

YMCA Camp High Harbour Services Office

200 Main Street, Suite 108

Gainesville, GA 30501

Phone: (770) 532-2267

Fax: (800) 954-5586

hhy.ymcaatlanta.org

CAMP OFFICE BUSINESS HOURS

Monday - Friday 8:45 a.m. - 5:00 p.m.

In case of an emergency during your camper s session, our voice mail will list a number that can be contacted 24 hours a day.

PRIOR TO CAMP

A. Health Form - **Must be signed** by a physician.

Hand deliver on opening day.

B. Parents Information Sheet

Hand deliver to camp on opening day.

C. Letter to my counselor

Hand deliver to camp on opening day.

CAMP FEES PAID

The balance of all Camp Fees must be received by the Camp Office by April 15 to avoid cancellation of your registration. Also, there is a mandatory monthly payment of camper fees.

HIGH STANDARDS

YMCA Camp High Harbour is fully accredited by the American Camping Association, a nationally recognized association.

Information For All Campers and Parents

ARRIVAL AT CAMP

Parents are encouraged to bring children to camp to meet the staff, tour the facilities, and get campers settled in the cabin. Parents are encouraged to pick up campers on the final day of the session. In the best interest of all concerned, we ask that you adhere to the check-in schedule. Any conflicts with opening and closing day schedules must be cleared through the camp office prior to your camper s arrival.

ARRIVAL TIME: Sunday 2:00-5:00 p.m. EST

DEPARTURE TIME: Saturday 10:00 a.m.-12:00 p.m. EST

CHA LA KEE Campers Only:

ARRIVAL: Sunday 2:00-4:00 p.m. CST

DEPARTURE: Saturday 10:00-11:00 a.m. CST

REFUNDS

Cancellations cannot be called into the camp office. We must have a hard copy via mail, e-mail or the fax machine.

Our refund policy is strictly enforced.

On or before April 15 :

Registration Fee: Non-refundable

Camper s Fee: 100% refundable

After April 15:

No refund

CAMP STORE

Several items may be purchased by the campers from the Camp Store. Each camper has a store charge account . **Campers do not need cash at camp. A small variety of healthy snacks will be sold in the camp store. Each camper will be issued a parent approved credit limit that must be paid upon departure.** Payment for the camp store is not accepted on opening day.

CAMPER S LAUNDRY

The camp provides a laundry service to campers who stay for **more than one week**. Laundry fees are included. All clothes must be labeled with camper s first and last names. A mesh laundry bag with camper s name is required. **Laundry in trash bags cannot be accepted.**

CABIN PICTURES

Cabin pictures will be taken weekly. Pictures must be ordered by parents on opening day of the camper s session. The picture is an **extra charge** and will be charged to your camper s camp store account.

OFF-SEASON PROGRAMS

In addition to offering one of the finest camping programs available, the camp also provides programs during the fall and spring months. Special contract programs can be designed to meet the needs of your group. The camp facilities are available for rent to churches, schools, YMCA groups and other organizations during the off-season. For more information about camp and its programs, please call (770) 532-2267.

VISITORS/TELEPHONE CALLS

Parents are encouraged to see camp only on opening and closing days. At camp, we strive for campers to develop independence, and an integral part of the maturing process is the extended experience away from home. In keeping with this, **WE HIGHLY DISCOURAGE PHONE CALLS TO CAMPERS UNLESS THERE IS A FAMILY EMERGENCY.**

TRANSPORTATION

Camp High Harbour does not furnish transportation for campers to camp at Lake Burton or Rabun Gap. For a nominal fee, transportation is available to campers attending Cha-La-Kee. Please call our camp office for more information.

DAILY INSPECTION

A large part of the camp experience is teaching campers the responsibility of caring for themselves and their surroundings. All campers are expected to participate in helping clean their cabins and bathrooms each day.

MAIN CAMP SCHEDULE/PROGRAM CLASSES

The daily schedule in Main Camp is a busy one:

| | |
|-----------------|-------------------------------------|
| 8:00 a.m. | Morning Exercise and Flag Raising |
| 8:15 a.m. | Breakfast |
| 9:30 a.m. | Cabin Inspection |
| 9:45 a.m. | Morning Assembly |
| 10:00 a.m. | First Skill |
| 11:00 a.m. | Second Skill |
| 12:05-1:00 p.m. | Free time, general swim, camp store |
| 1:15 p.m. | Lunch |
| 2:00 p.m. | Rest Hour |
| 3:00 p.m. | Third Skill |
| 4:00 p.m. | Fourth Skill |
| 5:00 p.m. | Free time, general swim, camp store |
| 6:15 p.m. | Dinner |
| 7:00 p.m. | Cabin Challenge |
| 8:00 p.m. | Night Program |
| 9:00 p.m. | Cabin devotions and prepare for bed |
| 10:00 p.m. | Lights Out |

Skill capacities are small in number for the benefit of each camper & staff member in order to insure safety. Skill offerings are as follows:

| | |
|--------------------|-------------------|
| Horseback Riding | Team Sports |
| Archery | Dance |
| Riflery/Gun Safety | Canoeing/Kayaking |
| Nature Study | Cheer leading |
| Arts & Crafts | Swimming |
| Drama | Water-skiing |
| Photography | Ropes Course |
| Tennis | Water games |

Please take a moment to go over these skill offerings with your camper prior to their arrival at camp to assist them in their decision making. Skills are chosen on opening night of each session. For more information, please visit our website.

HORSEBACK RIDING

Pathfinder campers sign up for riding classes when they sign up for other classes. **THERE IS NO ADVANCE SIGN-UP FOR RIDING CLASSES. Long pants and boots are recommended.**

SWIMMING PROGRAM

All campers are required to take a swim test every year. Non-swimmers are required to take beginning swimming lessons during one of their two afternoon instructional classes. Every effort is made to insure your child's safety around the waterfront and boating areas. All camp staff are trained in Emergency Water Safety, CPR and First Aid.

CLOTHING

We encourage you to send old clothing to camp as your camper will be camping out, participating in rugged sports and climbing and hiking through the woods. All items should be marked with a permanent laundry marker. We will make every attempt to return lost and found items while your camper is at camp. During and after each camp session, we try to return all labeled items. After September 1, all remaining items will be donated to a welfare agency. **YMCA Camp High Harbour will not be held responsible for any lost items, but will make every effort to return all labeled items.**

MEALS

Each site offers a dining hall where all meals are served. Campers sit with their cabin group. Meals are well-balanced, reviewed by a dietitian and served by our professional food service staff. Meals are served family style so campers may help themselves at the table.

SPECIAL DIETS AND OTHER NEEDS

Our Camp Dining Hall can serve a limited variety of special diets if your camper requires uncomplicated dietary needs. You must notify the camp office in writing 2 weeks prior to your campers arrival. Campers with special emotional or physical needs should be called to the attention of the Camp Director and Staff by fully describing any unique requirements of your camper on your Camper Information Sheet. Please call the Camp Office if you have questions regarding campers and their special needs.

ADVENTURE DAY

On Wednesday of each session, campers registered in the Pathfinder program are able to choose one of several trips to participate in on that day. Campers are transported via bus to several locations within close proximity to camp. Campers sign up for their trips on Tuesday during night program. *Campers will be charged an additional fee of \$15 to their store account.* Adventure Day concludes with a night of camping out under the stars with each camper's cabin group. Sunscreen and a sleeping bag are a must for all campers on Adventure Day and camp out. For more details, see Adventure Day page.

CAMP SCHOLARSHIPS

Financial assistance is available based on need. Please call the Camp Office for details about camp scholarships (770) 532-2267. We actively seek to involve those in need.

SENDING OR BRINGING FOOD TO CAMP

Bringing or sending food to camp is discouraged! Your campers are fed full, healthy meals three times each day. It is with this in mind that the Camp Director reserves the right to remove any food or candy from cabin if it becomes a problem. We will sell a small variety of healthy snacks in our camp store. Your cooperation with this matter is greatly appreciated.

WEEKEND CARRY-OVER CAMPERS

Campers who are registered for more than one session will remain at camp over the weekend. There is an additional \$37.00 fee which directly covers our cost for the weekend and is indicated on your campers invoice. The weekend programs are held at all locations.

DEVOTIONAL AND CHAPEL PROGRAMS

Each evening, campers end the day with a devotional/discussion appropriate for their particular age group. All devotions are based on Christian values.

INSURANCE/ILLNESS

Camp High Harbour does not carry Accident or Sickness Insurance on summer youth campers. It is the policy of Camp High Harbour and our medical staff not to keep sick campers for more than two days in our camp infirmary. Campers who miss more of the camp program should not be at camp; therefore, we ask that the parents care for the child at home and see the family doctor. We stock medicines to be dispensed by our Registered Nurse, under Doctor s orders, to campers who are ill for short periods of time. The cost of these medications and doctor s visits are the responsibility of the parents. A medical invoice will be mailed when applicable.

NOTE: The Health Form with copies of insurance and prescription cards must be completed and brought to camp on opening day of your camper s session.

Campers will not be allowed to stay at camp for more than 24 hours without a signed Health Form.

INFIRMARY: Should your camper reach a temperature over 101.5 degrees, be infirmed more then 24 hours, have excess vomiting, or need outside medical attention, parents will be notified by the camp medical staff or director.

DRESS CODE

In helping us foster a Christian atmosphere for our campers, we will be implementing a dress code for our campers and our staff. Please see our Things to Bring List for details.

CELL PHONES

Campers will be NOT be allowed to use cell phones while at camp. Please do not allow your camper to bring one to camp. Camp High Harbour will not be held responsible for lost or stolen phones.

LATE FEES

Campers who are picked up **after 12:30 p.m.** on closing Saturday will be fined accordingly:
after 1:00 p.m. - \$25 late charge
after 2:00 p.m. - \$50 late charge

WEEKLY THEMES

During each session of the summer, camp has a theme to add excitement and fun to your camper s week. On Friday, we end the week with a dance that is the highlight of each theme week.

| | |
|-----------|----------------------|
| Session 1 | 70 s/Disco Week |
| Session 2 | High Harbour Hoedown |
| Session 3 | Super Hero Week |
| Session 4 | Circus Carnival Week |
| Session 5 | Stars and Stripes |
| Session 6 | Christmas in July |
| Session 7 | Hawaiian Luau |
| Session 8 | GI Joe/Jane Week |
| Session 9 | 80 s Week |

REGISTRATION FOR NEXT SUMMER

Please visit our website after August 15 to get updated registration information for the upcoming summer. Our website, hhy.ymcaatlanta.org, is the only method of registration.

CAMPER MAIL

All camper mail must have a **cabin number** to insure proper distribution and addressed as follows: (UPS and FedEx deliver to these addresses.)

Lake Burton campers:

Camper Name
Cabin #
685 Camp Harbour Lane
Clayton, GA 30525

Cha-La-Kee campers:

Camper Name
Cabin #
High Harbour at Cha-La-Kee
4380 Cha-La-Kee Rd
Guntersville, AL 35976
CLK phone - (256) 582-4539 summer only

Rabun Gap campers:

Camper Name
Cabin #
High Harbour at Rabun Gap
339 Nacoochee Drive
Rabun Gap, GA 30568



YMCA CAMP HIGH HARBOUR

Parent s Information & Camper Letter (on back)



In order to be most helpful to your child in his/her adjustment to camp life, to better understand him/her, and direct his/her growth and development, we are asking for the following information:

**This information is shared with the camp staff and will be used intelligently
and in the best interest of your child.**

Camper s Name: _____ Nickname: _____

Age: _____ Date of Birth: _____ Names and Ages of Siblings: _____

School Interests: _____

Which term would best describe your camper s health?

Robust: _____ Normally Healthy: _____ Below Healthy _____

Any illness or physical condition that might affect participation in activities?

Has camper been away from home before? How long?

What major interests does your camper have?

What would you like your camper to get out of this camp experience?

What does camper want to get out of their time at camp?

What are your major cares or concerns about your camper s experience at camp?

Hand deliver to Camp on Opening Day of Session.

Any questions, please call the camp office at (770) 532-2267.

YMCA Camp High Harbour Camper Letter

Each camper is asked to write a note to his or her counselor before arriving at camp. By doing this, our staff can make the campers feel more comfortable by knowing more about each camper. Campers should be encouraged to complete this letter with some specific things they would like to do while at camp, and include special interests and past experiences. Thanks.

Dear Counselor,

YMCA Camp High Harbour Services

Campstore Merchandise...parent to parent

Dear Parent,

As a parent of two children myself, it is very important for me to help make the camp experience for you and your child the most exciting, yet hassle-free time for each of you. On opening day of your camper's session you will be asked to establish a credit limit for your camper. To better help you decide on that amount, we have listed some helpful hints below:

With Warm Regards,

Ken O Kelley, Executive Director

CAMPSTORE MERCHANDISE

| | | |
|--|----------------|------------------------|
| T-shirts -various designs | | |
| Short sleeve (100% Hanes Heavyweight) | \$15.00 | adults sizes only S-XL |
| Long sleeve (100% Hanes Heavyweight) | \$18.00 | |
| Sweatshirts - embroidered with High Harbour logo | | |
| Varied colors | \$25.00 | adult sizes S-XL |
| Hats - embroidered | | |
| Varied colors | \$12.00 | |
| Autograph Bears | \$ 8.00 | |
| Cameras | \$ 8.00 | |
| Flashlights | \$ 5.00 | |
| Hacky Sacs | \$ 3.50 | |
| Postcards | \$.50 | |
| Necklaces | \$ 3.00 | |
| Patches | \$ 3.00 | |
| Pens and pencils (variety) | \$ 1.00-\$3.00 | |
| Snacks (assortment) | \$.50- \$2.00 | |
| Stuffed Animals | \$ 5.00-\$8.00 | |
| Wishlet Bracelets | \$ 1.00 | |
| and a variety of other items | | |

KEEPSAKE PACKAGES

GOLD PACKAGE \$25

DVD with the Friday night movie from your camper's session and the movie from the other sites
Cabin Picture with memory piece Hey! Look What I Did At Camp card

SILVER PACKAGE \$15

Cabin Picture with memory piece Hey! Look What I Did At Camp card

ONLINE PICTURES

All candid pictures taken each session at camp will be available for your viewing and online ordering at hhy.ymcaatlanta.org.
Please note: Pictures are updated on Wednesday and Friday of each session.

CALCULATION EXAMPLE

| | | |
|----------------------------------|----------------|------------------------------|
| Amount Camper Can Spend in Store | \$40.00 | <i>(\$30-40 recommended)</i> |
| Adventure Day | \$12.00 | |
| Memory Package - Gold | <u>\$25.00</u> | |
| Total Credit Limit | \$77.00 | |

Please Note: You are only billed for the total amount charged by camper.

Reminder: A credit limit is established by parent on Opening Day. Actual charges are paid for on Closing Day. No payments for the store are accepted on Opening Day.



YMCA CAMP HIGH HARBOUR THINGS TO BRING LIST



Please **TAPE ONE COPY TO THE LID** of the suitcase or trunk and **RETAIN ONE COPY AT HOME.**

Parents: This is a suggested list only. Many campers choose to shower and change clothes before dinner and night program, thus the need for the higher numbers of items.

We make every effort to return lost items by displaying all lost and found daily at lunch and dinner. **PLEASE LABEL ALL ITEMS SENT TO CAMP.**

CLOTHING LIST

- ___ 10-14 Shirts or T-Shirts*
- ___ 7 pairs of Shorts
- ___ 2 pairs of Long Pants
- ___ 10-14 pairs of Underclothes
- ___ 10-14 pairs of Socks
- ___ 2 pairs of Sneakers
- ___ 1 Light Jacket
- ___ 1 Sweater or Sweatshirt
- ___ 2 Swimsuits
- ___ 4 Bath Towels
- ___ 1 Poncho or Raincoat
- ___ 2 Pairs of Pajamas

Dress Code: No halter tops, tube tops, spaghetti strap tops or string bikinis will be allowed. All sleeveless shirts must have shoulder straps at least 1 inch in width. The camp staff reserve the right to ask a camper to change any clothing deemed inappropriate.

BEDDING**

- ___ 1 Sleeping Bag (a must for campout)
- ___ 2-3 Sheets (a must; twin size - fitted or flat)
- ___ 2 Blankets
- ___ 1 Pillow
- ___ 1 Pillow Case

****Campers are expected to sleep on sheets and make bed while in camp****

Please Do Not Bring:

- Food or cash (change for drink machines is okay)
- Spray Cans: roll-ons and liquids are preferred
- Cell phones, Fireworks, Guns, Radios, CD players, iPods, MP3
- Valuables - Jewelry, etc.
- Knives, guns, etc.

Camp will not be held responsible for any of these items if brought to camp.

TRUNK SIZE recommendation:
15 inches or less in height.

OTHER ITEMS

- ___ Shower caddy or bucket for toiletries
- ___ Soap and Soap Dish
- ___ Shampoo
- ___ Wash Cloths
- ___ Toothbrush and Paste*
- ___ Comb/Brush
- ___ Flashlight with Batteries*
- ___ Bible
- ___ Writing Materials* and Stamps*
- ___ Laundry Bag (a must for carryover campers)
- ___ Sunscreen (a must)*

OPTIONAL EQUIPMENT

- ___ Handkerchiefs
- ___ Sun Glasses
- ___ Compass
- ___ Fishing Tackle
- ___ Camera and Film
- ___ Bug Repellent
- ___ Hat*
- ___ Canteen or Water Bottle
- ___ Costumes for Skits and Theme Week
- ___ Shoes or Boots for Horseback Riding

SPECIAL THINGS TO BRING FOR TRAILBLAZER CAMPERS

- ___ Hiking Boots or High Top Sneakers
- ___ Sleeping Bag (a must)
- ___ All other necessary equipment is supplied for campers.
- ___ Flashlight (highly recommended)

IMPORTANT FORMS TO BRING TO CAMP

- ___ 1 Health form (four sides of paper)
- ___ 1 Medication List
- ___ Copy of Insurance/Prescription Cards
- ___ Letter to my counselor with Parent Information Letter



YMCA Camp High Harbour Services
Health Form
2007

This form must be renewed annually.

This form is to be completely filled out by the parent/guardians. If the form is not completely filled out by the day of check-in, you will be asked to FAX the required information within 24 hours.

*Camper will need a physical within the last 24 months, this page needs to be completed by your child's physician.

Please fill out and **HAND DELIVER TO COUNSELOR** on opening day. Thank you!

I. GENERAL INFORMATION

Lake Burton _____ Cha-La-Kee _____ Rabun Gap _____

Session # : (Circle one) 1 2 3 4 5 6 7 8 9

(If you are registered for more than one session please make a **copy** of your campers health form and bring it to each session on opening day.)

Cabin : (Circle One) Sunshine 1 2 3 4 Bullpups 5 6 7 8
 Watersports Trailblazers LIT ALC STAFF

Last Name _____ **First Name** _____

Birth Date _____ **Age** _____ **Sex** _____ **SS #** _____

| |
|-----------------------------------|
| Father/Guardian Name _____ |
| Home Address _____ |
| City, State, Zip _____ |
| Home Phone () _____ |
| Business Phone () _____ |
| Cell Phone () _____ |

| |
|-----------------------------------|
| Mother/Guardian Name _____ |
| Home Address _____ |
| City, State, Zip _____ |
| Home Phone () _____ |
| Business Phone () _____ |
| Cell Phone () _____ |

Note: If you will be out of town, please include the name of the hotel and phone number where you may be reached.

Hotel _____ **Phone number**(_____)_____

II. EMERGENCY CONTACTS (ONE CONTACT MUST BE A RELATIVE)

| |
|-------------------------------|
| Name of Relative _____ |
| Home Address _____ |
| City, State, Zip _____ |
| Home Phone () _____ |
| Relationship to Camper _____ |

| |
|-------------------------------|
| Name of Relative _____ |
| Home Address _____ |
| City, State, Zip _____ |
| Home Phone () _____ |
| Relationship to Camper _____ |

III. HEALTH HISTORY

| | | | | |
|-----------------------------|-----|----|------------------------|--------|
| ADHD/ADD | Yes | No | | |
| Activity Modification | Yes | No | Dietary modification | Yes No |
| Allergic to bee strings | Yes | No | Ear infections | Yes No |
| Asthma | Yes | No | Heart problems | Yes No |
| Currently taking medication | Yes | No | Medication allergies | Yes No |
| Diabetic | Yes | No | Operation | Yes No |
| Dietary Allergies | Yes | No | Seizures | Yes No |
| Dehydration Disorder | Yes | No | Under Psychiatric Care | Yes No |

IF YES, PLEASE DESCRIBE: _____

DATE OF LAST TETANUS VACCINE: Month _____ Year _____

(THIS DATE MUST BE FILLED IN)

This shot is required by the school. We need to know the date of last vaccination. This shot will be administered in case of need. See page 3.

Last Name: _____
 First Name _____



YMCA Camp High Harbour Services Health Form

IV. PHYSICIAN INFORMATION

Please Note: A Copy of insurance card and prescription card must be attached to health form. See page 4

| | | |
|----------------------|-------|-------------------|
| Name of Physician | _____ | Phone (____)_____ |
| Name of Dentist | _____ | Phone (____)_____ |
| Name of Orthodontist | _____ | Phone (____)_____ |

Complete the following :

| | |
|------------------------|-------------|
| Name of Insurance Co. | _____ |
| Name of Policy Holder | _____ |
| Policy or Group Number | _____ |
| Address | _____ |
| Phone | (____)_____ |

V. EMERGENCY AUTHORIZATION

By signing this form I hereby give permission to the medical personnel selected by the Camp Director to order X-Ray, routine tests and treatment for my camper, and in the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Camp Director to hospitalize, secure proper treatment for, and to order injection and/or surgery for my camper as named above. I also give permission to the Camp nurse to administer over - the- counter medications and physician ordered medication in cases deemed necessary by the Camp Medical Staff and the Camp Director. I give permission to disclose all information to staff and all personnel that will be involve with the care of your camper. This health history is correct so far as I know, and the person herein has permission to engage in all prescribed camp activities except as noted.

EMERGENCY AUTHORIZATION _____

(PARENT OR LEGAL GUARDIAN ONLY)

WITNESS _____

DATE _____

I give permission for the following individuals to pick up my camper:

1. _____ 2. _____ 3. _____

Last Name:

First Name



YMCA Camp High Harbour Services Camper Health Form

A physician exam within **24 months of camp** attendance as evidenced by health exam form signed by a licensed physician is also needed in order for camper to remain for longer than a 24 hour period. A new health form must be resubmitted each year.

TO BE FILLED OUT BY A LICENSED PHYSICIAN

VI. PHYSICIAN INFORMATION

Licensed Physician's Name _____

Physician's Address _____

Physician's Phone (____) _____

Camper's Last Name _____ First Name _____

Lake Burton ____ Cha-La-Kee ____ Rabun Gap ____

Session #: (Circle one) 1 2 3 4 5 6 7 8 9 10

Cabin : (Circle One) Sunshine 1 2 3 4 5 6 7 8 Trailblazers
Watersports Bullpups LIT ALC STAFF

HEALTH INFORMATION

| | | | | | |
|------------------------|-----|----|-----------------------------|-----|----|
| ADHD/ADD | Yes | No | Activity Modification | Yes | No |
| Dietary modification | Yes | No | Allergic to bee strings | Yes | No |
| Ear infections | Yes | No | Asthma | Yes | No |
| Heart problems | Yes | No | Currently taking medication | Yes | No |
| Medication allergies | Yes | No | Diabetic | Yes | No |
| Operation | Yes | No | Dietary Allergies | Yes | No |
| Seizures | Yes | No | Dehydration Disorder | Yes | No |
| Under Psychiatric Care | Yes | No | | | |

IF YES, PLEASE DESCRIBE _____

The camper is under the care of a physician for the following conditions _____

Explanation of any reported loss of consciousness, convulsion, or concussion _____

Any treatment to be continued at camp _____

IMMUNIZATION HISTORY

| <u>VACCINATIONS</u> | <u>YEAR</u> | <u>BOOSTER</u> |
|---------------------------------|-------------|----------------|
| DP TETANUS (DPT) | _____ | _____ |
| POLIO | _____ | _____ |
| MMR | _____ | _____ |
| TB TEST (results, if available) | _____ | _____ |
| TETANUS | _____ | _____ |

I have examined the above camper within the last 24 months and in my professional opinion this camper is able to participate in all camp activities. with no restrictions
 with no restrictions the following restrictions _____

LICENSED PHYSICIAN'S

SIGNATURE _____ DATE _____

Last Name: _____
First Name _____



YMCA Camp High Harbour Services Health Form

CAMP HEALTH SCREEN CHECK LIST

VII. CAMP HEALTH SCREENING

Please complete this portion with the Counselor upon arrival to your child s cabin.

Note any symptoms that have occurred within the last 24 - 48 hours.

ALL Medication including over - the - counter medication must be checked - in at the Infirmary with the Registered Nurse. Thank you for your cooperation.

| <u>Symptom</u> | <u>Present</u> | <u>Absent</u> |
|-------------------------|----------------|---------------|
| Fever | _____ | _____ |
| Open wound | _____ | _____ |
| Bruises | _____ | _____ |
| Ear pain | _____ | _____ |
| Sore throat | _____ | _____ |
| Cough | _____ | _____ |
| Runny nose | _____ | _____ |
| Pink or red eye (s) | _____ | _____ |
| Burning while urinating | _____ | _____ |
| Lice | _____ | _____ |

Swimming Ability (Circle One) Non- swimmer Beginner Intermediate Advanced

Parent's Signature _____

Staff Signature _____

NOTE: Should your camper reach a temperature over 101.5 degrees, be infirmed more then 24 hours, have excess vomiting, or need outside medical attention, parents will be notified by the camp medical staff or director.

Please place front copy of insurance card here.

Please place front copy of prescription card here.

Please place back copy of insurance card here.

Please place back copy of prescription card here.

Last Name: _____
First Name _____



YMCA Camp High Harbour Services

MEDICATIONS



PLEASE NOTE: This form and ALL medications must be brought to the Infirmary on opening day. Please do not leave in the cabin or with a counselor.

- 1. ONLY BRING THE AMOUNT OF MEDICATION NEEDED DURING SESSION!**
- 2. Place this form in ziplock bag with packout medications. (Must have original container)**

Camper's Name _____

Site: LB - Lake Burton CLK - Cha La Kee RG - Rabun Gap

What session will your camper be attending: 1 2 3 4 5 6 7 8 9 10

Camper's cabin number: Sunshine 1 2 3 4 Bullpups 5 6 7 8 TB WS LIT ALC STAFF

Is your camper allergic to any medications: _____

Medication: _____

Condition requiring treatment: _____

Amount of medication to be given: _____

How often medication is to be given: _____ Q AM BID TID QID Q PM HS (nurse use only)

When do you prefer medication to be given:

BREAKFAST LUNCH DINNER BEDTIME

Medication: _____

Condition requiring treatment: _____

Amount of medication to be given: _____

How often medication is to be given: _____ Q AM BID TID QID Q PM HS (nurse use only)

When do you prefer medication to be given:

BREAKFAST LUNCH DINNER BEDTIME

Medication: _____

Condition requiring treatment: _____

Amount of medication to be given: _____

How often medication is to be given: _____ Q AM BID TID QID Q PM HS (nurse use only)

When do you prefer medication to be given:

BREAKFAST LUNCH DINNER BEDTIME

Medication: _____

Condition requiring treatment: _____

Amount of medication to be given: _____

How often medication is to be given: _____ Q AM BID TID QID Q PM HS (nurse use only)

When do you prefer medication to be given:

BREAKFAST LUNCH DINNER BEDTIME

I authorize the Camp High Harbour medical staff to administer the above medication.

Parent Signature: _____

HAND DELIVER TO NURSE ON OPENING DAY

HAND DELIVER TO NURSE ON OPENING DAY

HAND DELIVER TO NURSE ON OPENING DAY



YMCA Camp High Harbour Services
Medication Pack Out Instructions
2007



Camper Name: _____

Session # _____

Cabin # _____

ONLY FOR CAMPER S WHO NEED PRESCRIPTION MEDICATIONS DURING THEIR SESSION(S) AT CAMP.

All medication will be packed out according to the following instructions and diagrams.

Please HAND DELIVER the medications and necessary forms to the nurse at the infirmary on the opening day of your child s session at camp. Original prescription bottles should be present as well.

Materials needed:

- * Gallon size zip lock bags
- * Pillbox or boxes for your camper s medication (Medications are given at 4 times a day. If you child takes medication twice a day, you will need two pill boxes; 3x a day=3 pill boxes, etc.)
- * Labels for zip lock bag and each medication pill box, listing all medications as well as one on each pill box with the time of day to be taken.

Medication Pack Out: icaition is to be given .

- * Label each pill box with your campers name, the site your camper is attending, session, name of medication,time medication is to be given .
- * Place the required daily dose of medication(s) in the pill box by the meal time she takes them. (medications are given bfast, lunch, dinner, and bedtime) For example- if you child takes a breakfast medication- 1 pill will need to be placed in the Monday-Saturday slots of one pill box.
- * Please pack out only the doses your child will need while at camp. Please keep any additional doses in the original container in the the large zip lock bag.
- * Complete medication form on all medications for your camper.
- * It is not necessary to bring over the counter medications to camp . Please review our list of over the counter medication that we keep stocked in the infirmary. To eliminate the amount of meds the infirmary is responsible for, we will not accept medications from you that we keep in stock in the infirmary. Thank you for your understanding.
- * The Camp High Harbour Medical Staff would also like you to refrain from bringing to camp things such as vitamins, herbal supplements, and protein supplements, unless prescribed by your camper s physican.

In your gallon size ziplock please include the following:

- * All pillbox labeled with medications and campers name.
- * This form as well as the medication form.
- * Large label on outside of the bag that includes your camper s name, site, session, and cabin #.



Example Pill box:

Pill box #1: Breakfast Meds: John Doe cb.5
medication A
medication B



Pill box #2: Dinner Meds: John Doe cb.5
medication A

Outside Zip Lock Bag Label:

John Doe
Rabun Gap
Session 5
Cabin 6
Allergra D
Twice a day
Bfast, Dinner

Camper Name:

Parent Authorization /Date:

Rn, HH Medical Staff

Date

Directions to Lake Burton

YMCA Camp High Harbour at Lake Burton

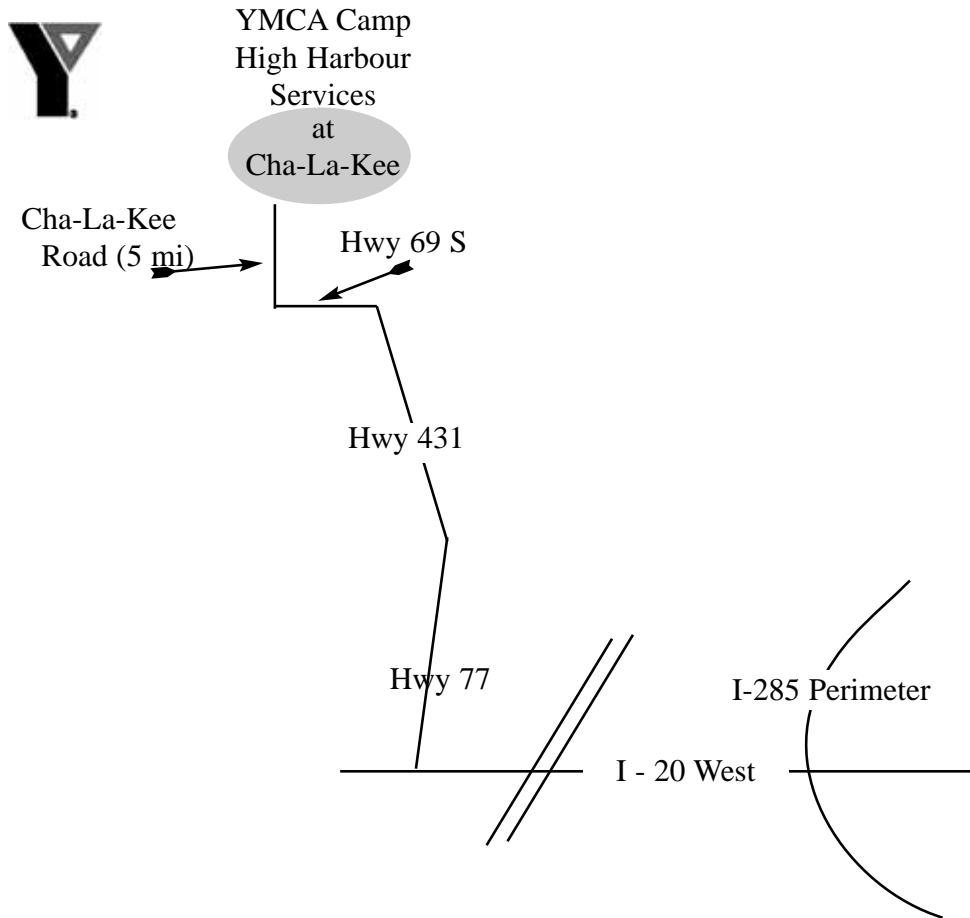
Directions From Hwy. 400

1. Take 400 to Long Branch Rd.
2. Long Branch Rd. to Hwy. 52/115
3. Right on Hwy. 52/115
4. Continue on Hwy. 115 to Clarkesville
5. Turn left in Clarkesville on Old 441
6. Turn left onto new four lane Hwy. 441
7. Take Hwy. 441 to Clayton
8. Turn left onto Hwy. 76W
9. Camp is 9 miles on the right.

Directions From 1-85 North

1. Take 1-85N to 1-985N towards Gainesville
2. I-985 to Hwy. 365, then Hwy. 441
(do not exit once on I-985, continue to Clayton)
3. From Clayton, turn left onto Hwy. 76W
4. Camp is 9 miles on the right.

YMCA Camp High Harbour Services Map to the Cha La Kee



Directions to Guntersville, AL YMCA Camp Cha-La-Kee

Head South on Interstate 85 into Atlanta, GA
Exit onto Interstate 20 West towards Birmingham, AL
Travel into Alabama on I-20 until you reach the HWY 77 Exit 168
Exit onto HWY 77 North
Travel on HWY 77 North towards Gadsden.
HWY 77 will dead end into HWY 431.
Take HWY 431 North into Guntersville, AL
In Guntersville, turn onto HWY 69 South.
On HWY 69 you will cross over a causeway and 1/4 mile after the causeway,
Turn right on Cha-La-Kee Road
Cha-La-Kee Road will run into YMCA Camp Cha-La-Kee after 5 miles

Total trip mileage is approximately 195 miles, one way.

Directions to Rabun Gap

YMCA Camp High Harbour at Rabun Gap

Directions From Hwy. 400

1. Take 400 to Long Branch Rd.
2. Long Branch Rd. to Hwy. 52/115
3. Right on Hwy. 52/115
4. Continue on Hwy. 115 to Clarkesville
5. Turn left in Clarkesville on Old 441
6. Turn left onto new four lane Hwy. 441
7. Take Hwy. 441 to Clayton
8. Continue north on Hwy. 441 to Rabun Gap
9. Rabun Gap Nacoochee School is on the left.

Directions From 1-85 North

1. Take 1-85N to 1-985N towards Gainesville
2. I-985 to Hwy. 365, then Hwy. 441
(do not exit once on I-985, continue through Clayton)
3. Continue north on Hwy. 441 to Rabun Gap
4. Rabun Gap Nacoochee School is on the left.



**YMCA CAMP HIGH HARBOUR SERVICES
PARENTS CHECKLIST**



This checklist is designed to help parents have everything in order before their camper arrives at camp on opening day. We suggest going over each item at least two weeks prior to the start of your camper's session. If you have any questions, please call the camp office at (770) 532-2267.

IMPORTANT DATES TO REMEMBER

- ___ All fees are due by April 15th.
- ___ Open House for new campers is held in April. Call office for more details.

IMPORTANT FORMS FOR CAMP

- ___ **1 Health Form (four sides of paper)** must be signed by a physician
a new health form must be completed each year
- ___ **Copies of insurance card and prescription card must be attached to health form**
- ___ **1 Medication List**
any medications must be checked in with nurse
- ___ **Letter to my counselor with Parent Information Letter**
- ___ **Directions to Camp** (included in this booklet)

ARRIVAL AND DEPARTURE PROCEDURES

- ___ Arrival time for all campers is Sunday from 2:00 pm. - 5:00 p.m.
- ___ Departure time for all campers is Saturday from 10:00 a.m. - 12:00 noon.
- ___ Boat arrivals or departures must be cleared through the camp office.
- ___ Campstore balances must be paid on closing day.
- ___ Any changes in the arrival or departure of a camper must be cleared through the camp office.

Please Note: Campers or parents are not allowed into cabins prior to the check-in time. Due to the ongoing preparation for camp and fairness to all, this time is strictly enforced. We also ask that you stay in your vehicles until checked-in by a staff member.

IMPORTANT INFORMATION

IMPORTANT PHONE NUMBERS

Gainesville Camp Services Office
(770) 532-2267 - phone
(770) 287-0852 - fax
1-800-954-5586 ESA - Fax on demand

Lake Burton
Office (706) 782-6311
Infirmary (706) 782-0966
Fax (706) 782-8407

Cha-La-Kee
Office (256) 582-4539 (summer only)
Fax (256) 582-4144

CAMPER MAIL

All camper mail must have a cabin number to insure proper distribution and addressed as follows: (UPS and FedEx deliver to these addresses)

Lake Burton campers:
Camper Name
Cabin #
High Harbour at **Lake Burton**
685 Camp Harbour Lane
Clayton, GA 30525

Cha-La-Kee campers:
Camper Name
Cabin #
High Harbour at **Cha-La-Kee**
4380 Cha-La-Kee Rd
Guntersville, AL 35976

Rabun Gap campers:
Camper Name
Cabin #
High Harbour at **Rabun Gap**
339 Nacoochee Drive
Rabun Gap, GA 30568

PACKAGES

Campers receive packages and mail each day during rest hour.

- Camp Pacs - 1-800-248-CAMP
www.camppacs.com
- The Wrinkled Egg - 828-696-3998
www.thewrinkledegg.com
- Bulldog Baskets - 706-549-1113
www.bulldogbaskets.com



YMCA Camp High Harbour Services Adventure Day



On **Wednesday** of each session, campers registered in the Pathfinder program are able to choose one of several trips to participate in on that day. Campers are transported via bus to several locations within close proximity to camp. Campers sign up for their trips on Monday during night program. *Campers will be charged an additional fee of \$15 to their store account.* Adventure Day concludes with a night of camping out under the stars with each camper s cabin group. Sunscreen and a sleeping bag are a must for all campers on Adventure Day and camp out.

Lake Burton/Rabun Gap Adventure Day trips:

Pathfinders can choose from:

- | | |
|--|---------|
| Alpine Amusement Park /Tubing | \$12.00 |
| * trip includes tubing down the Chattahoochee River and amusement rides at Alpine Amusement Park | |
| Alpine Crest Water Park | \$12.00 |
| * trip includes a day at Alpine Crest waterslides and mining for gems at Alpine Amusement Park | |
| Water Day | \$12.00 |
| * trip includes a day on Lake Burton skiing, bun-busting, kneeboarding and swimming | |
| Tallulah Gorge | \$12.00 |
| * trip includes hike into the Tallulah Gorge and visit to the Interpretive Nature Center | |

Cha La Kee Adventure Day trips:

Pathfinders can choose from:

- | | |
|---|---------|
| Space Camp | \$12.00 |
| * trip includes a day at the U.S. Space Camp in Huntsville, AL | |
| Spring Valley Water Park | \$12.00 |
| * trip includes a day enjoying waterslides and swimming at the park | |
| Water Day | \$12.00 |
| * trip includes traveling through the lock system of Guntersville dam and a day of skiing, bun-busting, kneeboarding and swimming | |

Please Note: All campers participating in **Trailblazers** and **Watersports** will have a special Adventure Day designed especially for their program. Campers in the LIT and ALC programs will also have an Adventure Day activity to further their development in the Advanced Leadership Academy.

