

Summer Camp Packing List

Clothing

- Casual Clothing for the outdoors
- Shorts (mid-thigh is minimum length)
- Shirts (not tank tops, spaghetti straps, bare mid-ribs, or open backs)
- Jeans or long pants for trail rides
- Socks, underwear etc.
- Swimsuit (Females: No mid-rib showing, Males: No Speedo's)
- Warm jacket or sweatshirts
- Light rain jacket or poncho
- 2 pairs of shoes (athletic)
- Flip Flops or Sandals
- Water shoes etc, for river tubing

***We reserve the right to have a camper change their clothing if it is deemed to be immodest or offensive.**

Sleeping

- Sleeping bag and pillow
(Campers sleep in bunk beds)

Personal Items

- Toothbrush & toothpaste
- Bath towel & washcloth
- Soap / Shampoo
- Hairbrush
- Insect repellent / Sunscreen
- Deodorant

Other

- Backpack/Daypack
- Beach towel
- Bible/Notebook/Pen
- Water bottle
- Dirty clothes bag

Optional

- Camera
- Flashlight
- Stamps & pre-addressed envelopes
- Spending money for the camp store

...cont.

Leave at Home

Cell phones, video players, radios, iPods, electronic games, pets, fireworks, or food of any kind unless part of a special diet. Weapons of any kind (including pocket knives), alcohol, tobacco products and drugs are also prohibited.

Note: Because our desire is to provide a safe environment for every camper who visits the Ranch, we reserve the right to search the luggage and/or belongings of individual campers.

Make sure you fill out and send in the following

- Health Form
- Liability Form
- Horse Survey (only if in the horsemanship program)
- Release Form (if needed)

Questions

~ Please don't hesitate to contact us with any questions that you may have. We want you to be fully prepared for and at ease about your camp experience with us.

Cran-Hill Ranch
14444 17 Mile Rd
Rodney, MI 49342
231-796-7669
231-796-4550 FX
Info@cranhillranch.com
www.cranhillranch.com

CRAN-HILL RANCH SUMMER CAMP INFORMATION



SUMMERS COMING! GET READY TO GO!!

Registration

~ Please see your individual Camper Statement for specific arrival and departure information. Please do not arrive early as we will not be ready to serve you well.

~ A Release Form must be submitted to Cran-Hill Ranch on or before Registration Day if:

- Someone other than the camper's parent/guardian will be picking them up.
- The camper will be leaving earlier than the scheduled end of camp.

Outstanding Balances

~ If you have an outstanding balance, it must be paid 30 days prior to your camper's week of camp. To pay via credit card call (231) 796-7669.

Medications

~ Medications must be turned in to the Health Officer upon arrival. All medications (prescription and non-prescription) must be in their original containers or we will not be able to accept or dispense them to the camper. This is a state regulation.

~ The Camp Health Office is stocked with basic over-the-counter medications; therefore, you will not need to bring them.

~ A Health Form is enclosed. Please fill it out and return at least 1 month prior to your week of camp. You may notify the Health Officer at the time of registration if there have been any changes in health conditions or medications.

Communication with Campers

Mail

~ Please allow 2 days for mail delivery.
~ Please address envelopes to your camper this way:

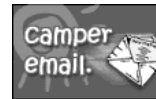
Camper Name (Cabin Name)
c/o Cran-Hill Ranch
14444 17 Mile Road
Rodney, MI 49342

~ During registration we will have mailboxes available for each day of the week. Camper mail may be dropped off then, saving postage.
~ The last mail delivery for the week will be Thursday evening.

Email

Campers cannot reply, but to send an email:

1. Go to our website at www.cranhillranch.com
2. Click the "Camper Email" button
3. Follow the "Send Camper Email" link
4. Click the "Register Now" button (or use your login information from 2008)
5. Enter your Pre-Approved Registration Code:
9CHR9577
6. Fill out all the required information
7. Purchase Bunk Note credits (you will need a credit card)
8. Send an email to your camper!



Returning Parents: If you had an account at this camp last summer, you can continue to use your old username and password. The first time you visit the site you will be prompted to update your contact information and re-activate your account.

Phone

~ We do not allow phone calls while at camp. If you do need to contact a camper for emergencies, please call the Main Office. Campers may only call home if there is an emergency and only under the supervision of Ranch staff.

Accommodations

~ Saddle Ridge Cabins - Each cabin has 2 counselors and up to 16 campers. Cabins are modern with concrete floors. Each cabin has bunk beds and restroom and shower facilities private to that cabin.

~ Pine Slope - Each cabin has 1 counselor and up to 5 campers. Cabins are rustic with wooden floors. Cabins have bunk beds. Restroom and shower facilities are a short walk outside the cabin and are shared with other cabins.

~ Retreat Center - Each cabin has 1 counselor and up to 7 campers. Cabins are modern with carpeted floors. Cabins have bunk beds. Restroom and shower facilities are within the building and shared with other cabins.

*New Option

Camp Store Credit

~ So that camper's do not have to carry cash, we will begin taking camp store credit. Parents can send camp store money ahead of time or at registration. Any money left at the end of the week can be picked up at the store. Any money not picked up will be considered a donation to the **Camper Scholarship Fund**.

CRAN - HILL RANCH MEDICAL INFORMATION FORM

Please provide complete and accurate information. This information is gathered to assist us in identifying appropriate care. Any changes should be given to the camp health personnel upon participant's arrival at camp. This information is kept confidential.

CAMPER LAST NAME: _____

Complete in Ink

CAMP DATES: _____

Camper Full Name: _____ **Gender:** M F **Date of Birth:** ____/____/____
Parent / Guardian Name: _____ **Home#:** (____) _____ **Work#:** (____) _____
Address: _____ **City:** _____ **State:** _____ **Zip:** _____
If not available in emergency, notify: _____ **Home#:** (____) _____ **Work#:** (____) _____

Insurance Information: None

Insurance Carrier or Plan Name: _____ **Phone:** (____) _____

Group / ID Number: _____

Physician Name: _____ **Phone:** (____) _____

Immunization History: Please provide the month and year for each immunization. (e.g. 5/06)

Tetanus booster _____ Hepatitis B _____ Polio _____ MMR _____ Homophiles Influenza b (HIB) _____

Check if these apply to this camper. If necessary, attach an additional page to describe health history in detail

Allergies:

- No known drug allergy (NKDA)
- Aspirin Penicillin
- Ibuprofen Acetaminophen
- Bee/Wasp Peanuts (any kind)
- List other allergies

Food Allergies (List/Describe)

Conditions:

- This individual has no chronic health concerns
- Diabetes Asthma
- ADD or ADHD Seizures
- Bed-wetting Back or Neck Injury
- Pregnancy Fainting spells or convulsions
- Nervous Disorder Kidney Related Disease
- Shortness of Breath Any Orthopedic Problems
- Cardiac or Pulmonary Condition or Disease
- High or Low Blood Pressure

- Other conditions/Special health needs/Physical limitations: _____
- Behavior Concerns (e.g. sleepwalking, night terrors, etc.): _____
- List recent operations or injuries (include dates): _____
- Recent exposure to contagious/infectious diseases: _____
- Any Activity Restrictions: _____

Current Medications:

Medications **must** be in original prescription container identifying: prescribing physician, medication name, dosage, time of administration.

- This camper takes NO medication on a routine basis
- This camper takes the following medications:

Medication	Reason for taking

Medication	Reason for taking

Non-Prescription Medications: The following are medications that are stocked in Cran-Hill's Health Center.

Check all Non-prescription medications we are permitted to administer:

- Acetaminophen
- Cough suppressant
- Dephenhydromine HCL (Benadryl)
- Antihistamine
- Ibuprofen
- Antacid
- Epinepherin (Epi-pen)
- Loperamide (Imodium)
- Antibiotic Ointment
- Hydrocortisone Cream
- Calamine Lotion
- Topical Analgesic

Important – Parent / Guardian signature is required in order for the camper to attend camp.

Photo Release & Follow Up: By signature below, I certify that photographs or videotape pictures of my child participating in Cran-Hill programs may be reproduced and utilized by Cran-Hill in promotional materials. I certify that for purposes of following up on my child's camp experience, Cran-Hill may release my child's name to a church or other youth organization.

Off Camp Release: The previously named camper has my permission to be transported for medical care or to participate in programs conducted off Cran-Hill property. It is understood that these programs are fully supervised by qualified camp staff.

Liability Release: I understand that this camper assumes personal risk by participating in activities at Cran-Hill Ranch. These activities include but are not limited to horseback riding, the Adventure Program, the Skate Park and aquatic activities. I understand that while participating activities this camper may be exposed to psychologically and physically stressful and challenging situations. I understand Cran-Hill Ranch provides safe equipment and the basic instruction needed for safety. I realize these activities are potentially dangerous by nature, therefore, I waive any claim that may arise against Cran-Hill and/or its employees as a result of this camper's participation in the program.

Medical Release: This health history is correct and complete as far as I know, and the participant herein described has permission to engage in all camp activities except as noted. I hereby give permission to the camp to provide routine health care, administer prescribed medications, and seek emergency medical treatment including ordering x-rays or routine tests. I agree to the release of any records necessary for insurance purposes. I give permission to the camp to arrange necessary related transportation for this camper. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp to secure and administer treatment, including hospitalization, for the person named above. This completed health form may be photocopied for medical use outside of camp.

Signature of Parent/Guardian: _____

Date: _____

C R A N - H I L L R A N C H

RELEASE FROM LIABILITY AND ASSUMPTION OF RISK AGREEMENT - READ BEFORE SIGNING

Participant's Name: _____
(Please Print)

Age if under 18 _____

Name of Parent or Guardian (if participant is under 18) _____
(Please Print)

EQUINE RELATED ACTIVITIES

In consideration of being permitted to participate **among and on horses** on the premises of or under the auspices of Cran-Hill Ranch, **on my behalf and/or on the behalf of the participant named above** (we will collectively call ourselves "I" in this release), **acknowledge, appreciate, and agree that engaging in equine activities involves the possibility of inherent risks including, but not limited to, the following:**

- The propensity of an equine to behave in ways (such as, but not limited to, buck, stumble, fall, rear, bite, kick, run, and make unpredictable movements, spook, jump obstacles, step on a person's feet, push or shove a person, saddles or bridles may loosen or break) all of which may result in injury, death, or loss to persons on or around the equine;
- The unpredictability of an equine's reaction to sounds, sudden movement, persons, other animals, or unfamiliar objects;
- Hazards, including, but not limited to, surface or subsurface conditions;
- A collision with another equine, another animal, a person, or an object;
- The potential of an equine activity participant to act in a negligent manner that may contribute to injury, death, or loss to the person of the participant or to other persons, including, but not limited to, failing to maintain control over an equine or failing to act within the ability of the participant.

Under the Michigan Equine Activity Liability Act, an equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of the equine activity.

Saddle Girth Natural Loosening

I understand that saddle girths may loosen during a ride. If a rider notices this, he/she must alert the nearest guide or wrangler as quickly as possible so action can be taken to avoid slippage of saddle and a potential fall from the animal.

Risks to Unborn Children

Because of the inherent risks of riding horses to the safety of unborn children, Cran-Hill Ranch advises pregnant women not to ride horses.

Horse Riding Experience (not being led): 0 to 5 hours riding 5 to 10 hours riding Over 10 hours riding

I hereby give consent for the above mentioned participant to engage in equine activities:

X _____ Date Signed _____
Signature of Parent or Guardian of Minor (if under age 18) or Participant (if over age 18)

ADVENTURE PROGRAM ACTIVITIES

I understand that while participating in High Adventure programs at Cran-Hill Ranch I may be exposed to psychologically and physically stressful and challenging situations.

I also understand that although Cran-Hill has taken precautions to provide proper organization, supervision, instruction, and equipment for each activity, that absolute safety is impossible to guarantee. I understand that this is largely due to the fact that I share in the responsibility for my own safety. I accept this responsibility. Knowing that an accident could cause serious injury or death, I waive any claim that may arise against Cran-Hill and/or its employees as a result of my participation in the program.

I hereby give consent for the above mentioned participant to engage in Adventure activities:

X _____ Date Signed _____
Signature of Parent or Guardian of Minor (if under age 18) or Participant (if over age 18)

I knowingly and freely assume all such risks, both known and unknown; even if arising from the ordinary negligence of those persons released from liability below, and assume full responsibility for my participation; and,

I will comply with all rules and regulations. If I have any question, or observe any unusual or unnecessary hazard during my participation, I will immediately bring such to the attention of the nearest official; and,

I certify that I do not suffer from any infirmities or illnesses which would affect my ability to participate in the above described activities; and,

With full knowledge of the above and any other inherent risks which may be associated with the above activities, I hereby consent to participate in the above described activities, and **I agree to release, discharge, promise not to sue and waive any and all claims for personal injury, disability, death, or property damage of any kind** which my children, I or my heirs, personal representatives and next of kin may have or which may arise against Cran-Hill Ranch as a result of my participation in such activities, whether or not such injuries or damages result from negligence or legal liability, to the fullest extent permitted by law. Except in the event of gross and willful negligence, on behalf of my children herein listed, myself, my heirs, personal representatives, and next of kin, I hereby release and discharge Cran-Hill Ranch, its successors, assigns, affiliates, directors, officers, employees, and agents from any and all liabilities, claims, lawsuits, losses, costs, causes of action and damages of any kind originating or in any way arising from my participation in such activities.

I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

X _____ Date Signed _____
Signature of Participant/Client/Volunteer

X _____ Date Signed _____
Signature of Parent or Guardian of Minor (under age 18)

Cran-Hill Ranch

Release Policy & Authorization Form

If someone other than the camper's parent/guardian will be picking the child up, a release form **MUST** be presented at registration indicating who the camper is to be released to.

No child will be dismissed early from camp without turning in an early release form at the time of registration.

Please complete the form below and turn it in at the time of registration if either or both of the above situations apply to your camper.

RELEASE FORM

Camper's Full Name: _____

Dates of Camp Attendance: _____

RELEASE TO SOMEONE OTHER THAN PARENT/GUARDIAN:

Person picking up camper _____

LEAVING CAMP BEFORE THE SCHEDULED END OF THE SESSION:

Pick-Up Time _____ Date _____ Day _____

(if applicable) Return Time _____

Reason for leaving _____

As the Parent/Guardian for the above named camper, I give permission for him/her to be:

picked up by the above named person

picked up early from Cran-Hill Ranch

Print name

Sign name

Date

**ONLY
HORSEMANSHIP
CAMPERS NEED TO
COMPLETE THE NEXT
PAGE**



Horsemanship Experience Survey

We are excited about the upcoming summer and the time that you will spend riding with us! Please fill out this form and return it to us as soon as possible so that we can match you to a horse best suited to your abilities. Thanks!

Name: _____ Age: _____ Height: _____ Weight: _____
(This information helps us choose the right sized horse for you)

How many times have you ridden a horse without someone else leading it?
_____ 0 _____ 1-5 _____ 6-10 _____ 11-15 _____ 16 or more

Have you taken riding lessons before? Yes No

If yes, how long did you take them? _____

How long ago? _____

English Western

Have you taken horsemanship at Cran-Hill ranch before? Yes No

If yes, at which level did you ride? _____ 1 _____ 2 _____ 3

Which horse(s) did you ride? _____

Do you own and ride your own horse? Yes No

Briefly describe your horse experience and what you would like to learn during your time at Cran-Hill Ranch.

What dates are you coming to camp? _____

Please return form to: Cran-Hill Ranch
14444 17 Mile Rd. OR fax to: 231-796-4550
Rodney, MI 49657

*****Please return this survey immediately**