



High School Fitness (PE) 0.5 Credit

Study Areas: Hiking-Backpacking at Cispus

Outdoor Recreation Health & Fitness Camp is scheduled for Thursday, June 21 through Monday, June 25, 2018. The camp will cover hiking and backpacking and is based out of the Cispus Learning Center, Randle, Washington. The intensive curriculum (up to 14 hours each day) is designed for students interested in exploring the vast opportunities the outdoors has to offer. Students will learn how to skillfully and safely approach these adventures. Land based (only) activities in outdoor sport skill building, leave no trace, wilderness first aid and environmental etiquette are included. Camp is 5 days and 4 nights. The cost is \$350. This program is facilitated and supervised by staff of the Association of Washington School Principals.

Students from Washington state entering grades 9-12 are eligible to attend. Participants will gain confidence and skills in pursuit of outdoor adventure. They will respectfully and safely learn how to experience the outdoors with minimal impact on the environment through experiential learning. This class aligns with the power standards for Physical Education and meets state requirements for Classroom Based Assessments. Participants can earn one full semester credit with successful completion of the camp and a follow-up assignment. The 0.5 credit is received from the NWAC Accredited Principals' Student Learning Centers.

There is a limit of 18 participants for this program.

Who should attend the Health and Fitness Camp?

Camp is designed for students who want to earn high school Fitness and Health (PE) credit, and learn about lifetime outdoor recreation and sport.

What is the sponsor's role?

In order to attend the camp a student will need a sponsor. A sponsor is an adult who will vouch for their work ethic, sense of responsibility and ability to successfully complete the rigorous academic and physical requirements of the camp. **This person could be a teacher, counselor or school administrator.**

Where is camp?

Outdoor Recreation Health and Fitness Camp is held at the Cispus Learning Center, 12 miles southeast of Randle, Washington in the Gifford Pinchot National Forest. The Association of Washington School Principals operates this facility.

How do students get there?

Students can be transported to camp by their school, sponsor or parent. **Student drivers are NOT allowed.**

What equipment is needed?

Participants will need to bring backpacking gear for an overnight trip. Packing lists will be mailed with registration confirmation.

An additional reason to attend

With the increasing requirements for credits to graduate from high school, many students find very little time for in-depth study in areas of their special interest. The credit earned by completing this course of study may open opportunities during the school year for additional courses in other interest areas.

Registration reminders

Only students who can commit to the entire camp session should register! Camp starts at 1:00 pm on day one and concludes at noon on the final day. Participants must be entering grades 9-12.

Questions? Contact Martin Fortin, fortin@awsp.org

For more information go to www.awsplearningcenters.org/pe-credit-classes/



Outdoor Recreation Health & Fitness

Sponsored by the Association of Washington School Principals' Outdoor Learning Centers

Participant Registration/Medical Form

Race/Ethnicity (Optional)

- Hispanic / Latino of any race(s)
- American Indian / Alaskan Native
- Asian
- Black / African American
- Native Hawaiian / Other Pacific Islander
- White
- Two or More Races

Cispus Learning Center, Thursday June 21 – Monday June 25, 2018

Legal First & Last Name _____ Preferred Badge Name _____

School _____

Home Mailing or PO Box _____ City/State _____ Zip _____

Student Email _____ Student Cell Phone _____

Age _____ Graduation Year 20____ Gender: Female Male Other Birth Date ____/____/____

Sponsor Name _____ Title _____

Sponsor Phone _____ Sponsor Email _____

Parent/Guardian Name(s) _____

Parent Evening Phone _____ Parent Day Phone _____

Alternate Emergency Contact _____ Alternate's Phone _____

Medical Insurance Company _____ Policy Number _____

MEDICAL INFORMATION TO BE COMPLETED BY PARENT OR GUARDIAN - ATTACH DETAIL IF NEEDED

Dietary needs: Vegetarian Peanut allergy? No

Vegan Yes, ingested

Dairy Free Yes, airborne

Gluten Free

Date of last tetanus shot: _____

Current medications/taken for: _____ Dose/Time of Day: _____

Can a health care professional provide over the counter medication? Yes No Restrictions: _____

Should the delegate be restricted from any type of activity? _____

Does your child need special accommodations due to physical challenges? _____

Other dietary, health concerns or allergies:

Student Agreement: If accepted as a participant, I agree to abide by all regulations established by the officials of the Association of Washington School Principals and will strive to be a worthy representative of my community by contributing my best efforts toward the success of the program. I have read and understand the cancellation policy and I understand that **student drivers are not allowed.**

Signature of Student

Date

Parent or Guardian Permission: As the parent or guardian, I give my permission for my child to attend Outdoor Recreation Health & Fitness at Cispus Learning Center in Randle, WA or Chewelah Peak Learning Center in Chewelah, WA and I understand that this program is fully supervised by staff of the Association of Washington School Principals (AWSP). I have read and understand the cancellation policy and I understand that student drivers are not allowed. By signing this form I give permission for photographs, slides or videos of my child to be used for information, publication, presentation or other educational purposes. I authorize AWSP to obtain medical care for my child in the event such care is necessary. In the event of an emergency I understand that every effort will be made to contact the parent(s) or guardian of the participant. Permission is hereby granted to the health care professional or accredited hospital and their associates to perform necessary medical and/or surgical procedures that are deemed essential to the treatment of the above named individual. I also agree to be responsible for the payment of such care.

Signature of Parent or Guardian

Date

Sponsor's Recommendation (a sponsor is a teacher, counselor or administrator): I recommend this student for acceptance as a participant in Outdoor Fitness & Health based on his/her work ethic, sense of responsibility and ability to successfully complete the rigor and academic requirements of the program.

Signature of Sponsor

Date

REGISTRATION FEE = \$350

Mail registration material to:

AWSP-Outdoor Rec Health & Fitness
2142 Cispus Road
Randle, WA 98377

PAYMENT Full payment of \$350 must accompany this Participant Registration Form. Check or credit card payment will be accepted. You may send your registration in the following ways:

Check: Mail check with this registration to: AWSP, 2142 Cispus Rd, Randle, WA 98377

Credit Card: Call (360) 497-5323 to pay with a credit card. (Fax or email (heatherm@awsp.org) this registration before calling)

CANCELLATION POLICY

All cancellations received after June 14th will result in a non-refundable processing fee of \$100. If a cancellation is made less than five working days prior to camp, the full charge will apply.

Participants will be charged the full amount if they leave early or do not show up. All cancellations must be received in writing from a parent/guardian by the specified date.

QUESTIONS? For **registration** information, contact Heather Muir (heatherm@awsp.org)
For **program** information, contact Martin Fortin at fortin@awsp.org
Phone: 360.497.5323 FAX: 360.497.5324