



June 22-25

9 AM - 4 PM

Days 1-3 Community Building Day 4 Ki-Ho-Ta Center

Ages 8 –18 years

Open to all youth

Registration NOW open!

Registration packets available at:

Ki-Ho-Ta Center • Robert Whitebird Cultural Center • Main Office • Quapaw Nation Website

For more information or to VOLUNTEER :

Quapaw Nation Youth Programs

918-238-3152 bburtrum@quapawnation.com

WELCOME TO SUMMER CAMP!

Dear Families and Youth,

We are excited to host this fun filled week of activities! This week will bring together youth of varying ages, abilities, and backgrounds to participate in engaging cultural activities. Here at Quapaw Nation Youth Programs we believe that culture is prevention, that by learning, engaging, and participating in one's culture youth can build a sense of belonging as well as a supportive community network to support healthy life choices that will enable them achieve their amazing dreams!

A few notes before the fun begins:

- Camp will begin promptly at 9 am each morning and dismiss at 4pm each evening.
- Transportation is available on a **first come first serve basis** as seats on the bus are limited. If your child will need transportation, please contact the Youth Programs office at 918-238-3152 or bburtrum@quapawnation.com to make arrangements.
- We will be participating in a variety of activities both in and out of doors, please wear closed toe shoes and dress appropriately for the weather. Some activities will involve water play, youth may wish to bring extra clothes and/or a towel as well as sunscreen and bug spray.
- No "screens" during camp hours. Staff and volunteers will take no responsibility for lost, damaged or stolen electronic devices brought to camp.
- A schedule of activities will be posted on the Quapaw Nation Youth Programs Facebook page as well as emailed to all parents prior to the first day of camp.

We are so excited to see you!

Quapaw Nation Youth Programs Staff & Volunteers

Quapaw Nation Youth Programs Permission Forms

Permission is granted for:

(Name of Youth) PLEASE PRINT

To participate in Quapaw Nation Youth Program Summer Camp and to be transported by bus or van during the week of June 22-25, 2021. Summer Camp will begin at 9am and end at 4pm each day, I understand it is my responsibility to ensure transportation arrangements are made for my child. I also give permission for my child's photograph to be taken during this camp and utilized in reporting and media activities.

PARENT/GUARDIAN INFORMATION:

Parent/Guardian Name:

Address:

Parent Email:

Phone #:

Emergency Phone #:

Youth's Date of Birth:

Allergies (including food):

Conditions requiring special consideration (medical/physical):

Does your student require: (A) **Epipen** Yes No (B) **Inhaler** Yes No (C) **ANY MEDICATION CURRENTLY TAKEN:** (Type of medication and time of administration):

Please speak with staff prior to leaving your child at camp regarding any medications or specials needs your child may have. THIS INFORMATION WILL REMAIN CONFIDENTIAL.

Primary contact name

Relationship to student:

Phone #:

Work Phone #:

Cell Phone/Pager #:

Secondary contact name

Relationship to student:

Phone #:

Work Phone #:

Cell Phone/Pager #:

Student's Physician:

Phone #:

Student's Dentist:

Phone #:

Medical Release: I hereby authorize the release of my child's pertinent medical information to the appropriate professional staff. I give permission for emergency transportation as required for medical emergencies. I give permission to the physician or hospital to secure treatment for him/her and to order medications, injection, anesthesia, or surgery for my child, as named above, in case of emergency. The signature below constitutes authorization to perform any necessary treatment for my child during this camp.

HEALTH INSURANCE INFORMATION:

Company Name:

Policy #:

Group #:

Release of Liability: I hereby agree to be responsible for the conduct and actions of my child and to release Quapaw Nation from any claims or demands that may occur during participation in Quapaw Nation Youth Program Summer Camp held on Quapaw Nation property June 22-25, 2021. Furthermore, I agree to release the Quapaw Nation and the employees and volunteers and will hold them harmless from any liability which may arise from incidents or accidents involving my child and myself while on Quapaw Nation premises, to the extent allowed by the law. This release form is valid from June 22-25, 2021.

Parent/Guardian Name:

Date:

(PLEASE PRINT)

Parent/Guardian Signature: