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2015 Oklahomans Without Limits (OWL)

**Camp Application**

**Application Deadline:**

**April 1, 2015**

**\*Space is limited - Camper spots will be filled on a first come first serve basis\***

This summer NewView is hosting TWO **free** summer camps, separated by age. One for children ages 8-14 which will be held in Oklahoma City and one for children ages 15-18, which will be held in the Tulsa area. Parents can rest easily as their students will spend time at both over-night camps with volunteers from around the state. OWL Camp began in 2000, and has grown to two camps, which range from 12 to 40 campers each summer.

**JUNE – TULSA CAMP for AGES 15-18**

In this new session, older campers are split into small groups and will have counselors to encourage independence, friendship and confidence. Each small group will have volunteers and/or counselors assigned to guide and give age-appropriate assistance. Camp activities will be challenging and encourage campers to do and try new things. Activities will include swimming, dance parties, water sports on Lake Hudson, and a ropes course, to name a few.

**JULY- OKC CAMP for AGES 8-14**

Each camper will be teamed with a sighted peer counselor who provides encouragement, assistance, and friendship. New activities are added each year to keep things new and challenging for returning campers. Camp favorites have included dance parties, swimming, beep-ball, fishing, archery, arts and crafts, martial arts, shopping trips, basketball, hay rides, rock climbing, kayaking and dragon boat rowing on the Oklahoma River, and of course, our annual talent show.

**Please type or print legibly using blue or black ink**

**Which camp will you be attending?**

**TULSA (Ages 15-18) OKC (Ages 8-14)**

June 23rd – June 26th, 2015 July 21th - July 25th, 2015

**Last Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Mailing Address *(only if different from above)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Gender \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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How do you prefer to be contacted? Phone Email Both

What school do you attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What year are you in school? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you find out about OWL Camp?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**T-Shirt Size:**

**Adult** T-Shirt Small Medium Large X-Large

**Youth** T-Shirt Small Medium Large X-Large

**Parent or Guardian Information:**

First Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Second Contact\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Daytime Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contacts** (*if different than above*):

First Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Second Contact\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**OWL Camp Permission and Liability**

I grant permission for my child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(insert name of student),* to participate in all OWL Camp activities of the age appropriate camp attended:

**15-18 yrs old at Tulsa Camp, June 23rd – June 26th 2015**

***or***

**8-14 yrs old at OKC July 21st - July 25th, 2015**

I will not hold NewView Oklahoma, any of the leaders, staff, volunteers, or organizations providing services responsible for any accident which may occur during OWL Camp trainings or the week of camp.

**Name of Parent or Guardian (PRINTED)** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Parent or Guardian** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

**PHOTO RELEASE**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert parent/guardian name), hereby grant NewView Oklahoma and any of its partners permission and authorization to use my child’s photograph and/or story in promotional and informational materials. I understand that photos and/or information may be used in materials including but not limited to newsletters, annual reports, newspaper articles, brochures, websites, blogs and social media.

I understand my child’s information and/or photograph may be copyrighted, published and/or reproduced in color or otherwise in any media at NewView Oklahoma or elsewhere. I agree that all rights to the picture belong to NewView Oklahoma and waive the right to inspect and/or approve the finished product. Further, I am aware that I will not be compensated for any pictures or stories in which my child may appear.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s name (PRINTED) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_ Check here ONLY IF you would NOT like your name identified in association with a picture and related Information**

**Medical Waiver / Emergency Care:**

I, the undersigned parent or person having legal custody of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *(insert name of child)*, DO HEREBY AUTHORIZE the person(s) designated as sponsor(s) for the activity or trip, in which the above named minor is participating, to initiate and provide for any medical examination, anesthetic, medical, surgical, x-ray, or dental diagnosis or treatment and/or hospital care to be rendered to the above named minor under general or special supervision and upon the advice of a physician. In giving this consent, I recognize and understand that in situations where the above named minor requires immediate medical or hospital care it may not be possible for the above referenced authorized sponsor to contact me and that in such situations, I will not be able to knowledgeably evaluate and choose amongst the available alternative treatments or procedures. If any such situations arise, I authorize a physician, surgeon or dentist to exercise his professional judgment regarding any available alternatives and to render such care and perform such treatment as he or she, in his or her professional judgment, determines to be necessary for the health or safety of the above named minor.

I authorize NewView Oklahoma staff of OWL Programs to arrange for and grant authorization to appropriate medical authorities for health care as he/she deems necessary for the well-being of my child.

I understand that I am responsible for all costs related to medical care regardless of the status of health insurance benefit coverage.

Child’s full name (PRINTED) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian name (PRINTED) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent or Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**A COPY OF YOUR CURRENT INSURANCE CARD**

**MUST ACCOMPANY THIS FORM**

**Treatment Information** (MUST BE COMPLETED)**:**

Physician’s Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Physician’s Phone

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Allergies

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Treatment Information (cont.)

Date of last tetanus shot

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**Medicines:**

**You must include ALL medications – with a DATE & TIME**. If you take allergy medication, nasal spray, etc. Put dose and time. All medications will be administered by the camp nurse

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Disease/ Cause of Blindness:**

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**Visual Acuity:**

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**Level of Assistance Needed:**

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**Does your child use a cane?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does your child require large print or Braille?** Please specify.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does your child get homesick?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please have your student answer the following questions:**

These questions will serve to help make this the best experience possible (and if applicable) be used to find the best sighted buddy for your child.

1. Will this be the first time you have been away from home for an extended period of time?
2. Have you ever been to a summer camp? If so, what camps?
3. If you have ever been to OWL Camp, which activities have you enjoyed most? Why?
4. What is your favorite color?
5. What is your favorite activity/thing to do? Why?
6. What are your two favorite subjects in school? What do you like the best about them?
7. If you could choose one thing to do at camp, what would it be?
8. What is your favorite kind of music? Favorite song?
9. Is there any additional information that you feel will be helpful to us?

**OWL Camp Rules & Regulations**

**Summer 2015**

At NewView Oklahoma our mission is to empower people who are blind and vision impaired to achieve their maximum level of independence through employment, rehabilitation and community outreach. OWL Camp is an integral part of our youth outreach programs. We do hope your child participates in this program. Below is information pertaining to camp that you may wish to read.

**Should your student have any interest in taking on a leadership role at camp (and he/she is of age—16+),** they are more than welcome to apply for the position of counselor or counselor in training for our Oklahoma City Camp (descriptions are noted below). This past year, we had both counselors and C.I.T’s who were visually impaired as well as sighted. Should your student decide to apply, he/she will be provided with a sighted assistant. The assistant is not a “buddy” as the assistant will be merely a sighted guide.

**Camp Structure: Who will be at camp?**

NewView Oklahoma Administration: Lauren Branch, President and CEO of NewView Oklahoma, Cathy Holden, Director of Rehabilitation COMS

**Camp Director:** The director is an employee of NewView Oklahoma who both plans and facilitates the camp activities. He/she is in charge of camp but also reports to Cathy Holden, the Director of Rehabilitation.

**Camp Nurse:** There will be a certified RN at camp 24/7. Her name is Julie Hensley. She collects and catalogs ALL medications (whether prescription or over-the-counter) at check-in. She is in charge of administering all daily medications. Further, she cares for students in the case of fatigue, sickness, or other medical issues.

**Camp Staff:** Employees from NewView Oklahoma who come to aid in whatever capacity at camp. Oftentimes, these people help with set-up and break-down of our activities; they run errands; they keep camp running smoothly.

**Camp Counselors:** These are college-age students who are at least 21. These individuals lead the different squads or small groups\* (there are usually 4) throughout camp. Counselors are asked to keep track of each of their students’ whereabouts at all times of the day and night. They are asked to ensure that students receive proper medication, nutrition, and sleep during their stay at camp. Moreover, they are charged to befriend, encourage, and foster independence in their students.

**Sighted Buddies:** These are volunteers, ages 14+, who are paired with each student. Each buddy is paired with one specific camper for the duration of camp. Buddies will wake up and assist their camper in getting ready for the day; help their camper all day long with daily tasks; and help their camper get to bed at the assigned hour. Not only are buddies responsible for staying with their camper at all times, but they must also work to develop a relationship, ensure the safety, and provide lots of energy for their campers all week long. This is a 24-hour job every single day of camp. It falls to the buddy to make sure that student’s basic needs are met—medication, proper nutrition, and sufficient sleep. (We do have a nurse on site, so buddies will not be administering medication, only making sure that his/her student gets to the nurse at the proper time).

**Camp Security:** These individuals help ensure the safety of everyone at camp by monitoring the halls during curfew hours (for example, 10:00 pm to 6:30 am).

**SAMPLE of June Tulsa Camp Daily Schedule:**

**6:30 am** Curfew ends

**7:00-7:40am** Medicine administration rotation  
**7:30-8:30am** Breakfast   
**8:30-8:45am** Assembly and Brief for the Day  
**8:45-9:00am** Travel to morning activities  
**9:00-11:30am** One long or two short programs

**11:30-12noon** Travel time

**12:00-1:00pm** Lunch

**4:30-5:00pm** Travel Time

**5:00-5:30pm** Warm and Fuzzies

**5:30-6:30pm** Dinner  
**6:00-9:00pm** Scheduled fun activities

**8:00-8:40pm** Medicine administration rotation  
**9:00pm**  Curfew for campers

**11:00pm** Counselor meeting with NVO Staff

**1:00-4:30pm** Afternoon activities: one long or

three short programs

**SAMPLE of July OKC Camp Daily Schedule:**

**6:30 am** Curfew ends

**7:00-7:40am** Medicine administration rotation  
**7:30-8:30am** Breakfast   
**8:30-8:45am** Assembly and Brief for the Day  
**8:45-9:00am** Travel to morning activities  
**9:00-11:30am** One long or two short programs

**11:30-12noon** Travel time

**12:00-1:00pm** Lunch

**4:30-5:00pm** Travel Time

**5:00-5:30pm** Warm and Fuzzies

**5:30-6:30pm** Dinner  
**6:00-9:00pm** Scheduled fun activities

**8:00-8:40pm** Medicine administration rotation  
**9:00pm**  Curfew for buddies & campers

**11:00pm** Counselor meeting with NVO Staff

**1:00-4:30pm** Afternoon activities: one long or

three short programs

**For the OKC Camp** - Personnel from various organization with which we have planned activities

\*Squads are typically composed of two counselors, one counselor in training, six sighted buddies, and six campers. Small groups will be 3-5 campers, 1 counselor & 1 CIT.

**Orientation & Training:**

All Staff members and volunteers are required to attend an orientation at a location chosen by OWL Camp supervisors. Members will become familiar with the daily operations of camp as well as their expected responsibilities and camp policies and procedures. All staff members and volunteers must be in compliance with all camp policies upon arrival for orientation and will be asked to verify their understanding by signing the rules and regulations manual.

**Safety:**

During the TULSA JUNE Camp all visually impaired campers will be placed in small groups that will be under the supervision of sighted counselors, staff & volunteers due to their ages, increased independence is expected.

During the OKC JULY Camp all visually impaired children will be paired with a sighted buddy who will accompany him/her throughout the week and help him/her with his/her needs—sighted guide, medication times, camp activities, etc. All participants (staff, volunteers, counselors, sighted buddies) who will have access to the University of Central Oklahoma University Suites and are 18 and older will have a background check.

Camp monitors will be on duty during curfew hours. They are there for your safety. A camp monitor is not allowed to enter any dormitory or sleeping quarters unless it is an emergency.

**Accountability:**

Everyone is to adhere to the buddy system at all times. Volunteers and campers are never to go off alone or leave someone else alone. Relationships are not allowed at camp. No purple!

**Cell phone Usage:**

Your time at camp is special. Any diversion, especially one caused by texting, calls, or social platform participation, takes away from all parties. The Camp Director will have a cell phone if your child needs to use one; otherwise, cell phone use is strictly forbidden during all camp hours—this includes from the time you arrive until camp concludes. Volunteers and campers are not to have cell phones at all, not even in their rooms. Leave all cell phones at home.

Counselors and staff members are the only people permitted to have cell phones at camp. Should parents need to contact their children, they will be provided with the contact information for the Camp Director. Parents, please call the Camp Director with any questions or concerns you may have or if you wish to speak with your child during the week of camp.

**Child Abuse:**

Corporal punishment or any form of physical, emotional or sexual abuse, or any endangerment of a camper is grounds for immediate dismissal and will be reported to the proper law enforcement agency.

**Food:**

Staff members and volunteers are discouraged from bringing food in any living areas.

**Commitment:**

Volunteers are not permitted to leave the premises of activities or residence at any time. Should parents of volunteers or volunteers themselves have any issues arise, please contact the Camp Director and he/she will help with accommodations.

**Curfew:**

Volunteers and campers are to be in their assigned rooms during curfew hours. Any person who is not in his/her respective room during the curfew hours will be reported to the Camp Director.

*\*Curfew hours will be printed on the final schedule.*

**Drugs and Alcohol:**

The use or possession of alcohol or illegal drugs of any kind is strictly forbidden. Any illegal activity, including use or possession of illegal drugs or supplying drugs, alcohol or tobacco in any form to minors, will be reported to the proper law enforcement agency and will result in your immediate dismissal. In order to maintain an alcohol and drug free environment, we maintain the right, at all times from the beginning of camp to the end, to conduct random inspections of all dorm rooms, vehicles, and personal possessions. Smoking and possession of tobacco products are not permitted on the camp premises.

We maintain a ZERO TOLERANCE POLICY regarding underage drinking or irresponsible behavior that potentially results in negative effects to our campers, staff or NewView organization. Possession and/or use of any alcoholic beverages in camp or during camp-sponsored activities (including camp-sponsored time off events) is PROHIBITED. If camp monitoring personnel witness any behavior involving drinking or irresponsible behavior, they will immediately notify camp supervisors – no exceptions.

**Electronics:**

No electronics are allowed at camp including but not limited to cell phones, ipods, personal computers, and gaming devices. Leave these devices at home. Should a student arrive with such devices, said devices will be gathered at the beginning of camp and kept in a lock box in a safe location until the conclusion of camp.

**Exceptions:**

Counselors are permitted to have cell phones for emergency and logistic purposes only.

The use of digital cameras is permitted.

**Over-the-counter or Prescription Medication:** A nurse will be available at all times during camp. All medication will be collected and locked up safely by the nurse on the first day. NO MEDICATION, whether over-the-counter or prescription, should be kept in your room or on your person. We do not want an accidental ingestion to occur by a child, so all medication must be managed during camp by the nurse on duty.

**Regulations for the Living Quarters**

There are to be no girls in boys’ rooms. Likewise, there are to be no boys in girls’ rooms. Bedrooms are for sleeping. We will not be in there any other times.

**Transportation:**

Transport to different activities will be by bus. NewView OWL Camp adheres to the regulations on the number of students allowed in each bus. Therefore, depending on the size of camp, we will have the number of recommended buses to accommodate our group.

Buses will be the mode of transportation unless other modes of transportation are required in the case of an emergency. In cases of emergency, transport by means of a staff vehicle is permitted. Should students need to be transported in a staff vehicle, that staff member would have had a DMV report in order to transport students. Staff members may not transport students without clearance from both the Camp Director and the Director of Rehabilitation, Cathy Holden.

**You can mail, fax, or email your completed application to:**

Meg McElhaney at NewView Oklahoma 510 N. Douglas Ave., Oklahoma City, OK 73106

Fax it to (405) 236-5438, Attn: Meg McElhaney

Email it to [mmcelhaney@newviewoklahoma.org](mailto:mmcelhaney@newviewoklahoma.org)

Subject*: OWL Camper Application*

If you have any questions, do not hesitate to call our office at (405) 232-4644.