell

**Emergency Contact:** \_\_\_\_\_  
Name Relationship

**Emergency Contact's Phone #s:** \_\_\_\_\_  
Day Evening Cell

**SEVEN-QUESTION HEALTH QUESTIONNAIRE**

*Parent or legal guardian should complete form for all children under 18 years participating in AMC activity.*

	Yes	No
<b>1. Have you experienced an asthma attack at any time in your life?</b> (Asthma can potentially be affected by exercising at altitude, in dry air, extreme cold, etc.)		
<b>2. Have you ever been diagnosed with type I or type II diabetes?</b> (A diabetic can easily become dehydrated in backcountry environments. Further, long, arduous days/hikes can lead to hypoglycemia, etc.)		
<b>3. Have you ever visited a medical professional for a serious allergic reaction, or have you ever been given a shot of epinephrine for an allergy or anaphylaxis?</b> (Some people are allergic to stinging insects; nut products or other food products which a co-participant might be carrying or may be included in a meal prepared by AMC staff; iodine, which might be used to treat drinking water and/or clean wounds, etc.)		
<b>4. Have you ever received medical treatment for angina, a heart attack, or any type of heart disorder/disease?</b>		
<b>5. Have you ever been diagnosed with or are you currently being treated for high blood pressure?</b> (The environment and workload associated with AMC courses can sometimes affect BP and/or the efficiency of some BP medications.)		
<b>6. Have you ever seen a medical professional following a seizure, or are you currently being treated for any type of seizure disorder?</b> (Some seizures are triggered by fatigue and dehydration [which can occur following a long hike], significant change in diet, stress, etc.)		
<b>7. Is there anything else you think we should know about your medical background?</b> (i.e., anything that could affect your safety or ability to participate fully?)		

**If you answered YES to ANY of the seven questions above please answer the following:**

- I was diagnosed with \_\_\_\_\_ in the last year.
- I have visited the emergency room in the last year due to \_\_\_\_\_
- I have had to use epinephrine following an asthma attack/allergies or anaphylaxis in the last year?
  - Will you be bringing/carrying epinephrine on the outing? \_\_\_\_\_
  - What are you allergic to? \_\_\_\_\_
- How often do you use your inhaler to treat your asthma or wheezing? \_\_\_\_\_
- Do you have poor circulation due to your diabetes? \_\_\_\_\_
- Will you be carrying insulin or wearing an insulin pump during your outing? \_\_\_\_\_
- Are you able to exert yourself for more than 30 minutes without experiencing angina (chest) pain? \_\_\_\_\_
- Are you currently taking medication for your seizures? \_\_\_\_\_
- Have you experienced a seizure within the past year? \_\_\_\_\_
- Is your blood pressure currently under control (i.e., systolic under 140 and diastolic between 60 and 100)? \_\_\_\_\_

If there is anything else you think we should know about your medical background, please explain below. Attach a separate sheet if necessary.

**DIETARY RESTRICTIONS:** Do you have any dietary restrictions? ☐ Yes – list below ☐ No

**Please be specific:** (food allergies, iodine/seafood allergy, vegetarian, no red meat, vegan, lactose intolerant, strong food dislikes, etc.) \_\_\_\_\_

**PLEASE READ CAREFULLY!** Participants (or parents/guardians, if appropriate) must read and sign below.

**Participant acknowledgement of accuracy and understanding.** By signing this form, I am declaring that, to the best of my knowledge, I have completed the questionnaire accurately. I also understand that by knowingly filling out the form inaccurately, or by withholding pertinent information about my health, I could potentially be increasing the risk to myself or others.

**Consent to accept aid.** By signing this form, I am giving consent and permission for AMC staff, volunteers, representatives, or contractors to provide medical care to me or to my child, to transport me or my child to a medical facility or to seek the aid of emergency medical services as deemed appropriate. I further authorize AMC staff, volunteers, representatives, or contractors to render whatever treatment they consider necessary for my or my child's health, and I agree to pay all costs associated with that care and transportation.

\_\_\_\_\_  
Participant's name (printed)

\_\_\_\_\_  
Participant's signature

\_\_\_\_\_  
Signature of parent/guardian (if applicant is under 18)

\_\_\_\_\_  
Date

**APPALACHIAN MOUNTAIN CLUB PARTICIPANT**  
**ACKNOWLEDGMENT AND ASSUMPTION OF RISKS & RELEASE AND INDEMNITY AGREEMENT**

**INTRODUCTION**

**PLEASE READ THIS ENTIRE TWO-PAGE DOCUMENT** (hereafter 'Document') **CAREFULLY BEFORE SIGNING.** All participants must sign this Document. For participants under 18 yrs. of age (hereafter sometimes 'minor' or 'child'), one or both parent/s or guardian/s (hereafter collectively 'parent/s') must also sign. In consideration of the services of the Appalachian Mountain Club, Inc., a charitable, not-for-profit corporation, organized and existing under the laws of Massachusetts, and its chapters, including all officers, directors, employees, representatives, agents, independent contractors, volunteers (including leaders and co-leaders), members and all other persons or entities associated with it (collectively referred to in this Document as 'AMC'), I (participant and parent/s of a minor participant), **acknowledge and agree as follows:**

Appalachian Mountain Club contracts with individuals or organizations that are independent contractors (not employees or agents of Appalachian Mountain Club) to conduct some of the activities participants may engage in. Although the Appalachian Mountain Club has made efforts to locate responsible contractors, it does not supervise or control these contractors and is not responsible for their conduct. Participant (and parent/s) acknowledge that they may independently investigate and assess these organizations and activities, if they choose to do so. **Further, Appalachian Mountain Club uses volunteers to assist with, and sometimes lead activities, workshops or programs. These individuals are not paid professional guides or leaders. In all activities, all participants share in the responsibility for their own safety and the safety of the group.**

**ACKNOWLEDGMENT & ASSUMPTION OF RISKS**

AMC instructional, educational and/or adventure activities (which may be scheduled or unscheduled, supervised or unsupervised and/or occur during free time) include, but are not limited to hiking, backpacking, camping, biking, skiing, snowboarding, snowshoeing, high and low ropes courses, trail work, maintenance of facilities, mountaineering, rock and ice climbing, canoeing, kayaking, sailing, swimming, environmental education, wilderness emergency medical training, first aid and rescue, participation in volunteer service projects, use of AMC huts or other facilities and transportation or travel to and from activities (referred to in this Document as 'activities' or 'these activities'). **These activities include inherent and other risks, hazards and dangers** (referred to in this Document as 'risks') **that can cause or lead to injury, damage, death or other loss to participant or others. The following includes some, but not all of those risks:**

**Risks present in an outdoor, mountainous or wilderness environment on land or water, both on and off trail.** Travel can be subject to storms, strong winds, avalanches, currents, waves, whitewater, lightning, rapidly moving rivers or other water bodies, difficult stream crossings, snow or ice, extremely hot, humid or cold weather or water, steep terrain, falling rock, stinging or disease carrying animals or insects, wild animals and other natural or human-made hazards and dangers. Hazards may not be marked and weather is unpredictable year-round.

**Risks in decision making,** including, without limitation, the risk that AMC may misjudge a participant's capabilities, health or fitness level, or misjudge some aspect of instruction, medical treatment, weather, terrain, water level, or route location.

**Personal health and participation risks.** The risk that a participant's mental, physical or emotional condition (disclosed or undisclosed, known or unknown) combined with participation in these activities could result in injury, damage, death or other loss.

**The risk that equipment used** in an activity may be misused, or may break, fail or malfunction.

**AMC activities may take place in remote places,** several hours or days from any medical facility, causing potential delays or difficulties with communication, transportation, evacuation and medical care.

**Risks connected with meals and/or cooking and camping chores.** Meals may include exposure to food allergens. Risks also include gas explosion, scalding or other burns associated with cooking over a gas stove or open fire, and water contamination from natural water sources. All water may be contaminated and should be disinfected, filtered or boiled before use.

**Risks associated with AMC facilities and premises,** including boulders, ruts, slippery walkways, ponds or other water sources, uneven ground or other conditions.

**Risks associated with transportation.** Travel can be on foot or by vehicle, bicycle, boat or other means and can be over rough and unpredictable terrain or via oceans or rivers, with wind, rain, or other adverse weather conditions.

**Volunteer community service.** Risks associated with activities such as (but not limited to) building, digging and trail maintenance, painting, construction and clean-up projects. Projects can include the use of tools and equipment (i.e. drills, saws, power tools) that can cause injury resulting from use, misuse or malfunction.

**Risks regarding conduct,** including the potential that the participant, or other participants or third parties (e.g. general public, rescue squad, medical facility) may act carelessly or recklessly.

**Participants may have limited, unsupervised time** during, before or after the start of an AMC program. This may include periods of free time, or periods of time alone while engaged in backcountry travel. **During both supervised and unsupervised activities, all participants share in the responsibility for their own safety and the safety of the group.**

**Other risks** that are generally associated with instructional, educational and/or adventure activities.

**These and other risks may result in participants falling, being struck, colliding with objects or people, experiencing vehicle or boat collision or capsizing, drowning, reacting to weather conditions or increased exertion, suffering gastro-intestinal complications or allergic reactions, becoming lost or disoriented, or experiencing other problems. These and other circumstances may cause hyperthermia, hypothermia, frostbite, dehydration, burns, heart or lung complications, broken bones, concussions, paralysis, mental or emotional trauma, or other injury, damage, death or loss.**

2/23/10 RMT

**I (participant and parent/s of a minor participant) agree:**

- To accurately complete all required forms (which may include, but is not limited to the AMC application, registration and medical forms), abide by the terms of those documents, and obey all AMC rules, regulations and policies;
- If participant has any mental, physical or emotional conditions or limitations that might affect his/her ability to participate I agree to disclose those to AMC, and represent that participant is fully capable of participating without causing harm to him/herself or others;
- AMC is, and has been available, should I have further questions about these activities and the associated risks;
- AMC cannot assure participant's safety or eliminate any of these risks.

**Participant is voluntarily participating with knowledge of the risks. Therefore, participant (and parent/s of minors) assume and accept full responsibility for the inherent and other risks (both known and unknown) of these activities, and for any injury, damage, death or other loss suffered by participant (and parent/s of minors), resulting from those risks and/or resulting from participant's negligence or other misconduct.**

**RELEASE AND INDEMNITY AGREEMENT**

**Please read carefully. This Release and Indemnity agreement contains a surrender of certain legal rights. I (adult participant, or parent/s for themselves and for and on behalf of their participating minor child) agree as follows:**

- (1) **to release and agree not to sue AMC**, with respect to any and all claims, liabilities, suits or expenses (including attorneys' fees and costs) (hereafter collectively 'claim' or 'claim/s') for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities, or use of AMC equipment, facilities or premises. **I understand I agree here to waive all claim/s I or my child may have against AMC, and agree that neither I, my child, or anyone acting on my or my child's behalf, will make a claim against AMC, as a result of any injury, damage, death or other loss suffered by me or my child;**
- (2) **to defend and indemnify** ('indemnify' meaning protect by reimbursement or payment) **AMC** with respect to any and all claim/s brought by or on behalf of me, my child or a family member for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities or use of AMC equipment, facilities or premises.

**This Release and Indemnity Agreement includes claim/s resulting from AMC's negligence (but not its gross negligence or intentional or reckless misconduct), and includes claim/s for personal injury or wrongful death (including claim/s related to emergency or medical response, assessment or treatment), property damage, breach of contract or any other claim.**

**CONCLUSION**

I (participant and parent/s of a minor participant) agree that the substantive laws of Massachusetts govern this Document, any dispute I have with AMC and all other aspects of my relationship with AMC, and that any mediation, suit, or other proceeding must be filed or entered into only in Massachusetts.

AMC reserves the right to remove any participant from the program who staff or leaders believe, in their discretion, presents a safety concern or medical risk, is disruptive, or acts in any manner detrimental to the program. If participant is dismissed or departs for any reason, participant (and his/her family) are responsible for all costs of early departure whether for medical reasons, dismissal, personal emergencies or otherwise. These costs include, but are not limited to medical evacuation and costs, plane, train or taxi fare, accommodations, and costs and compensation for staff accompanying participant.

**This Document is intended to be interpreted and enforced to the fullest extent allowed by law. Any portion of this Document deemed unlawful or unenforceable shall not affect the remaining provisions, and those remaining provisions shall continue in full force and effect.**

**Participant and parent/s of a minor participant agree: I have carefully read, understand and voluntarily sign this two-page Document and acknowledge that it shall be effective and binding upon me, my minor children and other family members, and my heirs, executors, representatives and estate. *One or both parent/s must sign below for any participating minor (those under 18 years of age).***

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

2/23/10 RMT

## PHOTO RELEASE

Your consent is greatly appreciated as it allows photos taken during this program to be used by the AMC in the future, but it is not required. The Youth Opportunities Program is funded by grants in order to make our trainings and trips affordable. Photos of our activities help our fundraising efforts. We'd greatly appreciate your consent!

I hereby authorize the Appalachian Mountain Club (AMC) and/or parties designated by the AMC (including periodicals, other printed matter, or electronic media, and their editors) to use my photograph for sale to or reproduction in any medium the AMC or its designees see fit for the purposes of education, advertising, display, exhibition, or editorial use.

Print Participant's Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Date \_\_\_\_\_

**If applicant is under 18 a parent or guardian signature is required:**

Signature of parent/guardian \_\_\_\_\_

Date \_\_\_\_\_

☐ I do not want my photo/my child's photo to be used.

**Outdoor Extension Mission Statement** - To incorporate authentic learning experiences from the outdoors and provide enrichment opportunities for students to explore nature through academics and community building activities. Through our partnership with the **Youth Opportunities Program** and as youth outdoor leaders, we will be able to create more experiences for students in the outdoors with a focus on team building, practicing student leadership, developing resilience, and independence.

The outdoor club activities will include but are not limited to: day hikes, rock climbing, team building and various ideas from outdoor education.

### **Overnight Field Trip Proposal Youth Mountain Adventure Program (YMAP)**

1. This outdoor opportunity will only allow for us to take nine students in grades 6-8 who are part of the Outdoor Club.
2. The trip will give students an opportunity to put their learning into practice while celebrating the season. It will expose students to outdoor activities such as hiking and camping and provide students with the opportunity to develop leadership skills which they can utilize when returning to school.
3. The Outdoor Club curriculum, which will be utilized on this trip, includes activities such as knot tying, "Leave No Trace" techniques, orienteering, etc...
4. Outdoor Adventure Details:
  - a. Information being provided is from last year's adventure. We will provide updated information when it becomes available.
  - b. Saturday, January 16th - Monday 18th (Martin Luther King Holiday Weekend). Our destination is the Pinkham Notch Visitor Center in Pinkham Notch, NH. The center is owned by the Appalachian Mountain Club (AMC) and the YMAP trip will be run by AMC staff. We will depart from the school parking lot at 7:00am on Saturday, 1/16, and return on Monday, 1/18 at 4pm.
5. For the January trip, transportation will be provided by YOP, a 12 passenger van.
6. Overnight accommodations will be organized by AMC/ YOP staff. Boys and girls will sleep in separate sections of the Visitor Center.
7. This outdoor adventure is cost neutral. There is no cost for the trip.

8. Nine of the nineteen Outdoor Club members will participate in the trip along with two adults.
9. Steve Cullen and Jaime Moody will chaperone the trip along with AMC/ YOP staff. All adults at the Pinkham Notch Visitor Center are required to have CORI checks.
10. Information packet is included.
11. Medical care will be provided by AMC/YOP staff. All students are required to complete an AMC Permission/health forms packet.
12. Permission slip is attached.
13. Parent meeting will take place at least 2 weeks prior to the trip. Date TBD.
14. Outdoor Club students who are interested in attending the trip will write an essay about why they should be selected to attend. Nine students will be selected. Students who were not selected for the Nobel View trip will be given priority.
15. Field trip forms are attached.

**The Lincoln School**  
**Field Trip Permission Slip**

On Saturday-Monday (MLK Day), January 16-18, students in the Lincoln School's Outdoor Club will have the opportunity to participate in an overnight field trip at the AMC's Pinkham Notch Visitor Center in Pinkham Notch, NH. This trip allows students the opportunity to utilize the skills learned in the Outdoor Club and to be exposed to outdoor opportunities such as hiking and camping. The AMC sponsored Youth Mountain Adventure Program will be led by AMC staff and will allow the students the opportunity to enjoy: snowshoeing, hiking, cross country skiing, and sledding. There is no charge for this trip.

Sincerely,

Steve Cullen & Jaime Moody

I \_\_\_\_\_ hereby consent to my son / daughter's participation in the trip to YMAP trip at the Pinkham Notch Visitor Center on. We will be leaving school on Saturday, 1/16 at 7:00 a.m. and returning on Monday, 1/18, at 4:00p.m.

I understand that transportation will be provided by AMC staff in a 12 passenger van and that the supervision will be by Steve Cullen and Jaime Moody. I hereby also consent to whatever arrangements are made for my son or daughter generally consistent herewith, and any reasonable arrangement in case of emergency, including arrangements for emergency transportation and/or medical care, which is deemed necessary in such situation by the teacher, or if unavailable, by any other adult supervisor. I understand that reasonable precautions for safety will be taken.

Name of Child \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**\*\*Mandatory parent meeting TBD.**



Lincoln Public Schools  
Lincoln, Massachusetts

JAN 16-18

## LATE NIGHT AND OVERNIGHT FIELD TRIP PROPOSAL

» to be submitted 3 months prior to approval date «

Please refer to School Committee Policy File: ICCA

School: Lincoln School Grade(s): 6-8Number of Students: 9 % Class/Group: \_\_\_\_\_Destination: Pinkham Notch, NH

Address: \_\_\_\_\_ Telephone# \_\_\_\_\_

Dates: Jan. 16-18Departure Time: 7am Return Time: 4pm

## Costs for the Trip:

Transportation: \_\_\_\_\_ # of Buses \$ 0

Admissions: \_\_\_\_\_ # students x \$ \_\_\_\_\_ / each = \$ \_\_\_\_\_

\_\_\_\_\_ # adults x \$ \_\_\_\_\_ / each = \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Accommodations: \$ \_\_\_\_\_

Teacher Stipends (overnight trip): \_\_\_\_\_ # teachers x \$ \_\_\_\_\_ / each \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

TOTAL \$ 0Cost Per Student: \$ 0Supervising Teacher: Steve Cullen + Jaime Moody

Teacher(s)/Chaperone(s) Name (Print)\*

Steve Cullen  
Taine Moody

Signature

Steve Cullen  
Taine Moody

\*If chaperones are not identified at the time the trip is proposed, a complete list must be provided by the supervising teacher to the Principal prior to departure.

Have arrangements been made to ensure that all students can participate? ☒ yes ☐ no  
Describe: \_\_\_\_\_

Who will be responsible for: first aid \_\_\_\_\_ medications \_\_\_\_\_  
epi pen \_\_\_\_\_

Nurse Contacted: ☐ Yes ☐ No

\_\_\_\_\_  
Nurse's Signature

\_\_\_\_\_  
Date

☐ Approved

\_\_\_\_\_  
Principal's Signature

\_\_\_\_\_  
Date

☐ Disapproved

☐ Approved

\_\_\_\_\_  
Superintendent's Signature

\_\_\_\_\_  
Date

☐ Disapproved

Attach statements addressing each of the following: relevance to educational program and explanation of purpose of trip; destinations and itinerary of trip; explanation of transportation plan; explanation of arrangements for accommodations; copies of information and communications to be given to parents; agenda for parent information meeting(s). [See Policy IICA for more details.]



Winter YMAP 2015

Dear YOP Member:

Thanks for your interest in YOP's Youth Mountain Adventure Program (YMAP)! We hope you and your youth can take part in one of these terrific trips!

As a limited number of trips are available, YOP will use the following guidelines for selecting groups:

- This is a great opportunity for youth workers who have recently completed YOP's Winter Exploration Workshop, although any current YOP Member is eligible to apply.
- Trips will be reserved on a first-come first-served basis with priority given to Boston area youth agencies that serve urban and at-risk youth.
- Youth may be ages 11 to 18. Groups may be coed or single gender.
- Groups should include 8-9 youth and 1-2 YOP members. While all trips must be led by at least one YOP member, a second youth worker who is not a YOP member may also attend.
- The organization understands that this trip is meant to be a catalyst for its own programming and agrees to lead an independent trip in 2015 with a trip report returned to YOP.

Attached is all the information you need to sign up your group for a YMAP trip. Please read both documents thoroughly:

- Agency Registration Form & Enrollment Agreement
- Frequently Asked Questions

The following is a checklist for your planning. These are the steps you will need to take in order to participate in a YMAP trip:

1. **Determine Availability.** Call 617-391-6599 to check if your preferred trip dates are available.
2. **Register.** Complete and submit the Agency Registration Form & Enrollment Agreement. If the trip dates have become unavailable, you may request to be put on the wait list.
3. **Confirmation.** Once you have returned the Agency Registration Form, you will receive a confirmation email with additional information and all participant paperwork.
4. **Schedule a pre-trip meeting** with Nathan Schumacher (nschumacher@outdoors.org or 617-391-6599).
5. **Recruit youth** to participate in the trip. (YOP also encourages agencies to start waitlists of interested youth in case registered youth are no longer able to attend.)
6. **Complete YMAP information packets.** Upon confirmation of your trip we will mail you 11 copies of the YMAP information packet. Distribute to youth and all attending staff. Remember – YOP only accepts originals. No photocopies or faxes please.
7. **Collect forms.** We'll need one set for each youth and staff participating. Everyone must have: (1) Youth Registration Form, (2) Trip Policies Form, (3) Medical Form, and (4) Release and Indemnity Agreement.
8. **Return all forms to YOP.** We must receive them *at least one week prior* to the trip date.

As always, if you have any questions, please call. YOP is here to help you not only with this trip, but any adventure you are planning. We hope YMAP is a winter highlight for your youth and we look forward to working with you!

Sincerely,

Nate

Nate Schumacher  
YOP Trip Leader & Logistics Coordinator  
617-391-6599  
nschumacher@outdoors.org



## **The Youth Mountain Adventure Program (YMAP)**

### **Frequently Asked Questions**

#### **Where are we going?**

This trip is based out of the White Mountains in New Hampshire. Groups will be sleeping in **AMC's Joe Dodge Lodge in Pinkham Notch** which is located in Gorham, NH. The heated lodge is surrounded by many hiking and skiing trails, and adjacent to a local ski touring center, Great Glen Trails, where YMAP groups will cross country ski. For more information about Joe Dodge Lodge please visit <http://www.outdoors.org/lodging/lodges/pinkham/>

#### **Who is responsible for trip leadership?**

The YOP member and YOP staff will have shared leadership responsibilities for this trip. Agency staff will be expected to share in the outdoor leadership aspects of the trip (based on their comfort and experience), as well as facilitate other aspects of the trip. YOP sees the adults on the trip working in partnership to ensure a successful experience for all involved. Agency staff know their youth and their agency's rules, making them best equipped to handle many situations, such as discipline, medication, and inappropriate behavior. All YOP staff, agency staff, and youth will be expected to follow safety guidelines established by AMC. In addition, youth will be given opportunities to practice leadership skills on the trip.

#### **How many youth can I bring?**

The maximum number of participants is 11, including agency staff. Groups should include 8-9 youth and 1-2 YOP members. While all trips must be led by at least one current YOP member, a second youth worker who is not a YOP member may also attend.

#### **Who will provide clothing and equipment for my youth?**

YOP will take care of the equipment needs and bring everything that is needed. At the pre-trip meeting, all participants will be sized for clothing and equipment, which will be issued at the start of the trip. This includes fleece, long underwear, snowshoes, cross-country skis, boots, and more. Youth will receive a personal packing list of what to bring for personal items at the pre-trip and in their registration paperwork. Youth agencies are responsible for lost equipment as they would be on independent trips.

#### **What about the cold and the snow?**

The weather conditions will be very cold and youth will be traveling in snow. YOP provides all participants with the appropriate gear and clothing for each person to stay warm. In addition, YOP instructors are trained to prevent and manage cold weather injuries. There are also a number of indoor spaces that groups can use if the weather conditions require that the group remain inside.

#### **What about food?**

AMC's lodges serve a buffet breakfast and five-course dinner each day. YOP will be providing trail lunches and snacks during the trip. If there are any special dietary needs please make sure they are noted on the individual's medical form. Agencies may want to pack snacks for the van rides.

#### **What will we do on the trip?**

This trip is a great opportunity to learn and practice outdoor skills including cross country skiing, building snow shelters, snowshoeing, and navigation. We will build leadership and communication skills through various games and activities. Being outdoors for three days is a great chance for youth to challenge themselves, gain a better understanding of the natural world, and learn how to be comfortable outside in the winter.

#### **Can my agency go on more than one trip?**

Due to the limited number of trips, we ask that each agency sign up for only one session this winter.

#### **What do my youth need to leave at home?**

In order for all to enjoy the natural setting of the mountains, YOP requires that you have your youth leave the following at home: cell phones, iPods, MP3 players, handheld games, other electronics, and any other items you feel may be distracting. Alcohol, smoking, illegal drugs, and dangerous objects of any kind are prohibited.



# SAMPLE AGENDA YMAP WINTER TRIP

**PRE-TRIP MEETING:** What to Expect; Full Values Contract; Comfort Zones; Slideshow;  
Clothing Demonstration; Sizing of Equipment

**Based on a trip during the Feb. Vacation Week or MLK Holiday weekend**

## **DAY 1**

### **Morning**

- Drive to Pinkham Notch, NH
- Lunch at arrival

### **Afternoon**

- Trip Introductions & Overview
- Name Game / Ice Breaker / Cooperative Game
- Clothing & Layering Workshop
- Snowshoe Hike to Lila's Ledge (modeling leadership)

### **Evening**

- Night Hike to Crystal Cascades
- Debrief the Day

## **DAY 2**

### **Morning**

- Group Energizer & Leadership Development (Leaders of the Day)
- Introduction to Cross-Country Skiing

### **Mid-Afternoon**

- Nordic Skiing at Great Glen
- Youth pick ski route and navigate (Leaders of the Day)

### **Late Afternoon**

- Snow Tubing at Great Glen
- Debrief the Day (Community Web)

### **Evening**

- Agency Led: Ideas- Teambuilding & Leadership Activities

## **DAY 3**

### **Morning**

- Group Energizer & Leadership Development
- Move out of Lodge
- Snowshoe Hike to Lost Pond
- Final clean up

- Debrief the morning
- Closing Activity (Group Shuffle)
- Lunch and Trip Evaluations
- Drive back to youth agency



## Youth Mountain Adventure Program (YMAP)

### AGENCY REGISTRATION FORM & ENROLLMENT AGREEMENT

Please register my agency for the following YMAP Session:

- |  |  |
|--|--|
| <input type="checkbox"/> Session 1: January 17-19, 2015  | <input type="checkbox"/> Session 2: February 6-8, 2015   |
| <input type="checkbox"/> Session 3: February 14-16, 2015 | <input type="checkbox"/> Session 4: February 18-20, 2015 |

Transportation: YOP may be able to provide transportation depending on availability of the YOP van. (Please check the box that applies to your agency.)

- ☐ My agency will provide transportation for this trip.  
☐ My agency may be able to provide transportation for this trip.  
☐ My agency cannot provide transportation for this trip.

Agency Name: \_\_\_\_\_

YOP Leader Name: \_\_\_\_\_

Agency Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Total # of staff attending trip: \_\_\_\_\_ Number of youth attending trip: \_\_\_\_\_

Age range of youth: \_\_\_\_\_

**Payment – Refundable deposit:** The total cost to YOP per YMAP trip is \$5,000; the cost per youth is \$500. This includes our costs for staff, lodging, equipment, food, and materials. YOP has worked very hard to secure funding for the YMAP initiative in order to provide fun and affordable trips to qualifying YOP youth groups. It is vital that all registered groups understand how important this commitment is for the future of our funding and this project.

To ensure that each group is able to participate in the trip with the agreed upon number of youth and staff, YOP requires each agency to make a \$200 refundable deposit. The deposit will be refunded after the trip unless an agency cancels a trip or does not have enough participants for the trip. Deposit refunds will be determined on a case by case basis. This will allow us to have a successful winter, make the best use of our resources, and serve the most youth. We thank you for your understanding and assistance.

- ☐ I have enclosed a check for \$200  
☐ Please hold my credit card information

Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Fax: 617-523-0722

Email: [Nschumacher@outdoors.org](mailto:Nschumacher@outdoors.org)

Mail: Appalachian Mountain Club  
Youth Opportunities Program  
5 Joy Street  
Boston, MA 02108  
ATTN: Nate Schumacher



## YOUTH OPPORTUNITIES PROGRAM

### YOUTH MOUNTAIN ADVENTURE PROGRAM (YMAP)

#### GENERAL INFORMATION



Welcome to the Appalachian Mountain Club's Youth Opportunities Program! We have an exciting few days of outdoor adventure, exploration, and fun planned for you. Enclosed in this packet you'll find important information and several forms. Please read through everything carefully. After reviewing all of the enclosed materials, please call us with any questions at 617-391-6599. We're looking forward to seeing you this winter!

**Our Mission:** The mission of the Appalachian Mountain Club's Youth Mountain Adventure Program (YMAP) is to expose youth to the wonders of the outdoors. YMAP aims to develop leadership skills and self-esteem, foster an appreciation for the environment, instill a spirit of adventure, and promote teamwork and a sense of community through fun and educational outdoor experiences.

**Our Partnerships:** YMAP trips are a partnership between the AMC's Youth Opportunities Program (YOP) and the sponsoring youth organization. YOP provides trip instructors, food, lodging, and other trip necessities. The sponsoring youth organization coordinates with youth and parents and also sends one of their YOP trained staff on the trip. The sponsoring organization will be responsible for distributing information to families and determining which young people will attend the trip. Each trip should have at least one main contact person from the sponsoring youth organization who will be the point of contact for all trip questions. You may also contact YOP directly at 617-391-6599 with any questions.

**Our Staff:** The AMC's professional instructors are dedicated, energetic, and talented leaders experienced in working with youth. All our instructors are trained and/or certified in wilderness medicine, winter safety, Leave No Trace principles, and have strong backcountry skills and ethics. They come from a wide variety of backgrounds and life experiences and are committed to providing youth with a fun and educational experience in the outdoors while maximizing the safety of all participants. At least one AMC instructor, along with staff from the youth organization will be with the group for the entire trip.

**Our Expectations:** We don't require any prior outdoor experience to take part in YMAP - all ability levels are welcome and expected! Both experienced and non-experienced youth will find this trip rewarding. We expect all participants to come with a desire to try new things and face new challenges and cooperate with the group. Participants are expected to support each other through challenges and share chores with the help and guidance of the instructors. Enthusiasm, commitment, and a positive attitude will make this trip an adventure of a lifetime!

**Trip Location:** This YMAP trip will take place at the AMC's Joe Dodge Lodge located in the White Mountains of New Hampshire. Participants will stay in heated bunkrooms for two nights. This lodge is complete with common bathrooms, meeting spaces, library and dining facilities. All outdoor activities will take place in the area and trails surrounding the lodge or at a nearby skiing center.

**Level of Physical Activity:** Participants do not have to be super athletes to enjoy any of the activities, but they will have a more comfortable experience if they play sports or get some form of regular exercise. The hiking and snowshoeing is moderate - this means you will hike 1-5 miles, gain 2,000' in elevation, and the trails are icy, rugged and steep in parts. The instructors will teach the participants how to "keep going" when the trail gets challenging.

**Food:** Participants eat three full meals a day, including plenty of snacks. AMC's Lodges provide a breakfast buffet each morning and a five-course dinner at night. Lunches will be eaten on the trail. We easily accommodate most dietary restrictions; let us know in advance so we can plan accordingly. All the participants help prepare and clean up after lunch.

**Transportation:** The youth organization will be responsible for transportation to and from AMC's lodge as well as to the cross-country skiing facility. This may mean that the organization has approved travel in an AMC van. Parents and guardians are responsible for coordinating drop off and pick up for youth at the sponsoring youth organization.

**Clothing:** The weather in the mountains is quite unpredictable and can vary widely. It can get very cold and there will be snow and ice. Wearing the right clothes and having the proper equipment can make the difference between a safe, warm and enjoyable trip and a miserable experience. The AMC will provide all specialized outdoor clothing, and teach participants how to use it correctly. For clothing we teach the *layering system*: Start with a base layer, which should be polypropylene ("polypro,") then an insulating layer of fleece or wool, and last an outer layer which is wind/water proof. Synthetic or wool fabrics are best as they hold less moisture than other fabrics. Youth will be expected to bring their own shirts, pants, underwear, and other regular clothing items. Please refer to the packing list included in this packet for a complete list of what participants need to bring on the trip.

**Sleeping Arrangements:** The AMC provides bunkrooms in its lodging facilities. Boys and girls will have separate sleeping quarters. Bathrooms are available to ensure privacy for changing.

**Personal Hygiene:** Keep your toiletries simple: toothbrush, small toothpaste, comb and facecloth. There will be little time to shower during the trip, so primping won't be an option. Girls should bring necessary feminine products. Instructors will discuss tips for dealing with them at the beginning of the trip.

**Medications:** The youth organization staff are responsible for carrying and distributing ALL medications during the trip for the safety of your child as well as other participants. This includes painkillers and commonly used over the counter drugs. *Send your child's medications in the pharmacy's bottle with the full label attached.* Check in with the staff at the pre-trip meeting to clarify any questions about the medications. During the YMAP trip, your child will, and should, continue taking any medications he or she does on a regular basis.

**In Case of a Family Emergency:** An AMC staff person is on call 24 hours a day to respond to program needs. Do not plan on your child being able to call home during the trip as phones are not typically available. If you need to reach your child in case of a serious emergency during the trip, please call Pinkham Notch Visitor Center at 603-466-2721 x8117 until 10 PM. Tell the staff your child is part of the YOP/YMAP trip and they will do their best to contact the group. Please keep in mind that the group may be far from the lodge and it may take some time before they can be reached. If you prefer, an AMC/YOP staff member is also available in Boston 24 hours a day and can be reached during business hours by calling the number listed on the voicemail of 617-391-6599.

**Safety:** As participant safety is a high priority for all AMC-sponsored events, procedures and policies have been developed to attempt to limit participant risk. Participants are expected to work with staff to reduce risks and make the experience successful for all. In case of an emergency, the AMC staff is trained in Wilderness First Aid, carry first-aid kits, and follow a comprehensive Emergency Action Plan. The AMC uses radios or other communication devices – although these are not reliable in all locations and conditions. Despite such steps, parents and participants should be aware that there are risks associated with outdoor adventure activities, including but not limited to cooking and camp chores, adverse weather and environmental conditions, remote locations of our trips, and transportation in vehicles, on foot, by boat, or on a bike. Please carefully read and sign the *Participant Acknowledgement and Assumption of Risks and Release and Indemnity Agreement* and call if you have any questions. Parents' and participants' understanding of these risks and adherence to our policies and procedures can contribute to making this experience rewarding.

**Cost:** The YMAP program is provided through scholarships from many donors and is free to all participants. AMC will provide instruction, all meals from lunch on the first day through lunch on the last day, outdoor equipment, and all fees during the program. Please keep in mind that the value of this trip is \$500 per youth. Please let your sponsoring youth organization know immediately if your child cannot attend the trip so that another young person can have the opportunity.

**For More Information, Contact:** Nathan Schumacher at 617-391-6599 or [nschumacher@outdoors.org](mailto:nschumacher@outdoors.org), or the teacher or youth worker responsible for putting the trip together for your participating organization.





## YOUTH MOUNTAIN ADVENTURE PROGRAM EQUIPMENT & CLOTHING CHECKLIST

Conditions can be cold, wet, sunny and windy. Because cotton loses its insulating value when wet, it is essential to wear wool, fleece, and polypropylene. Cotton clothing is fine for pajamas but is not permitted while youth are outdoors. We cannot take anyone outdoors without proper clothing.

### *Please wear:*

- ☐ Comfortable warm clothes and shoes for the drive there and back

### *Please bring:*

- ☐ Book bag, small backpack, or small duffel bag (to pack personal clothes and items in)
- ☐ Sleep wear (not what you hike/ski in)
- ☐ 1 Full Change of Clothes w/ extra underwear
- ☐ Toiletries – see Personal Hygiene on page 2
- ☐ Any personal items such as medication, glasses

### *Please DO NOT bring:*

- ☐ Alcohol or illegal drugs
- ☐ All electronics including: cell phone, music player, electronic games, etc.
- ☐ Unsafe objects of any kind including knives
- ☐ Matches or lighters

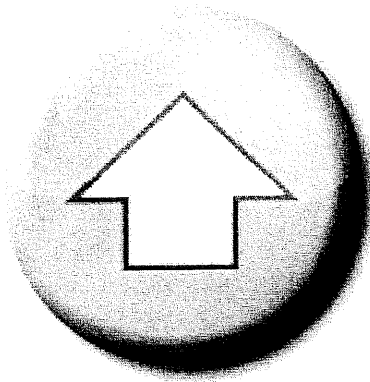
### *Optional*

- ☐ Sunglasses or baseball hat
- ☐ Chapstick, lip balm
- ☐ Disposable camera

---

### *We will provide the following for all participants:*

- 1 set of wool or polypropylene long underwear (top and bottoms)
- 1 set of fleece insulating layers (2 tops and 1 bottom)
- 1 set of waterproof raingear (jacket and pants)
- 1 pair of winter hiking boots
- 2 pairs of wool socks
- 1 wool or fleece hat or balaclava
- 1 pair of winter gloves or mittens
- 2 water bottles
- Water bottle insulator
- Backpack
- Snowshoes
- Cross Country Skis, Boots and Poles
- Trash bags & Ziploc bags to organize clothing & gear
- All food
- First-aid kit (carried by staff)
- Sunscreen
- Compass, maps and other activity supplies



**Please Detach All the Above  
Pages for Your Reference**

**FILL OUT ALL FORMS FOLLOWING  
THIS PAGE COMPLETELY TO  
ENSURE THE PARTICIPATION OF  
YOUR YOUTH**



**Appalachian Mountain Club – Youth Opportunities Program  
Confidential Health Questionnaire**

**Participant Name:** \_\_\_\_\_  
First Middle Last

**YOP Program Name:** \_\_\_\_\_ **Course Start Date:** \_\_\_\_\_

**Birthday:** \_\_\_\_\_ **Height:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ ☐ Male ☐ Female  
Month/Day/Year

**Home Address:** \_\_\_\_\_  
Street City State Zip code

**Phone #s:** \_\_\_\_\_  
Day Evening Cell

**Emergency Contact:** \_\_\_\_\_  
Name Relationship

**Emergency Contact's Phone #s:** \_\_\_\_\_  
Day Evening Cell

**SEVEN-QUESTION HEALTH QUESTIONNAIRE**

*Parent or legal guardian should complete form for all children under 18 years participating in AMC activity.*

- 1. Have you experienced an asthma attack at any time in your life?** (Asthma can potentially be affected by exercising at altitude, in dry air, extreme cold, etc.)
- 2. Have you ever been diagnosed with type I or type II diabetes?** (A diabetic can easily become dehydrated in backcountry environments. Further, long, arduous days/hikes can lead to hypoglycemia, etc.)
- 3. Have you ever visited a medical professional for a serious allergic reaction, or have you ever been given a shot of epinephrine for an allergy or anaphylaxis?** (Some people are allergic to stinging insects; nut products or other food products which a co-participant might be carrying or may be included in a meal prepared by AMC staff; iodine, which might be used to treat drinking water and/or clean wounds, etc.)
- 4. Have you ever received medical treatment for angina, a heart attack, or any type of heart disorder/disease?**
- 5. Have you ever been diagnosed with or are you currently being treated for high blood pressure?** (The environment and workload associated with AMC courses can sometimes affect BP and/or the efficiency of some BP medications.)
- 6. Have you ever seen a medical professional following a seizure, or are you currently being treated for any type of seizure disorder?** (Some seizures are triggered by fatigue and dehydration [which can occur following a long hike], significant change in diet, stress, etc.)
- 7. Is there anything else you think we should know about your medical background?** (i.e., anything that could affect your safety or ability to participate fully?)

Yes	No

**If you answered YES to ANY of the seven questions above please answer the following:**

- I was diagnosed with \_\_\_\_\_ in the last year.
- I have visited the emergency room in the last year due to \_\_\_\_\_
- I have had to use epinephrine following an asthma attack/allergies or anaphylaxis in the last year?
  - Will you be bringing/carrying epinephrine on the outing? \_\_\_\_\_
  - What are you allergic to? \_\_\_\_\_
- How often do you use your inhaler to treat your asthma or wheezing? \_\_\_\_\_
- Do you have poor circulation due to your diabetes? \_\_\_\_\_
- Will you be carrying insulin or wearing an insulin pump during your outing? \_\_\_\_\_
- Are you able to exert yourself for more than 30 minutes without experiencing angina (chest) pain? \_\_\_\_\_
- Are you currently taking medication for your seizures? \_\_\_\_\_
- Have you experienced a seizure within the past year? \_\_\_\_\_
- Is your blood pressure currently under control (i.e., systolic under 140 and diastolic between 60 and 100)? \_\_\_\_\_

If there is anything else you think we should know about your medical background, please explain below. Attach a separate sheet if necessary.

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**DIETARY RESTRICTIONS:** Do you have any dietary restrictions? ☐ Yes – list below ☐ No

**Please be specific:** (food allergies, iodine/seafood allergy, vegetarian, no red meat, vegan, lactose intolerant, strong food dislikes, etc.) \_\_\_\_\_

**PLEASE READ CAREFULLY!** Participants (or parents/guardians, if appropriate) must read and sign below.

**Participant acknowledgement of accuracy and understanding.** By signing this form, I am declaring that, to the best of my knowledge, I have completed the questionnaire accurately. I also understand that by knowingly filling out the form inaccurately, or by withholding pertinent information about my health, I could potentially be increasing the risk to myself or others.

**Consent to accept aid.** By signing this form, I am giving consent and permission for AMC staff, volunteers, representatives, or contractors to provide medical care to me or to my child, to transport me or my child to a medical facility or to seek the aid of emergency medical services as deemed appropriate. I further authorize AMC staff, volunteers, representatives, or contractors to render whatever treatment they consider necessary for my or my child's health, and I agree to pay all costs associated with that care and transportation.

\_\_\_\_\_  
Participant's name (printed)

\_\_\_\_\_  
Participant's signature

\_\_\_\_\_  
Signature of parent/guardian (if applicant is under 18)

\_\_\_\_\_  
Date

**APPALACHIAN MOUNTAIN CLUB PARTICIPANT  
ACKNOWLEDGMENT AND ASSUMPTION OF RISKS & RELEASE AND INDEMNITY AGREEMENT**

**INTRODUCTION**

**PLEASE READ THIS ENTIRE TWO-PAGE DOCUMENT** (hereafter 'Document') **CAREFULLY BEFORE SIGNING.** All participants must sign this Document. For participants under 18 yrs. of age (hereafter sometimes 'minor' or 'child'), one or both parent/s or guardian/s (hereafter collectively 'parent/s') must also sign. In consideration of the services of the Appalachian Mountain Club, Inc., a charitable, not-for-profit corporation, organized and existing under the laws of Massachusetts, and its chapters, including all officers, directors, employees, representatives, agents, independent contractors, volunteers (including leaders and co-leaders), members and all other persons or entities associated with it (collectively referred to in this Document as 'AMC'), I (participant and parent/s of a minor participant), acknowledge and agree as follows:

Appalachian Mountain Club contracts with individuals or organizations that are independent contractors (not employees or agents of Appalachian Mountain Club) to conduct some of the activities participants may engage in. Although the Appalachian Mountain Club has made efforts to locate responsible contractors, it does not supervise or control these contractors and is not responsible for their conduct. Participant (and parent/s) acknowledge that they may independently investigate and assess these organizations and activities, if they choose to do so. **Further, Appalachian Mountain Club uses volunteers to assist with, and sometimes lead activities, workshops or programs. These individuals are not paid professional guides or leaders. In all activities, all participants share in the responsibility for their own safety and the safety of the group.**

**ACKNOWLEDGMENT & ASSUMPTION OF RISKS**

AMC instructional, educational and/or adventure activities (which may be scheduled or unscheduled, supervised or unsupervised and/or occur during free time) include, but are not limited to hiking, backpacking, camping, biking, skiing, snowboarding, snowshoeing, high and low ropes courses, trail work, maintenance of facilities, mountaineering, rock and ice climbing, canoeing, kayaking, sailing, swimming, environmental education, wilderness emergency medical training, first aid and rescue, participation in volunteer service projects, use of AMC huts or other facilities and transportation or travel to and from activities (referred to in this Document as 'activities' or 'these activities'). **These activities include inherent and other risks, hazards and dangers** (referred to in this Document as 'risks') **that can cause or lead to injury, damage, death or other loss to participant or others.** The following includes some, but not all of those risks:

**Risks present in an outdoor, mountainous or wilderness environment on land or water, both on and off trail.** Travel can be subject to storms, strong winds, avalanches, currents, waves, whitewater, lightning, rapidly moving rivers or other water bodies, difficult stream crossings, snow or ice, extremely hot, humid or cold weather or water, steep terrain, falling rock, stinging or disease carrying animals or insects, wild animals and other natural or human-made hazards and dangers. Hazards may not be marked and weather is unpredictable year-round.

**Risks in decision making,** including, without limitation, the risk that AMC may misjudge a participant's capabilities, health or fitness level, or misjudge some aspect of instruction, medical treatment, weather, terrain, water level, or route location.

**Personal health and participation risks.** The risk that a participant's mental, physical or emotional condition (disclosed or undisclosed, known or unknown) combined with participation in these activities could result in injury, damage, death or other loss.

**The risk that equipment used in an activity may be misused, or may break, fail or malfunction.**

**AMC activities may take place in remote places,** several hours or days from any medical facility, causing potential delays or difficulties with communication, transportation, evacuation and medical care.

**Risks connected with meals and/or cooking and camping chores.** Meals may include exposure to food allergens. Risks also include gas explosion, scalding or other burns associated with cooking over a gas stove or open fire, and water contamination from natural water sources. All water may be contaminated and should be disinfected, filtered or boiled before use.

**Risks associated with AMC facilities and premises,** including boulders, ruts, slippery walkways, ponds or other water sources, uneven ground or other conditions.

**Risks associated with transportation.** Travel can be on foot or by vehicle, bicycle, boat or other means and can be over rough and unpredictable terrain or via oceans or rivers, with wind, rain, or other adverse weather conditions.

**Volunteer community service.** Risks associated with activities such as (but not limited to) building, digging and trail maintenance, painting, construction and clean-up projects. Projects can include the use of tools and equipment (i.e. drills, saws, power tools) that can cause injury resulting from use, misuse or malfunction.

**Risks regarding conduct,** including the potential that the participant, or other participants or third parties (e.g. general public, rescue squad, medical facility) may act carelessly or recklessly.

**Participants may have limited, unsupervised time** during, before or after the start of an AMC program. This may include periods of free time, or periods of time alone while engaged in backcountry travel. **During both supervised and unsupervised activities, all participants share in the responsibility for their own safety and the safety of the group.**

**Other risks** that are generally associated with instructional, educational and/or adventure activities.

**These and other risks may result in participants falling, being struck, colliding with objects or people, experiencing vehicle or boat collision or capsizing, drowning, reacting to weather conditions or increased exertion, suffering gastro-intestinal complications or allergic reactions, becoming lost or disoriented, or experiencing other problems. These and other circumstances may cause hyperthermia, hypothermia, frostbite, dehydration, burns, heart or lung complications, broken bones, concussions, paralysis, mental or emotional trauma, or other injury, damage, death or loss.**

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I (participant and parent/s of a minor participant) agree:

- To accurately complete all required forms (which may include, but is not limited to the AMC application, registration and medical forms), abide by the terms of those documents, and obey all AMC rules, regulations and policies;
- If participant has any mental, physical or emotional conditions or limitations that might affect his/her ability to participate I agree to disclose those to AMC, and represent that participant is fully capable of participating without causing harm to him/herself or others;
- AMC is, and has been available, should I have further questions about these activities and the associated risks;
- AMC cannot assure participant's safety or eliminate any of these risks.

Participant is voluntarily participating with knowledge of the risks. Therefore, participant (and parent/s of minors) assume and accept full responsibility for the inherent and other risks (both known and unknown) of these activities, and for any injury, damage, death or other loss suffered by participant (and parent/s of minors), resulting from those risks and/or resulting from participant's negligence or other misconduct.

#### **RELEASE AND INDEMNITY AGREEMENT**

Please read carefully. This Release and Indemnity agreement contains a surrender of certain legal rights. I (adult participant, or parent/s for themselves and for and on behalf of their participating minor child) agree as follows:

- (1) to release and agree not to sue AMC, with respect to any and all claims, liabilities, suits or expenses (including attorneys' fees and costs) (hereafter collectively 'claim' or 'claim/s') for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities, or use of AMC equipment, facilities or premises. I understand I agree here to waive all claim/s I or my child may have against AMC, and agree that neither I, my child, or anyone acting on my or my child's behalf, will make a claim against AMC, as a result of any injury, damage, death or other loss suffered by me or my child;
- (2) to defend and indemnify ('indemnify' meaning protect by reimbursement or payment) AMC with respect to any and all claim/s brought by or on behalf of me, my child or a family member for any injury, damage, death or other loss in any way connected with my/my child's enrollment or participation in these activities or use of AMC equipment, facilities or premises.

This Release and Indemnity Agreement includes claim/s resulting from AMC's negligence (but not its gross negligence or intentional or reckless misconduct), and includes claim/s for personal injury or wrongful death (including claim/s related to emergency or medical response, assessment or treatment), property damage, breach of contract or any other claim.

#### **CONCLUSION**

I (participant and parent/s of a minor participant) agree that the substantive laws of Massachusetts govern this Document, any dispute I have with AMC and all other aspects of my relationship with AMC, and that any mediation, suit, or other proceeding must be filed or entered into only in Massachusetts.

AMC reserves the right to remove any participant from the program who staff or leaders believe, in their discretion, presents a safety concern or medical risk, is disruptive, or acts in any manner detrimental to the program. If participant is dismissed or departs for any reason, participant (and his/her family) are responsible for all costs of early departure whether for medical reasons, dismissal, personal emergencies or otherwise. These costs include, but are not limited to medical evacuation and costs, plane, train or taxi fare, accommodations, and costs and compensation for staff accompanying participant.

This Document is intended to be interpreted and enforced to the fullest extent allowed by law. Any portion of this Document deemed unlawful or unenforceable shall not affect the remaining provisions, and those remaining provisions shall continue in full force and effect.

**Participant and parent/s of a minor participant agree:** I have carefully read, understand and voluntarily sign this two-page Document and acknowledge that it shall be effective and binding upon me, my minor children and other family members, and my heirs, executors, representatives and estate. One or both parent/s must sign below for any participating minor (those under 18 years of age).

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print name here

2/23/10 RMT

## PHOTO RELEASE

Your consent is greatly appreciated as it allows photos taken during this program to be used by the AMC in the future, but it is not required. The Youth Opportunities Program is funded by grants in order to make our trainings and trips affordable. Photos of our activities help our fundraising efforts. We'd greatly appreciate your consent!

I hereby authorize the Appalachian Mountain Club (AMC) and/or parties designated by the AMC (including periodicals, other printed matter, or electronic media, and their editors) to use my photograph for sale to or reproduction in any medium the AMC or its designees see fit for the purposes of education, advertising, display, exhibition, or editorial use.

Print Participant's Name: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Date \_\_\_\_\_

**If applicant is under 18 a parent or guardian signature is required:**

Signature of parent/guardian \_\_\_\_\_

Date \_\_\_\_\_

☐ I do not want my photo/my child's photo to be used.



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## FIELD TRIPS

### Definition/Application of Policy

Any trip organized or conducted by an employee of the Lincoln Public Schools which takes students away from the Lincoln or Hanscom Schools campuses shall be considered a field trip. All field trips shall be governed by this policy.

Field trips should be educational in nature and shall be preceded and followed by appropriate learning experiences related to the trip.

Students on field trips are representatives of their schools and are expected to behave appropriately at all times including time beyond school hours. School rules and regulations apply to all field trips.

### Funding

School system funds, grants, gifts and proceeds from fundraising may be used to fund field trips. Additionally, parents may be requested to pay for additional costs for field trips, including admission fees, housing, food, etc. However, it is the policy of the School Committee that organizers of field trips ensure that no child is excluded because of such additional costs. If fundraising efforts are not sufficient and / or the school budget cannot subsidize the cost of those children who are unable to pay, then the trip will be automatically disapproved.

Should students be involved in fundraising, the amount of time to be devoted to fundraising should be reasonable and commensurate with students' obligations for homework and after-school activities. Group fundraising activities are preferred. Students should not be assigned individual fundraising targets.

## DAY FIELD TRIPS

### Approval

1. Permission to take a day field trip shall be secured from the Principal prior to making any arrangements or advertising for the trip. A field trip form must be filed with the Principal who will authorize the trip by signing the request form and returning it to the teacher(s). A copy of the field trip form will be filed with the Superintendent's office.
2. Vehicles of common carriers or the transportation contractor may be used. Additionally, drivers designated by the administration and covered by the appropriate insurance may be used to transport students on day trips.
3. All proposals for day field trips must include appropriate notification for the school nurse who will prepare a medical needs list for the supervising teacher. The school nurse will coordinate delegation of medication to a trained teacher.



4. Parental permission slips must be secured for all trips. Permission slips shall specify, at a minimum, date, time, location and method of transportation. A separate permission slip must be signed for each field trip. At the start of each year parents may sign a blanket field trip permission slip allowing their child to participate in walking field trips that are contained on campus, i.e., Hanscom Air Force Base.
5. All field trips must be adequately supervised by classroom teachers. Additionally, classroom assistants and parent volunteers may assist as chaperones. Volunteer chaperones must have CORI checks in accordance with M.G.L c.71 s38R.

#### LATE NIGHT AND OVERNIGHT FIELD TRIPS

Definition: Any student travel sponsored by the Lincoln Public Schools that is planned to occur between the hours of midnight and 6:00 a.m., or that will include an overnight stay away from a student's home.

The Lincoln Public Schools will sponsor late night or overnight field trips only when these trips relate to the curriculum or extra-curricular activities at the specific school. Trips that do not relate to the educational program will not be approved. The School Committee shall vote to approve all late night or overnight field trips upon the recommendation of the Superintendent. From time to time teachers organize overnight trips that take place during school vacations. Teachers may distribute information about these trips providing all materials indicate that the trip is not sponsored by the Lincoln Public Schools and has not been approved by the School Committee.

Teachers proposing to take students on a late night or overnight field trip are required to submit a written proposal to their Principal who will review and approve the request prior to submission to the Superintendent for recommendation to and approval by the School Committee. Advance approval is required.

Except in unusual circumstances, proposals must be submitted a minimum of three months prior to the approval date. Sufficient time should be allowed to finalize plans after approval has been granted.

#### Proposals for late night and overnight field trips

Proposal must address each of these items:

1. Grades/classes participating.
2. Educational or extra-curricular purpose of the trip. Overnight Trips should offer significant educational benefits to students that clearly justify the time and expense of the trip. Such trips should be appropriate for the grade level.
3. Connections to the curriculum including learning activities in preparation for the trip and follow-up after the trip.
4. Details concerning destinations and itinerary (include departure date and time and estimated return time).

5. Transportation plans that take into account the following considerations:
  - a) Whenever possible, the trip schedulers should avoid planning student travel between the hours of midnight and 6 a.m., due to the increased risk vehicular accidents during this time period.
  - b) Transportation, unless provided by the district's transportation contractor, must be procured using the guidelines and regulations of Chapter 30B, State Procurement Act. No perks for students or teachers will be allowed, except for those specifically identified by the vendor through the procurement process.
  - c) The use of vans or private automobiles for trips planned to include late night or overnight student travel should generally be avoided. Such trips should generally use commercial motor coaches.
  - d) Trips planned to include late night or overnight student travel should involve pre-trip checks of vendors.
  - e) School officials should ensure that the selected carrier is licensed for passenger transportation by the Federal Motor Carrier Safety Administration (FMCSA). The district should not contract with any carrier that has an FMCSA safety ratio of "conditional" or "unsatisfactory." FMCSA carrier ratings are available at <http://mtmc.army.mil/content/504/aprovedlist>.
  - f) The contract with the carrier should prohibit the use of a subcontractor unless sufficient notice is given to the district to allow verification of the subcontractor's qualifications.
6. Accommodation plans  
Overnight accommodations should be made in advance with student safety and security in mind. All accomodations must be procured using the guidelines and regulations of Chapter 30B, State Procurement Act. No perks for students or teachers will be allowed, except for those specifically identified by the vendor through the procurement process.
7. Proposed cost of the trip per student, a complete budget for the trip (including funding for chaperones etc. teacher stipends as negotiated in the LTA contract) and sources of funding.
8. Number of students and adults participating, including percentages of the class/group. If substantially all members of a class are participating in a trip, the school should provide appropriate substitute activities for any students not participating.
9. Information about chaperones
  - a) Students shall be accompanied by a sufficient number of chaperones, taking into account the trip scheduling and logistics. All chaperones, including parents and volunteers, must have CORI check in accordance with M.G.L. C71 §38R.
  - b) CORI checks are recommended but not required by law for bus drivers who do not regularly work for the school district and who will not have direct and unmonitored contact with students. If such checks cannot be done, a chaperone must always be present whenever students are on the bus.
10. Sample of information packet prepared for parents (including information about optional trip insurance).

11. Notification of the School Nurse who will prepare a medical needs list for the supervising teacher. The school nurse will coordinate delegation of medication to a trained teacher.
12. Copy of permission slip to be used for the trip. Permission slips must include language releasing teachers, administrators, School Committee members, the school district and the Town from liability relating to the cost of sending a student home for disciplinary reasons.
13. An agenda for a parent meeting to describe the trip and its purpose.
14. Provisions to ensure that all students are able to attend the trip if they so desire.
15. Proposal for overnight trips must be signed by the faculty member(s) proposing such trip.

A complete copy of the itinerary, and roster of participants must be on file at the Principal's office for the duration of the trip.

*Voted at June 3, 2004 School Committee Meeting*