



# **Alberta Conference Outdoor Education**

**October 3-5, 2017**

**Grade 9 Student/Parent Handbook**



*Learning About God's First Book*

*In Exciting Ways!*

**Alberta Conference of Seventh-day Adventist Church  
Office of Education  
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**To: Parents of Grade 9 Students  
Alberta Conference of SDA  
From: Alberta Conference of SDA  
Office of Education**

**God has created a world exploding with beauty and wonder. His character is revealed in each opening bud and every singing bird. Nature has innumerable important lessons for your young people with an opportunity to get closer to nature and to God. This year, the Alberta Conference is offering an unforgettable opportunity for students in Grade 9 to experience an excellent Outdoor Education program. It will be held from October 3-5, 2017. This year the Outdoor Education activity will be at Camp Warwa. Please note that the Alberta Conference Office of Education is sponsoring and subsidizing the cost of Grade 9 Outdoor Education.**

**Grade 9 Outdoor Education will be a three-day experience at Camp Warwa. We will be participating in a variety of activities and games that will be lead out by the staff of Camp Warwa. The cost for this trip is \$50 per student plus transportation. This fee covers the cost of food and lodging, however we are required to bring a sleeping bag and a pillow.**

**The 3-Day Morning Arrival Package allows us to arrive as soon as 10:00 am on our first day, and can stay as late as 1:30pm on our last day. It assumes that we bring our own bagged lunch on Day 1 and that Camp Warwa will provide all of our meals thereafter. Five of our meals will be served in the dining hall, and one meal we would get to cook outdoors over a fire. It also includes an afternoon and evening snack on Days 1 and 2. We will have time to do up to 11 different programs of our choice, in addition to campfire programs and opening icebreaker games.**

**When you have decided to attend, fill in the enclosed Registration/Permission and Medical Form as well as the Liability form and return it to your teacher. Please pay the \$50 to your teacher. We encourage every class member to participate in this adventure.**

**Thank you for your support and cooperation in this exciting and valuable program. If you have any questions, please do not hesitate to contact the Alberta Conference Office of Education.**

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## **Suggested Personal Equipment**

### **Personal Items**

**Bedding (sleeping bag or fitted sheet & blanket)**

**Pillow**

**Toiletries**

**Sunscreen & Sunglasses**

**Medications**

**Towel**

**Laundry Bag**

### **Clothing**

**Underwear**

**3-4 Pairs of Socks**

**1 Pair of Pants per day plus 1 extra**

**1 Pair of Shorts per day plus 1 extra**

**1 Shirt per day plus 1 extra**

**1 Long Sleeved Shirt 1 Sweater/Hoody**

**Rain Gear**

**Hat**

**Sleep Wear**

**1 Pair of Closed Toed Shoes**

**1 Pair of Relaxing Shoes**

**Warm Hat, Mitts, Gloves**

### **Equipment**

**Nut Free Bagged Lunch (Warwa is a Nut Free Facility)**

**Water Bottle**

**Flashlight**

**Camera**

**Day Pack**

**Insect Repellant**

**Sleeping Pad (camping groups)**

### **Warwa Merchandise for Sale**

**Sunglasses - \$5 Water Bottles - \$10**

**Please DO NOT Pack**

**Knives, matches, lighters**

**Electronics**

**Food**

**Valuables**

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## **SCHEDULE AND IMPORTANT INFORMATION**

### **Tuesday Oct 3, 2017**

- 10:00 a.m.** Arrive at Camp Warwa located West of Edmonton. (Settle in and begin to participate in the programing.)
- 12:30 p.m.** Bag lunch from home and return to programing
- 3:00 p.m.** Snack and return to programing
- 5:30 pm.** Supper and return to programing
- 8:00 p.m.** Campfire worship and snack

### **Wednesday Oct 4, 2017**

- 8:00 a.m.** Worship
- 8:30 a.m.** Breakfast and begin programing
- 12:30 p.m.** Lunch and return to programing
- 3:00 p.m.** Snack and return to programing
- 5:30 pm.** Supper and return to programing
- 8:00 p.m.** Campfire worship and snack

### **Thursday Oct 5, 2017**

- 8:00 a.m.** Worship
- 8:30 a.m.** Breakfast and begin programing
- 12:30 p.m.** Lunch and leave by 1:30 p.m.
- 1:30 p.m.** Happily on the way home

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## **EXPECTATIONS**

**The following expectations are designed in order that Outdoor Education will function smoothly and that everyone will have an enjoyable experience. The most important thing is to use common sense throughout the week:**

**These expectations will be reviewed with you prior to the trip by your teacher, and again on the trip at camp.**

### **Agreements:**

1. Mutual respect
2. Attentive listening
3. No put downs
4. Right to pass; responsibility to take a risk

### **General Rules:**

1. Respect God.
2. Respect Others.
3. Respect Yourself.
4. Respect Property.
5. Respect The Environment.

### **Camp Rules:**

1. Stay on site
2. Listen to and follow all the rules as they are laid out by the Camp Warwa staff

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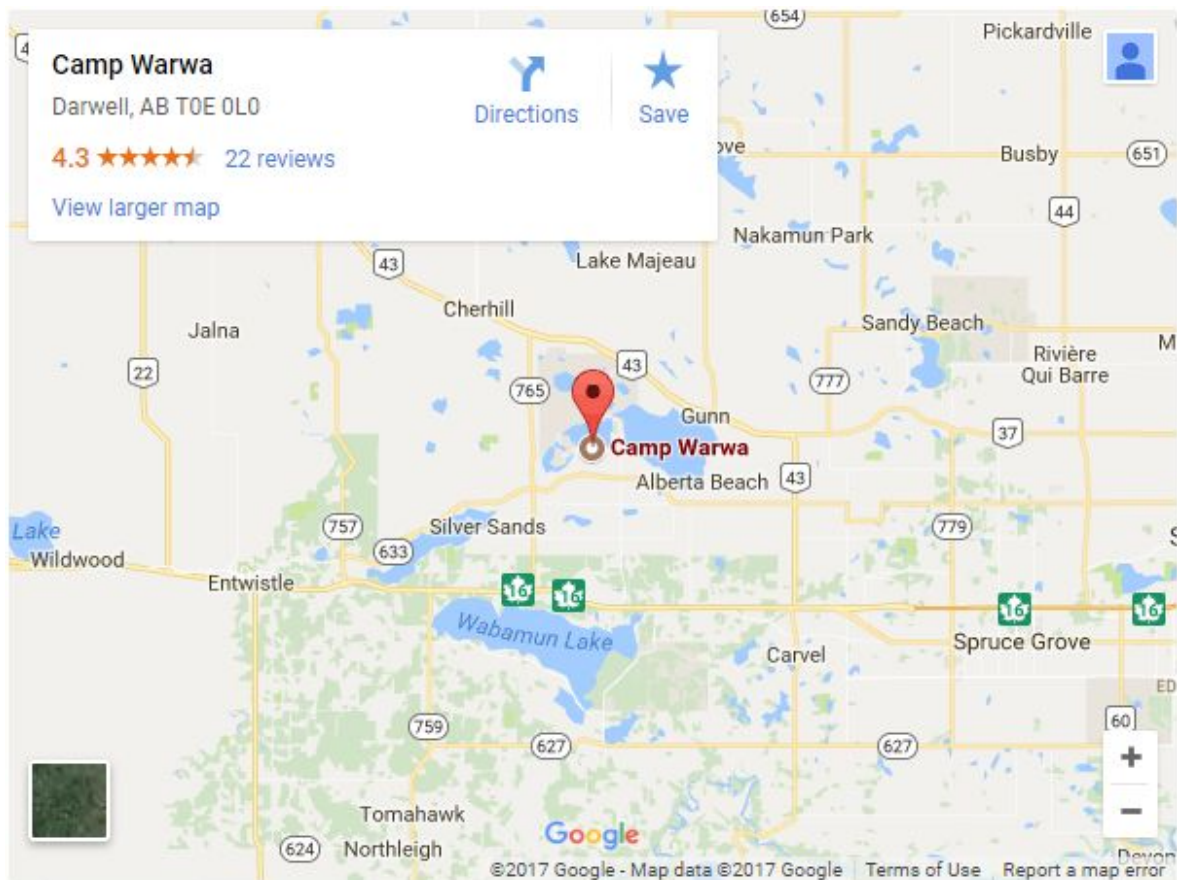
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## Directions to Camp Warwa

### From Edmonton

1. West on Highway 16 (Yellowhead)
2. North on Highway 765 (towards Darwell)
3. East on Highway 633 (towards Alberta Beach)
4. North on Range Road 43 (towards West Cove & Warwa Estates)
5. From Range Road 43 just follow the Red & Orange signs to Camp Warwa

There is also a large blue highway sign at each intersection listed above.





## OFF-SITE ACTIVITY CONSENT OF PARENT/GUARDIAN AND ACKNOWLEDGEMENT OF RISK

### PROGRAM/ACTIVITY INFORMATION

School: \_\_\_\_\_ Student Name: \_\_\_\_\_

Program/Activity: Grade 9 Outdoor Education at Camp Warwa Date: October 3-5, 2017

Teacher-in-charge: \_\_\_\_\_

### ALBERTA CONFERENCE K-12 EDUCATION BOARD RESPONSIBILITIES

- The Conference will make every reasonable effort to ensure or ascertain that:
- The staff, volunteers and/or service providers involved are suitably trained and qualified.
  - The students are adequately supervised over all aspects of the program/activity.
  - The location(s) used are appropriate and safe for the activity and group.
  - Equipment used has been inspected and deemed appropriate and safe.

### POTENTIAL HAZARDS

<p>Potential known hazards include the following</p> <ul style="list-style-type: none"> <li>• Weather</li> <li>• Terrain</li> <li>• Wild animals</li> <li>• Failing to follow instructions</li> <li>• Stoves/cooking</li> <li>• Carelessness</li> <li>• Lack of appreciation of risk</li> <li>• Impatience</li> <li>• Inexperience</li> <li>• Over confident</li> <li>• Sense of immortality</li> <li>• Physically/emotionally unfit</li> <li>• Lost</li> </ul>	<ul style="list-style-type: none"> <li>• Small creeks</li> <li>• Altitude</li> <li>• Forest Fire</li> <li>• Dehydration</li> <li>• Daring</li> <li>• Cooking</li> <li>• Inattentiveness</li> <li>• Fatigue</li> <li>• Hunger</li> <li>• Peer pressure</li> <li>• Poor communication</li> <li>• Poor conflict resolution</li> <li>• Falls/slips</li> <li>• Vehicular accidents</li> </ul>
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### CONSENT AND ACKNOWLEDGEMENT OF RISK

- Mode of Transportation: \_\_\_\_\_
- I accept this mode of transportation for this activity: Yes  No  OR I permit my child to use alternate means of transportation. Specify means: \_\_\_\_\_
- I acknowledge my right to obtain as much information as I require about this program/activity and associated risks and hazards, including information beyond that provided by the school or Alberta Conference K-12 Education Board.
- I freely and voluntarily assume the risks/hazards inherent in the program/activity and understand and acknowledge that my child may suffer personal and potentially severe injury due to an unforeseeable event associated with his/her participation.
- My child has been informed that he/she is to abide by the rules and regulations, instructions, directions and instructions from the school's and/or service provider's administrative staff, instructors, and supervisors over all phases of the program/activity.
- In the event my child fails to abide by these rules and regulations, disciplinary actions may require his/her exclusion from further participation, or that I be contacted to have my child picked up, unless I have specified other transport arrangements.
- I acknowledge that it is my responsibility to advise the board of any medical and/or concerns of my child, which may affect his/her participation in the stated program/activity.

8. I consent that the board, through its employees, agents and officers may secure medical advice and services as they deem necessary for my child's health and safe that I shall be financially responsible for such advice and services.
9. With respect to this trip, I hold the Alberta Conference of SDA Church and employ schools and supervisors harmless for any personal harm or injury, with the full understanding that I will not seek or expect damages or compensation from the Alberta Conference of SDA Church and employees, schools and supervisors for any incident whatsoever, save gross negligence.
10. I understand that the only insurance coverage provided by the Alberta Conference of SDA Church and schools is the Student Accident Policy, which has limited amounts of compensation and does not cover all risks. I further understand that it is my responsibility to ensure that I am (or that my child is) covered by other medical insurance. I also understand that all personal effects must be covered by my homeowner's policy as the Alberta Conference of SDA Church or schools provide insurance for student's personal property.
11. Based on my understanding, acknowledgement and consents as described herein, that \_\_\_\_\_ (name of student) has my permission to participate in this program/activity.

Date: \_\_\_\_\_ Name (Please print) \_\_\_\_\_

Signature: \_\_\_\_\_

**TRIP EMERGENCY MEDICAL INFORMATION** (Attach a separate page if more space is needed)

Student name: \_\_\_\_\_ Birth date: \_\_\_\_\_ AHC# \_\_\_\_\_

Allergies (e.g. specific drugs, certain foods, insect stings, hay fever) Specify: \_\_\_\_\_

Reaction(s) to above? \_\_\_\_\_ Carries Epipen? • Yes • No  
 Carries Ana Kit? • Yes • No

Medical/physical conditions that may affect participation in the stated program/activity (e.g. illness or injury, chronic conditions, phobias, non/weak swimmer, etc.) Specify the condition(s) and reason for program modification or specific activities your child should not participate in:

\_\_\_\_\_

Medication(s) taken (name, reason, dosage, storage, potential side effects/treatment of side effects):

Other Health/Medical/Dietary Concerns:

Emergency Contacts: (including area code)

1. \_\_\_\_\_ Ph: (H) \_\_\_\_\_ (W) \_\_\_\_\_ Cell: \_\_\_\_\_
2. \_\_\_\_\_ Ph: (H) \_\_\_\_\_ (W) \_\_\_\_\_ Cell: \_\_\_\_\_