



# Twinlow Day Camp

Summer 2011 TwinLake's Rathdrum, ID

**TWINLOW DAY CAMP** is a wonderful opportunity for children ages 5 to 12 during the summer months. Twinlow offers 12 consecutive weeks of fun, excitement, being outdoors, and educational opportunities for your child. Each week has a different theme and activates along with traditional camp activities.

**DAY CAMP** allows opportunities for children to experience the enjoyment and enrichment of summer camp without staying overnight. Day camp allows children to be outside in natural world... playing, exploring, and staying healthy. Working parents have the opportunity for supervised care in engaging environment during the summer months.

**EACH SESSION** will offer swimming, boating, crafts, games, bible stories, and various activities surrounding the special theme. Twinlow Camp provides a nutritious lunch and two snacks each day.

**DAY CAMP** allows for fun and individual growth in key areas of each child's life. We believe that camp enriches lives and changes the world by individual growth. Benefits and anticipated outcomes for your child are:



- **Social Skills development**
  - ❖ Leadership
  - ❖ Communication
  - ❖ Participation
- **Self Respect and character building**
  - ❖ Responsibility
  - ❖ Resourcefulness
  - ❖ Resilience
- **Spiritual growth**
  - ❖ Twinlow Camp is a christen camp
  - ❖ Moral competence
  - ❖ Ethical competence
- **Cognitive growth**
  - ❖ Learning to do things
  - ❖ Mastering physical skills
- **Emotional growth**
  - ❖ Independence
  - ❖ Interdependence
- **Community living/services skills**
  - ❖ Caring
  - ❖ Fairness
  - ❖ Citizenship
  - ❖ Trustworthiness

**June 13 - Sept 2, 2011**  
**12 One – Week Sessions**

**Monday – Friday**  
**9:00 am – 4:30pm Daily**

**Children 5 -12 yrs old**

**\$150 for the 1<sup>st</sup> week,**  
**\$100 each additional week**

*Trained Professional staff*  
*Weekly Themes*  
*Bible Story*  
*Nature Discovery*  
*Boating & Swimming*  
*Crafts, Games, Music*  
*Camp T-Shirts*  
*Lunch, Snack*  
*Daily Transportation*

## *About Twinlow Camp & Retreat Center*

### **Twinlow Camp Mission Statement**

**TWINLOW**, “a place apart for all seasons,” is a ministry of the United Methodist Church of the Pacific Northwest Conference. It exists to promote the mission of the church and encourage commitment to Christ through worship, education, recreation and community for children, youth and adults. Twinlow offers opportunities for communion with God’s creation to individuals and groups of diverse abilities, racial and cultural backgrounds.”

### **Twinlow Camp is one of the oldest Christian camps in the area.**

Twinlow Camp property was purchased by the Rev. Mark Freeman and a group of high school youth early in the 1920’s. It was purchased to minister to children and youth and to give families a place to get away, rest and rejuvenate. For several years, many denominations used Twinlow for their youth camps and retreats. Later in the mid-1900’s, many denominations purchased their own property to be used for camping. Today, Twinlow continues to serve many denominations and even though Twinlow hosts a variety of guest groups year round, its primary ministry remains to be children and youth focused.

### **Twinlow Camp is an American Camp Association Accredited Camp**

Being an American Camp Association (ACA) Accredited Camp means that Twinlow has achieved the highest of industry standards in the areas of administration, operations, program quality, health and safety of campers and staff. Only about 25% of camps are able to meet these standards. Twinlow is proud to be ACA accredited and takes this honor seriously and works hard at maintaining its accreditation.

### **Location of Twinlow Camp**

Twinlow Camp is located approximately 5 miles north of Rathdrum, Idaho, just off of Hwy. 41 on Lower Twin Lake. It is contained on 40 acres of forested woodland with lakefront property.

### **Civil Rights Statement**

“In accordance with Federal and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.

To file a complaint of discrimination, write USDA, Director, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.”

## *A Note from Twinlow Camp Staff*

Dear Camper,

We are very excited that you will be joining us at Twinlow Camp this summer.

We have been working hard to make every week of Day Camp fun, different and exciting! Each week will have a different theme and activities to go with that theme. However, some activities, such as swimming and crafts will happen every week. (Crafts will change each day, so if you are attending more than one week, you will not be doing the same craft over and over!)

Our days together will be very busy so we hope that you will come excited and willing to try all of the activities each day. Whether you have been to camp many times or this is your first camp experience, we will have a great time!

Our time together, playing and learning will be fun for everybody. We can't wait for camp to start. We are VERY excited to see friends from last year and to meet new ones!



See you soon!

With God's Love,

Twinlow Camp Staff



### **What to bring to Camp**

- ❖ Prescription Medications, if needed
- ❖ Backpack to store personal items
- ❖ Sweatshirt or light jacket for cooler days
- ❖ Modest swim wear and beach towel
- ❖ Additional large towel or small blanket for rest time
- ❖ Sunscreen
- ❖ Lip moisturizer (such as Chapstick or Blistex)
- ❖ Closed toe shoes (like tennis shoes)
- ❖ Set of dry & clean clothes



#### Optional:

- ❖ Sandals or other shoes to be used by waterfront
- ❖ Sunglasses, hat or sun-visor
- ❖ Book to read during rest time
- ❖ Small stuffed animal for rest time
- ❖ Money for camp store

**Please label all personal items.**

### **What NOT to bring to Camp**

- ❖ Anything that would hurt someone, such as a knife, weapon or fireworks
- ❖ Alcoholic beverages, tobacco products or non-prescription drugs
- ❖ Tape recorders, walkman, radio or other electronic devices
- ❖ Pets
- ❖ Personal sports equipment (unless needed for specific week)

Twinlow Camp will provide 2 snacks and lunch daily. Please do not send additional snacks. Food is not allowed in the cabins due to the "critters of the forest". Contact us if your child has any special dietary needs.

## Cost:

\$150 for the 1<sup>st</sup> week

\$100 for each additional week

\$25 discount if you bring a friend after the first week.

## Registration:

Space is limited. Registrations are accepted on a first come, first served basis.

Registration form must be **complete with signatures** and full Payment

Cancellations occurring 14 days prior to the start of camp will receive a refund minus a \$25 deposit fee.

If for any reason your child is unable to attend their scheduled camp, **please contact Twinlow Camp immediately!** Often there are children on a waiting list who may be able to attend.



## Bringing your child to Twinlow Camp

### Twinlow Camp can provide transportation

In order to assist parents, Twinlow will offer daily transportation to and from camp each day. The number of vehicles and pick-up sites may vary and will be determined as registrations arrive.

Twinlow is currently planning to have one vehicle that travels from the Coeur d'Alene — Rathdrum areas. Transportation from Spokane Valley will be coordinated on an "as needed" basis.

**If your child requires transportation, please contact Chris @ Twinlow Camp for scheduling at 208-687-1146.**

### If you transport your child:

- ❖ The speed limit within Twinlow Camp grounds is 10 MPH (10 MPH signs and Children at Play signs are clearly posted at entrances)
- ❖ Vehicles are permitted only in the parking/unloading areas
- ❖ Transportation of persons in vehicles not designed for passengers is prohibited. Transporting persons in back of pick-up trucks is prohibited.
- ❖ We have a great deal of traffic coming and going. Please be alert for people darting across roadways.
- ❖ There is no driving in cabin areas.

## *Your child's safety while at Twinlow*

*Twinlow* takes very seriously the safety and welfare of your child when they are in our care.

In order to help us, it is very important that the **Health & Registration Form and About Me Page** are complete with as much helpful information as possible.

*Twinlow Camp* asks

Due to safety issues, persons not registered at camp are not allowed on site during camp sessions. Once children settle into a routine, they usually do fine. If not, our Camp Nurse, the Day Camp Director or your child's small group leader will contact you. If there is a family emergency, the office will take a message and will notify the Day Camp Director.

### **Twinlow Camp will contact you if....**

- Absentee of registered camper
- Illness or injury to camper while at camp
- Out of Camp Provider medical attention needed
- If Bus or Transportation schedule changes

## *Health Care at Camp*

All *Twinlow* Site Staff are trained and certified in American Red Cross First Aid and CPR. *Twinlow* also provides a health care provider on site who operates through standing orders of a local licensed Physician.

This person will

- ❖ provide First Aid and/or health care as needed per Doctor's Standing Orders
- ❖ Screen physical condition of all campers
- ❖ Administer medications
- ❖ Notify Day Camp Director of any special medical or emotional situations necessary to insure that camper receives proper care
- ❖ Notify kitchen of any special diet requirements
- ❖ Keep all medications and supplies in locked cupboards
- ❖ Maintain all necessary medical records

## *Directions to Twinlow Camp*

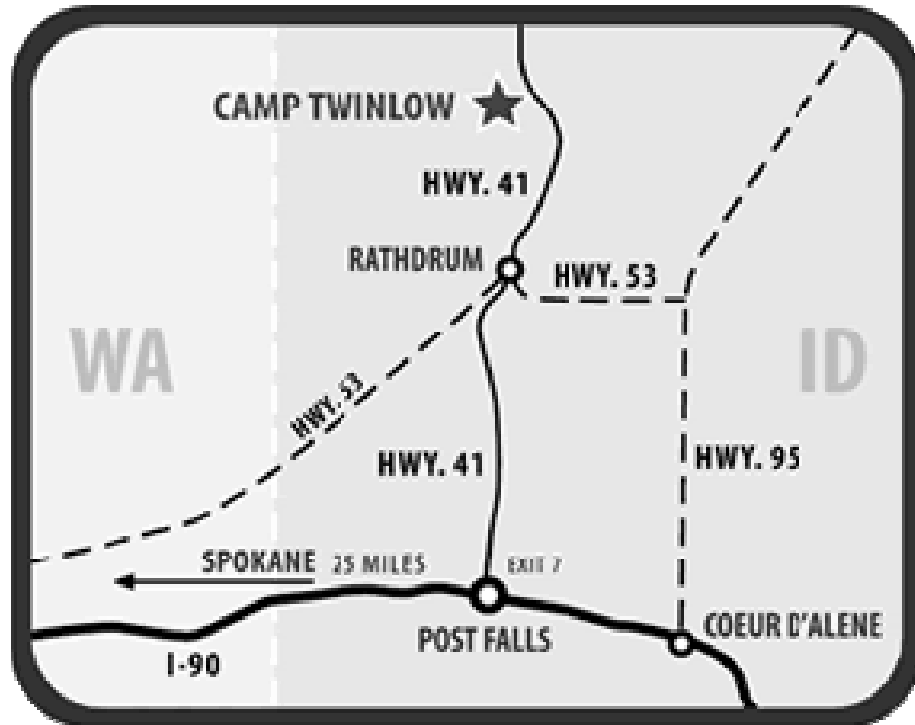
### **From Spokane:**

1. Take I-90 east to Post Falls, exit 7 (Rathdrum/Spirit Lake)
2. Go north on Hwy 41 into Rathdrum (highway curves to right as you enter the town). Continue to first stop light (in front of Lakeland High School)
3. Turn left (takes you over a railroad overpass). Proceed to second stop light.
4. Turn right. You are now back on Hwy 41 again.
5. Follow Hwy 41 just under 5 miles. You will pass Twin Lakes Village Golf Course/Condominiums on your left.
6. Watch for the Fire Station sign (a yellow diamond shape sign with a fire truck picture)
7. Turn left on Par 3 Golf Course Road (just beyond Lightening Bar parking lot)
8. Take an immediate right onto Twinlow Road. Follow Twinlow Road to the Twinlow Camp parking lot.

If taking Trent Ave. from the Spokane Valley, proceed east on Trent. Continue east through Rathdrum to stop light. Pick up directions at #5.

### **From Coeur d'Alene:**

1. Proceed north on Hwy 95 to Hwy 53 junction. Turn left onto Hwy. 53.
2. Follow Hwy 53 into Rathdrum to stop light (in front of Super One Grocery and Lakeland High School)
3. Turn right (takes you over a railroad overpass). Proceed to second stop light.
4. Turn right. You are now on Hwy 41 again.
5. Follow Hwy 41 just under 5 miles. You will pass Twin Lakes Village Golf Course/Condominiums on your left.
6. Watch for the Fire Station sign (a yellow diamond shape sign with a fire truck picture)
7. Turn left on Par 3 Golf Course Road (just beyond Lightening Bar parking lot)
8. Take an immediate right onto Twinlow Road. Follow Twinlow Road to the Twinlow Camp parking lot.



## **Twinlow Camp and Retreat Center**

22787 N. Twinlow Rd. - Rathdrum, ID 83858

Phone: (208) 687-1146 - [office@twinlowcamp.org](mailto:office@twinlowcamp.org)

[www.twinlowcamp.org](http://www.twinlowcamp.org)

# Day Camp Sessions

**Session #1 -- June 15-17**

## **Sports : All Ball Camp**

Learn to juggle, Play kick ball if there is a game with a ball we will play it.

## **Session #3 -- June 27-July 1 Watersports: Splash & Dash**

Dive in splash around paddle boat's, water relays, and slip 'n slide. Dash across the field with water balloons. It will be a blast of a week.

## **Session #4 -- July 4-8**

### **Explorer's**

Explore great fun jobs in the adult world. Take a tour of a police station, go see a fire truck meet the men & woman of a hospital. \*Thursday overnight option.

## **Session #6 -- July 18-22**

### **Furs & Feathers**

Discover your wild side! Join us for hands on animal activities and crafts, learn about Animals, and take a trip to Spokane's Exotic Animal Farm...Cat Tales. \*Thursday overnight option.

## **Session #8 -- August 1-5**

### **Roughen' It**

We're setting up camp! Put your survival skills to the test. Then squish through our swamp trek, help build a campfire, and play flash light tag after dark. \*Thursday night overnight option.

## **Session #11 -- August 22-26**

### **Water Sports: Little Dippers**

Let's get soaked! Swimming, boating, tubing--you name it. If it's in the water we are there! \*Thursday overnight option.

## **Session #2 -- June 20-24**

### **Quarter Cup**

Explore your culinary style at camp. Create fun, funky snacks and lunches, make your very own cookbook, and be part of our outdoor movie night ... homemade concession stand and all! \*Thursday overnight option.

## **Session #5 -- July 11-15**

### **VBS @ CUMC**

In cooperation with Community UMC's VBS program, we will gather at the church in the morning and then head over to camp in the afternoon for fun and games.

## **Session #7 -- July 25 - 29**

### **Silly Week**

We all are silly. This week will test how silly you can be :O)

Day 1: Breaking the Ice  
Day 2: Mis-Match day  
Day 3: Inside out  
Day 4 Bed head and PJ's  
Day 5 Outrageous outfits

## **Session #9 -- August 8-12**

### **Weird Science**

Plastic tubes, pots, bites, bugs, magic from the hand. Have fun with wacky & weird science.

## **Session #10 -- August 15-19**

### **Super Hero's**

Dress as your favorite Superhero, Then dress as your favorite villain. We will make, color paint and use duct tape to make our favorite super hero outfit \*Thursday overnight option.

## **Session #12 -- August 22-26**

### **Craft Builders**

Bring your creativity to life! Be a part of a puppet show, find your way through scavenger hunts, and show off your face painting skills. \*Thursday overnight option.

# Twinlow Summer Day Camp 2011 Participant Registration & Health History Form

**Camper Information**

Name \_\_\_\_\_ Birth date \_\_\_\_\_ Age \_\_\_\_\_

Preferred Name \_\_\_\_\_ Gender \_\_\_\_\_ Grade entering in fall \_\_\_\_\_

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

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

Telephone (home) (\_\_\_\_\_) \_\_\_\_\_ e-mail \_\_\_\_\_

Parent 1 Name \_\_\_\_\_ Parent 2 Name \_\_\_\_\_

Parent 1 Work \_\_\_\_\_ Parent 2 Work \_\_\_\_\_

Parent 1 Cell \_\_\_\_\_ Parent 2 Cell \_\_\_\_\_

Child lives with (circle one):      Parent 1      Parent 2      Both      Guardian

Emergency Contact \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

**T-shirt Size**

- Youth XS
- Youth S
- Youth M
- Youth L
- Youth XL
- Adult S
- Adult M

**Check the following sessions**

- \_\_\_ (1) June 13-17      \_\_\_ (8) Aug 1-5
- \_\_\_ (2) June 20-24      \_\_\_ (9) Aug 8-12
- \_\_\_ (3) June 27-July 1      \_\_\_ (10) Aug 15-19
- \_\_\_ (4) July 4-8      \_\_\_ (11) Aug 22-26
- \_\_\_ (5) July 11-15      \_\_\_ (12) Aug 29-Sept 2
- \_\_\_ (6) July 18-22      Daily Transportation Needed?  Yes  No
- \_\_\_ (7) July 25-29

Additional adults authorized to pick up my child:

\_\_\_\_\_

\_\_\_\_\_

Adults NOT authorized to pick up my child:

\_\_\_\_\_

**Payment Information**

First payment must accompany registration form to reserve a place in the chosen camp session.

Total Events Cost \$ \_\_\_\_\_ Charge \$ \_\_\_\_\_ to my MASTERCARD, VISA or DISCOVER Card (circle one)

Scholarship Donation \$ \_\_\_\_\_ Card # : \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp \_\_\_\_/\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_ Signature \_\_\_\_\_

Remainder Owing \$ \_\_\_\_\_ *If paying by credit card, full payment is required at time of registration.*

Camp.

Camp Scholarship Amount \$ \_\_\_\_\_ Scholarship Source Name \_\_\_\_\_

Scholarship Source Official \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Camper Name

**Insurance Information**

Insurance Carrier or Plan Name \_\_\_\_\_ Group # \_\_\_\_\_

\_\_\_\_\_

Name of Insured \_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_

Insurance ID or Policy # \_\_\_\_\_

**Current Health Conditions** Please describe any current health conditions requiring medications, treatment, or special restrictions or considerations while at camp.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Past Medical Conditions/Health History** Please describe past medical treatment, (i.e., surgeries, heart conditions, fainting, seizures, etc.) or other medical concerns.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Immunization Record**

Which of the following diseases has the participant had?

- Measles
- Chicken Pox
- German Measles
- Mumps
- Hepatitis A
- Hepatitis B
- Hepatitis C
- 

**Please give all dates of immunization for:**

Vaccine:	Dates:	Mo/Yr	Mo/Yr	Mo/Yr	Mo/Yr	Mo/Yr
Mo/Yr						
DTP		_____	_____	_____	_____	_____
TD (tetanus/diphtheria)		_____	_____	_____	_____	_____
Tetanus		_____	_____	_____	_____	_____
Polio		_____	_____	_____	_____	
MMR		_____	_____			
Haemophilus influenza B			_____	_____	_____	
Hepatitis A		_____	_____			
Hepatitis B		_____	_____			
Varicella (chicken pox)		_____	_____			

**Health History**

Camper Name \_\_\_\_\_

**Allergies** List all known allergies including those involving medication, food, insect, asthma, hay fever and other allergies. Please describe reaction and management.

ALLERGY

REACTION AND MANAGEMENT

_____	_____
_____	_____
_____	_____

**Medications** Please list ALL medications (including over-the-counter or non prescription drugs) taken routinely. Keep medications in the original packaging/bottle that identifies the prescribing physician (if a prescription drug), the name of the medication, the dosage, and the frequency of administration. Please be advised that all medications must be turned in to the Camp Health Care Provider prior to camper arrival.

NO Medications on a routine basis

Med #1 _____	Dosage _____	Specific times taken each day _____
Reason for taking: _____		
Med #2 _____	Dosage _____	Specific times taken each day _____
Reason for taking: _____		
Med #3 _____	Dosage _____	Specific times taken each day _____
Reason for taking: _____		

**Health Care Recommendations by Licensed Medical Personnel**

A physical exam and physician's signature is recommended, but not required, for camp attendance.

I examined this individual on \_\_\_\_\_.

In my opinion, the above applicant is \_\_\_\_\_ is not able to participate in an active camp program.

The applicant is under the care of a physician for the following conditions (include treatment to be continued at camp).

Comments

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Physician's Signature \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Date \_\_\_\_\_

# About My Camper

Please feel free to use additional paper, if needed.

**Dear Parents,**

For your camper to have a quality experience, please answer the following. Information is helpful as we minister to your camper. Thank you for allowing us to help your child experience God's love in the special camp community. Be aware this information is confidential.

Please check all of the terms that you feel apply to your camper's general personality and their interaction with friends and peers.

- |                                       |                                    |   |
|---------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Cautious     | <input type="checkbox"/> Ambitious | <input type="checkbox"/> Bossy              |
| <input type="checkbox"/> Energetic    | <input type="checkbox"/> Touchy    | <input type="checkbox"/> Sloppy             |
| <input type="checkbox"/> Quiet        | <input type="checkbox"/> Nervous   | <input type="checkbox"/> Excitable          |
| <input type="checkbox"/> Follower     | <input type="checkbox"/> Lazy      | <input type="checkbox"/> Even Tempered      |
| <input type="checkbox"/> Has a temper | <input type="checkbox"/> Loner     | <input type="checkbox"/> Highly competitive |

- |   |                                       |  |
|---|---------------------------------------|--|
| <input type="checkbox"/> Chatty         | <input type="checkbox"/> Outgoing     | <input type="checkbox"/> Responsible       |
| <input type="checkbox"/> Leader         | <input type="checkbox"/> Meticulous   | <input type="checkbox"/> Hide emotions     |
| <input type="checkbox"/> Shy            | <input type="checkbox"/> Moody        | <input type="checkbox"/> Whiny             |
| <input type="checkbox"/> Stubborn       | <input type="checkbox"/> Cooperative  | <input type="checkbox"/> Likeable          |
| <input type="checkbox"/> Sense of humor | <input type="checkbox"/> Intellectual | <input type="checkbox"/> Rowdy             |
| <input type="checkbox"/> Cries easily   | <input type="checkbox"/> Sensitive    | <input type="checkbox"/> Procrastinator    |
| <input type="checkbox"/> Territorial    | <input type="checkbox"/> "Nerdy"      | <input type="checkbox"/> Easily frustrated |

**Briefly describe:**

Has your camper been on, or just recently been taken off any behavior assisting drugs (ex. Ritalin, Prozac) that may affect, alter, or disturb their moods, attention span or behavior while at camp? Please explain.

Does your camper have any particular sensitivity or emotional issues? Have there been any recent deaths, divorces, separations, or traumas that your camper has had to adjust to, that may affect their behavior while at camp?

Has your camper had any serious pattern of behavior at school or another event in the past 3 years that could possible create problems while at camp?

**Camper's Covenant**

As a participant in the indicated camp, I, the undersigned, will cooperate with the leaders of the camp. I will involve myself with camp activities offered. I will not bring any type of weapons, or use any alcohol, tobacco, or drugs (except for prescribed medical purposes). I will act and speak in ways consistent with Christian values.

Camper's Signature:

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**Special Needs/Restrictions:**

Explain any restrictions to activity (e.g. what cannot be done, what adaptations or limitations are necessary) and provide any information that will enable us to create a healthy, helpful environment for the camper. Please include: recent injuries or illnesses, medical conditions requiring treatment, behavioral/learning challenges and suggested disciplines, emotional needs/concerns, hearing impairments, visual impairments, special routines. (Attach additional page, if necessary.) Include dietary restrictions other than allergies mentioned above.

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**Authorization/Permission:**

Is your child allowed to participate in swimming lessons when provided?  
 Yes  No

Is your child allowed to go tubing behind the motor boat?  
 Yes  No

Is your child allowed to participate in field trips during the day?  Yes  No

**Cost:**

\$150 per child for the 1st week  
\$100 for each additional week  
\$25 discount for bringing a friend after the first week

**Criteria for receiving scholarships/discounts:**

- Must register for multiple camp weeks with initial registrations in order to receive discount.
- Attending 1 or more weeks of residential camps (in addition to Day Camp) at Twinlow may be included in the total number of camp weeks so that the Day Camp discount may apply for that child.
- Children registered must be from one family unit only (does not include cousins, friends, etc.)

**Idaho Child Care Program:**

ICCP helps low income families pay for child care and is for parents who work or attend school.

- I am enrolling with ICCP for Twinlow Day Camp.
- I would like more information about enrolling with ICCP.

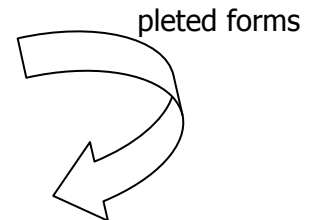
**Mailing Information**

*The above information must be filled in by the parent/guardian. The intent of this information is to provide camp health care personnel the background to provide appropriate care. KEEP A COPY OF THE COMPLETED FORM FOR YOUR RECORDS. Any changes to this form should be provided to camp health personnel upon participant's arrival in camp.*

Make checks payable to:  
Twinlow Camp

Scan and email or Mail with Payment:

Twinlow Camp  
22787 N. Twinlow Rd.  
Rathdrum, ID 83858  
office@twinlowcamp.org



**Parent/Guardian Authorization**

I, the undersigned parent/guardian, give permission for the above named camper to participate in the camp indicated above. I recognize and acknowledge that camping activity can involve certain hazards, including, but not limited to, illness, injury and accidents, and release Twinlow Camp and The United Methodist Church from liability. I either have appropriate insurance or, in its absence, agree to pay all the costs of medical services as may be incurred on my camper's behalf. I give permission for:

- Standard medical treatment according to Camp Physician Standing Orders.
- Emergency medical treatment in the case that I cannot be contacted
- Administering physician prescribed medications
- Release of information for insurance purposes
- Transportation for scheduled off-site events
- Photos used for publicity

The following health history is accurate and complete as far as I know.

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