

CORE CAMP -2010

Dear CORE Camp Delegate,

Welcome to the CORE Camp! You are about to join a group of over 10,700 adults and student leaders who have experienced our program in the last 19 years. This letter confirms that you will be joining other leaders who are committed to enhancing their leadership skills and creating a productive team.

CORE Camp Locations & dates:

July 22-25, 2010

Sonoma State University

1801 E. Cotati Ave
Rohnert Park, CA 94928
(707) 664-2880

August 2- 5, 2010

Occidental College

1600 Campus Road
Los Angeles, CA 90041
(323) 259-2500

Norm Hull & Associates office-(951)-219-0893

Guidelines that make CORE Camp safe and successful:

Registration for CORE camp starts at **10:15am** and we will be starting camp at 11:00 am on day one. We will be serving lunch so no need to bring one of stop off before you get to camp.

Camp will end at 12:30 pm on the final day.

- Participants are expected to refrain from the use of non-medicinal drugs, alcohol and tobacco.
- Camp delegates are required to remain in their assigned room each night of camp.
- Anyone that violates the above guidelines or leaves the site will be sent home immediately.
- A letter will be sent to your principal and advisor if they are not in attendance.
- Your school will also not be allowed to attend the following year.
- All cell phones must stay in your dorm room or turned off when in sessions.

We recognize the commitment you have made to attend CORE camp during your summer vacation and want to insure that the effort is not wasted while you are at camp.

Please come prepared to make the most of this opportunity. Due to the fact that this is a leadership camp, you can expect to have very little recreation time so please rest up before you attend. At CORE camp we allow no spectators and the expectation is that you will be actively engaged- that is what leaders do.

As a result of your participation you will create a productive team from the delegation that your school sends and also return with new and enhanced leadership skills that can be used now and later in life.

What to bring:

Toiletries	Pens/Pencils- writing tools	CD's for dance- labeled
Alarm Clock	Appropriate clothing	Yearbook/ school newspaper
Spending money	A hat because of the sun	Self addressed envelope

Your Accommodations: You will be assigned to a dorm room with another delegate (same gender) who in most instances will have a similar position. It is one of our methods of expanding your network and helping you create a resource to utilize during the school year. Each dorm room has two single beds and will share a bathroom with another dorm room.

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School Transportation Form

School Name: _____ # of people _____

If entire delegation is traveling together, you only need to fill out one card for your school.

Please check appropriate selections for your camp selection.

Camp Attending: ___ **Sonoma (July 22-25)** ___ **Occidental (August 2-5)**

Will Arrive-

Thursday- July 22

Monday- August 2

___ School Bus/Van

___ Greyhound Bus

___ Amtrak

_____ Airport

_____ Airline _____ # Flight

Will Depart

Sunday- July 25

Thursday-August 5

___ School Bus/Van

___ Greyhound Bus

___ Amtrak

_____ Airport

_____ Airline _____ # Flight

A transportation fee of \$30.00 roundtrip per person must be sent with the enclosed transportation card if you need to be picked up and returned to any of the above locations. If you arrive by private vehicle, a daily permit will be required. Delegates will be required to turn in their car keys at registration and will receive them at the close of camp.

This form needs to be received in our office by July 10th if you will need assistance for pick up / drop off from an airport for CORE Camp

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2010 Delegate Questionnaire

Please answer the questions in detail, the more information we have the better we will be able to meet your needs. Your consultant will be reviewing the information you share on this form and adapting the curriculum to address Your needs and concerns.

* What are the two biggest events your council is responsible for during the year?

- 1.
- 2.

What are the two goals you hope to achieve as part of your student council?

Share the challenges that might impact the success of your group in the upcoming school year?

What was the biggest success your program had this year and was it an existing program that happens annually?

What would you personally like to get from this camp?

How will you know when you have received what you listed?

What are the issues that you believe may be impacting the success of your group?

What else should we know that would enable us to work well with your group?

I, _____, of _____ School, understand and accept what is expected of me at CORE Camp.

Please return this form with your application by July 1st, 2010

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CORE CAMP Participation Agreement (PLEASE PRINT OR TYPE CLEARLY)

CAMP ATTENDING _____ Sonoma, July 22-25 _____ August 2-5, Occidental College School _____

Participant Name:	Gender:	Age:
Address:	Phone:	
City, Province/State, Postal Code/Zip:	Email:	
Name of High School presently enrolled		
Position 2010-2011:		
Attended Core Camp before _____ Yes _____ No Years _____ T-Shirt size _____ S _____ M _____ L _____ XL _____ XXL		
Medical History/Conditions		
Known Allergies:		
Known Food Allergies:		
Physical Limitations / Special Needs / Medications:		
Medical Insurance Information:		

Parent/Legal Guardian Name:	
Address:	Work Phone: Home Phone
City, Province/State, Postal Code/Zip:	Email:
Relationship to Participant:	Cell:

In Case of Emergency Contacts: (Provide Name, Relationship to Participant, Phone and Cell Phone. If necessary, calls will be placed in order beginning with 1.)		
1.	Relationship:	Home: Cell:
2.	Relationship:	Home: Cell:

Parental Consent Form/Responsibility Clause

I hereby give permission for _____ to participate in the CORE CAMP Summer Leadership Program 2010

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School _____ Student Name _____

CORE CAMP Medical Release

I acknowledge that CORE Camp activities, including, but not limited to, walking, ROPES course (when applicable), structured team activities may be subject to certain hazards; and further that I and the youth who is voluntarily participating in the camp and these activities understand the risks involved.

I understand that Norm Hull & Associates, Rick Minniefield & Associates, its officers, directors, agents and employees shall not be nor later become, liable or responsible in any way in conjunction with the services they provide, or for any death, injury, damage, delay or irregularity which may occur to the participant while participating in CORE Camp sponsored event, unless caused by the gross negligence or willful misconduct of CORE Camp. We hereby irrevocably grant to the Norm Hull & Associates, Rick Minniefield & Associates, its agents, licensees and assigns, the right to use in any and all media and in any and all forms this applicants name, likeness, photographic prints and any reproduction of their sounds, performance or appearance while participating in CORE Camp Program, for any purpose including promotion, advertising or otherwise. With the use of the rights, we hereby release the Norm Hull & Associates, Rick Minniefield & Associates and its agents, licensees and assigns from all claims, liabilities and/or damages which now or in the future may arise from such use.

The youth participant may be removed from CORE Camp for, among other reasons, (a) having provided incorrect or false information regarding any portion of your application or at any time during the application process; (b) failure to participate in any portion of the camp; (c) use or possession of illegal substances; (d) illegal use or possession of alcohol; (e) acts of violence or vandalism; (f) failure to disclose, or disclosure of inaccurate, medical information; (g) drunk or disorderly conduct or (h) failure to comply with any rules or regulations imposed by the CORE CAMP Organizer,, its officers, directors, agents and employees, including, but not limited to, all terms and conditions of this Agreement.

I acknowledge that if the youth participant is removed from CORE Camp, Norm Hull and/or Rick Minniefield or designate reserves the right to determine the date and time of there return flight. Furthermore, I will be responsible for any expenses incurred as a result of acts committed by the youth participant, which necessitates their removal from the camp.

Also, in case of emergency, I hereby give my consent for a qualified physician to perform any medical or surgical procedures s/he deems necessary to the welfare of this applicant while in the care of CORE Camp, Norm Hull & Associates, Rick Minniefield & Associates or such physician. It is understood that the CORE Camp Staff and medical personnel will make every attempt to contact parents, guardians, relatives listed above prior to taking any such actions. Further, this authorization permits said physician to hospitalize, secure appropriate consultation, order injections, anesthesia (local, general or both) or surgery for this applicant if such emergency conditions warrant. The undersigned does hereby assume and agree to pay any and all indebtedness or physician's or surgeon's fees and hospital charges for such service.

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Signature (Parent or Legal Guardian)

Date

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CORE CAMP DELEGATE LIST-MASTER FORM

To: Registrar

Re: 2010 CORE camp delegate list ____ Sonoma (North) ____ Occidental (South)

FAX to: 866-927-7234

PRINT CLEARLY SO WE CAN READ YOUR WRITING- THANK YOU

The following people will be attending from _____ School

Advisor: _____	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> ASB <input type="checkbox"/> Class <input type="checkbox"/> Other
<input type="checkbox"/> Previously attended		Email: _____
<input type="checkbox"/>		T-Shirt S__ M__ L__ XL__ XXL__
Advisor: _____	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> ASB <input type="checkbox"/> Class <input type="checkbox"/> Other
<input type="checkbox"/> Previously attended		Email: _____
<input type="checkbox"/>		T-Shirt S__ M__ L__ XL__ XXL__
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__
<input type="checkbox"/>		
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__
Student: _____	<input type="checkbox"/> F <input type="checkbox"/> M	Position: _____
<input type="checkbox"/> Previously attended	Email: _____	T-Shirt S__ M__ L__ XL__ XXL__

*** All communication will be done by email after we receive your information. Please have access to a friend to receive the information if you do not currently have an email address.**

Please mail this form -applications may be sent later.

Page ____