



Camp Lakeview

2022 Tiny Tykes,

Mother-Daughter, Father-Son Retreats

Information Packet

Lakeview Ministries
13500 W Lake Rd
Seymour, IN 47274
P: 812-342-4815
office@lakeviewministries.camp
www.lakeview.camp

Welcome to camp! I am so looking forward to having you and your child join us for an incredible weekend away. My own family would attend camp each year growing up and those times remain some of the best and most impactful I can remember spending together. I hope this weekend is the same for you!

This packet contains important information for you as you prepare to come to camp. [We will also be sending you an email in early May with specific policy/procedure information and updates.](#) This May email is designed to give you the most up-to-date information leading into the summer, as conditions may change between now and then.

Included in this packet you will find more information about:

- Arrival/Departure Times
- Lodging Information
- Food and Allergy Information
- Safety Policies
- Packing List
- Medical Form + Waiver + Camp Map/Directions + Schedule (included at end)

If you have any additional questions about the retreat that are not answered here, please contact me. I am here to help! Our website (lakeview.camp/family) is also a great resource.

Can't wait to spend time with you!

In Christ,

Ellie "Frisbee" Lutz
Retreat Program Director
frisbee@lakeviewministries.camp
812-342-4815



ARRIVAL/DEPARTURE INFORMATION

SATURDAY ARRIVAL

Check-in will take place between 9:00-10:00 am on Saturday at the Dining Hall porch of Camp Lakeview. You can check in at any point during this hour, but will want enough time to unpack and settle in before we kick things off at 10:00.

SUNDAY DEPARTURE

The retreat will end following Closing Worship at 10:30 am on Sunday. Following worship, if you would like to enjoy a little more time at camp, we will have some additional do-on-your-own activities available. We do request you have all personal items packed up and in your vehicle by 10:30 am to assist our cleaning crew, and that you head out from camp by 1:00 pm to allow us to reset for the next round of campers!

LATE ARRIVAL

If you need to arrive late or leave early, that is totally okay! Please let us know ahead of time by emailing or calling our office. When arriving late, you can head to the Camp Lakeview Dining Hall to check in.

CHECK-IN PROCESS

When you drive in to camp, head to the Camp Lakeview Dining Hall Parking Lot. There will be staff there to direct you to check-in. During check-in you will be welcomed by our staff, turn in your family's medical form, complete a health screen, and receive a schedule and your lodging assignment for the retreat.

Here is what you can do to help the check-in process go as smoothly as possible:

- **PAY 2 WEEKS PRIOR:** Remember that your registration balance is due two weeks before your camp session starts.
- **PROVIDE ACCURATE ADULT ATTENDEE INFORMATION:** Make sure to fill out the "Adult Attendee" form in your online account, and update it if necessary. Knowing the gender of the adult attending camp is important for our housing assignments.
- **PRINT AND FILL OUT FAMILY MEDICAL FORM AND WAIVER:** These forms can NOT be filled out online. Please fill out prior to arriving at camp. These forms can be found at the end of this document.

During check-in the camp store will be open if you wish to purchase camp apparel or souvenirs.

LODGING INFORMATION + REQUESTS

Shared Lodging

You and your child will share a cabin with other adult/child pairs (there will be 6-10 people per cabin). All adults will be of the same gender. For Tiny Tykes retreats, if you would prefer to be in

a cabin where all children are the same gender as well, you can indicate that in the "Adult Attendee" form in your online account.

Shared housing can be a little intimidating, but this is a great chance to make some deeper connections during your time at camp! If you are a light sleeper, bringing along ear plugs or a fan/white noise machine can also go a long way in helping your sleep experience.

Friend Requests

If you have friends coming to the retreat that you would like to room with, you can request to do so through your online account. Simply sign in to your account and select the "Cabin Mate" button in the Optional Items section of your dashboard.

Lodging Description

Each cabin has wood walls and brushed concrete floors. There is a common bathhouse/shower building in the cabin area that is a short outdoor walk to get to. Cabins have heating/air conditioning and twin bunk beds for beds. Make sure to bring your own linens.

FOOD INFORMATION

Meals included in this retreat are Saturday lunch and supper, and Sunday breakfast. Each meal includes a main entrée and several different options for sides. Fruit is available at each meal and salads and peanut butter and jelly sandwiches available for lunch and supper.

The camp canteen will be open Saturday afternoon and Sunday morning to purchase candy, chips, ice cream, or pop. The canteen is cash only. You are able to bring your own snacks to camp as well. Please make sure any food/drink in cabins is in sealed containers to avoid attracting critters. You will have access to a refrigerator and freezer if bringing anything that needs to be kept cool.

Food Allergies

If you have a food allergy, please make sure to notify us by filling out the "Important Info" form during the registration process. We are able to provide basic alternatives for typical food allergies such as gluten or dairy. If you have more severe or extensive allergies it is recommended that you bring supplemental food items to camp. Our kitchen staff is able to cook, microwave, and prepare separate food items for meals. We can also provide a menu for your time at camp to help you better plan and prepare.

Please call or email our office to talk through specific food needs you may have or to find out more information about our menu and food options. During check-in you will be able to drop food off and talk through specific details of your food allergy needs.

SAFETY POLICIES

Before Your Arrival

[Participants are strongly encouraged to receive a COVID-19 vaccination/booster prior to attending camp.](#) This is based on the recommendation of the CDC and the assumed risk of gathering together when attending camp. In addition, please closely observe your health and contacts in the

days leading up to their camp session and stay home if you do not meet the requirements of our initial health screen.

During Check-In

Any person with a temperature above 100.4°F, OR who has been exposed to someone confirmed to have COVID-19 in the past 5 days, OR who has been sick with COVID-19 symptoms in the past 5 days will not be admitted into camp. Please be honest during the health screening portion of our check-in process. If you think there may be an issue please call our office ahead of time to discuss it with us. If you are not able to attend due to illness, you will have the opportunity to transfer to a different session or receive a full refund.

If you or your child develop COVID-19 symptoms during the weekend you will be asked to head home for the safety of the group.

Outside is the Best Side

Like we normally do at camp, we will be outdoors for the majority of the weekend. Outdoor picnic tables will be provided for meals at the dining hall. Enjoy the scenery and the yard games we've set up around the dining hall for you to enjoy! In the event of rain, we will stay on porches outdoors for any camp-led activities.

Indoor Mask Use Recommended

Masks will be recommended when in shared indoor spaces, such as the dining hall or restroom areas. If COVID-19 cases remain elevated in our area leading into the summer, masks may be required in shared indoor spaces.

After Camp

Please inform our office if you or your child experience COVID-19 symptoms within 48 hours of the end of your retreat. We will request you follow up by being tested for COVID-19. In the event that this occurs, and you test positive for COVID-19, we will inform all participants that there has been a positive case and if that case occurred in their cabin. Personal privacy will be protected-no one will ever be designated by name.

Additional Safety Strategies

If COVID-19 cases are elevated above a certain threshold, additional safety strategies may be implemented. These may include such things as requiring a negative COVID-19 test upon arrival or requiring masks when indoors. Any additional strategies will be communicated to parents at least two weeks in advance of your week of camp.

CAMP ACTIVITIES

Take a look at the sample schedule provided (at the end of the packet) for an overview of some of the great activities you'll get to enjoy during your time at camp. When packing, make sure to bring closed-toe shoes (for horses) and water shoes/flip flops (for wading in the creek).

Stormy Weather Policy

In general, as long as it is not thundering, we will continue with all of our normal activities. In the event of stormy weather, keep in mind that our activity options will be limited. We always have board games, coloring books, and Legos as a backup option!

PACKING LIST (WHAT TO BRING)

CLOTHING

- Face Mask
- Summer Clothing
- Sweatshirt
- Rain Coat, Umbrella
- Swimming Suit and Towel
- Closed-toed Shoes (required for horses)
- Shower Sandals

CABIN ITEMS

- Bedding (twins sheets and blanket or sleeping bag)
- Pillow
- Towel and Washcloth
- Toiletries
- Bug Spray, Sun Screen

PERSONAL ITEMS

- Water Bottle
- Bible
- Flashlight

OPTIONAL ITEMS

- Bag/Backpack
- Hat, Sunglasses
- Earplugs, Fan, White Noise Machine
- Camera
- Snacks
- Book to read
- Recreation Gear (Fishing Poles, Inflatables, Swim Goggles, etc.)
- Beach Chair

THINGS TO LEAVE BEHIND

- Technology
- Fireworks or Weapons
- Expensive Items
- Stress

CAMP PICTURES AND VIDEOS

Depending on our staff scheduling, we may have a staff member taking pictures throughout your weekend at camp. These pictures will be posted on Waldo Photos, an online photo app used by camp. You will receive an email with a link to access these photos the week following your retreat.

LOST ITEMS

We will attempt to return lost items to their owners while they are still at camp. Lost items will be stored at camp until September 1st, after which they will be donated.

CANCELLATION POLICY

Refunds will be granted 14 days prior to your scheduled arrival for all but \$25 of your deposit. No refunds will be granted within 14 days of your scheduled arrival except in cases of illness or injury and family emergencies.

Well done-you made it through!

I am counting down the days until you get to be out at camp. Here's to a weekend together with lots of laughing, making memories together, encouraging each other as we follow Jesus, and having adventures at the greatest place on earth.

See you soon!

In Christ,

Ellie "Frisbee" Lutz
Retreat Program Director
frisbee@lakeviewministries.camp
812-342-4815



2022 Family Emergency Medical Information Form

This form must be completed and *submitted* to Lakeview Ministries prior to *final* admission of the family into the camp program. Failure to properly complete and submit this form will result in the non-acceptance of the family into the camp program. This form should be given to camp *staff* at the *time* of check-in on the *first* day of the camp session. Lakeview Ministries shall not be held primarily responsible for medical expenses incurred by the family through accident or illness before, during or *after* enrollment in the camp program.

Family Information:

Camper Name: first last Sex: _____ Age: _____

Camper Name: first last Sex: _____ Age: _____

Camper Name: first last Sex: _____ Age: _____

Camper Name: first last Sex: _____ Age: _____

Camper Name: first last Sex: _____ Age: _____

Camper Name: first last Sex: _____ Age: _____

Family Address:

Family Home Address: _____ _____ city _____ state zip

Family County of Residence: _____ Home Phone: (_____) _____

Authorization for Emergency Medical/Dental Care

I, the undersigned parent, spouse, and/or natural guardian of all individuals listed above do hereby authorize the Lakeview Ministries Health Services Staff (and/or any other qualified adult appointed or designated by them) (1) to provide routine health care and administer prescription medications, (2) to consent to medical, surgical and dental care for such individual(s); (3) to consent to any diagnostic test, medical, surgical or dental procedure or treatment as may be considered therapeutically necessary by the physician, surgeon, dentist or other health care personnel providing care for such individual(s); (4) to employ physicians, surgeons, dentists, nurses and other health care personnel as may be deemed necessary for such individual(s); (5) to admit such individual(s) to any hospital, clinic, emergency room, laboratory or other health care or diagnostic facility for examination, treatment, surgery or care; and (6) to sign all necessary consents and authorizations.

It is understood that this authorization is given in advance occurrence of any condition or situation which would necessitate any such medical, surgical or dental care being required; but is given to provide authority to obtain such care if it should be required. I fully understand the consequences of the foregoing statements and sign this AUTHORIZATION TO CONSENT TO MEDICAL AND DENTAL CARE knowingly, freely and willingly.

Signature: _____ Date: _____

Printed Name: _____

Emergency Contact Information:

(Someone who is NOT at camp)

Name: _____ Relationship to Family: _____

Home Address: street address _____ city _____ state zip

Home Phone: (_____) _____ Cell Phone: (_____) _____ Work Phone: (_____) _____

Medical Insurance Information:

Attach a copy of medical insurance card to this form.

Insurance Company: _____ Insurance Company Phone: (_____) _____

Policy Number: _____ Group Number: _____

Subscriber Name: _____ Birthdate: _____ / _____ / _____

PLEASE STAPLE A COPY OF YOUR
MEDICAL INSURANCE CARD HERE!

Family
Name:

Name of
Program:

Please list any health details about each family member that would be helpful for camp staff to know:
(Health details could include such things as activity restrictions, accommodation requirements, severe allergies , serious injuries, etc.)

Immunization Record:

Please list each family member's *first* name and the date of their last tetanus booster. In the space marked "other", please list all common *immunizations* which the family member has NOT had.

Name: _____	Tetanus: ____ / ____ / ____	Other: _____	COVID-19 Vaccination?* Yes <input type="checkbox"/> No <input type="checkbox"/>
Name: _____	Tetanus: ____ / ____ / ____	Other: _____	COVID-19 Vaccination? Yes <input type="checkbox"/> No <input type="checkbox"/>
Name: _____	Tetanus: ____ / ____ / ____	Other: _____	COVID-19 Vaccination? Yes <input type="checkbox"/> No <input type="checkbox"/>
Name: _____	Tetanus: ____ / ____ / ____	Other: _____	COVID-19 Vaccination? Yes <input type="checkbox"/> No <input type="checkbox"/>
Name: _____	Tetanus: ____ / ____ / ____	Other: _____	COVID-19 Vaccination? Yes <input type="checkbox"/> No <input type="checkbox"/>
Name: _____	Tetanus: ____ / ____ / ____	Other: _____	COVID-19 Vaccination? Yes <input type="checkbox"/> No <input type="checkbox"/>

*For the COVID-19 **vaccination** please only list YES if the family member has received at least 2 shots of **Pfizer/Moderna** or 1 shot of J&J in the last 6 months. OR all recommended doses in the primary series and one booster shot at any point in **time**.

Thank you!

2022 Family Program Release, Indemnification, and Hold Harmless Agreement

(print, sign, and bring with you to check-in)

Executed On Behalf Of Family

I execute this Release, Indemnification and Hold Harmless Agreement ("Agreement") on my behalf and on behalf of my spouse, children and other family members (my "Family") who are attending the family camp/retreat ("Camp") with me at Lakeview Ministries. I certify that I am at least 18 years of age and the custodial parent and/or legal guardian of my child(ren) and have full legal authority to execute this Agreement on behalf of my Family, my heirs, representatives, successors, executors, administrators and assigns.

Hold Harmless Agreement

I agree, on behalf of each member of my Family in attendance at Camp, my heirs, representatives, successors, executors, administrators and assigns, to FOREVER RELEASE, INDEMNIFY, DEFEND, AND HOLD HARMLESS South Central Lutheran Camp Association of Indiana, Inc., doing business as Lakeview Ministries, and its agents, servants, employees, volunteers, patrons, officers, and directors (collectively, "Lakeview"), from any and all actions, claims, demands, suits, liabilities, assertions of liability, losses, costs, judgments, and expenses, including but not limited to attorney fees, reasonable investigative and discovery costs, and court costs, which in any manner may arise or be alleged to have arisen, or resulted, or alleged to have resulted, from (i) the participation of any member of my Family in Camp, or (ii) the presence, activities, acts or omissions (whether negligent, intentional, or otherwise) of Lakeview. This includes, but is not limited to, all actions, claims, demands, suits, liabilities, assertions of liability, losses, costs, judgments, and expenses on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the participation in Camp, of any member of my Family, however the injury or damage is caused, including but not limited to, the NEGLIGENCE of Lakeview.

Inherent Risk

I fully understand and acknowledge that certain elements of Camp may be physically hazardous and that by participation in Camp, the members of my Family face the risk of accidental and/or other injury. There risks include, but are not limited to, (i) loss or damage to personal property, (ii) injury or fatality due to and/or related to walking, running, jumping, swimming, handling athletic equipment, horseback riding, zip lining and/or other physical activity, (iii) head, neck, arm, leg and/or back injuries, (iv) exposure to inclement weather, outdoor terrain and all the risks inherent therein, (v) slips and falls, and (vi) any other aspects related to Camp. I have fully investigated the nature of Camp and assume the risks of my Family's participation in Camp. I agree that my Family's participation in Camp is entirely voluntary and that no member of my Family is under any obligation to take part in Camp. I am fully aware that any member of my Family may suffer these or other injuries arising out of participation in Camp. However, I voluntarily assume these risks on behalf of my Family so they may participate in Camp.

Legal Release

In further consideration of myself or my family participating in Camp, the undersigned hereby agrees to the following: The undersigned, on his or her behalf and on the behalf of such participating children, hereby releases, waives, discharges and covenants not to sue Camp or any of its respective directors, officers, employees, volunteers and agents, or any fellow participants or their family members from all liability to the undersigned or such participating children and all personal representatives, assigns, heirs, and next of kin of the undersigned or such participating children (or any person who may contract COVID-19, directly or indirectly, from the undersigned or such participating children) whether caused by the negligence, active or passive, of Camp or otherwise while the undersigned or such participating children and family are in, upon, or about the premises of any facilities or using any equipment of or participating in any program of or affiliated with Camp.

Photo and Video Consent

I also consent to Lakeview's use of photographs and/or video images of any member of my Family for official Lakeview promotional purposes, including print, internet, social media, video, and other media. While the image of a member of my Family may be captured, I understand that my Family's name will not be shared. I further understand and acknowledge that I am entitled to withdraw my consent to the use of photographs and/or video images of any member of my Family, by providing a request in writing along with a photo or photos of the members of my Family to Lakeview.

Governed Under

This Agreement is to be governed by and construed under the laws of the State of Indiana. In the event that any term or provision of this Agreement is found to be unenforceable or void, in whole or in part, the term or provision concerned shall be construed as valid and enforceable to the maximum extent permitted by law, and the balance of this Agreement shall remain in full force and effect. I agree that exclusive venue for any dispute arising between Lakeview and me involving this Agreement shall be in Bartholomew County, Indiana.

Statement of Belief

I hereby affirm that I have read and reviewed the Statement of Belief and all of the policies as provided in Lakeview Ministries website and I discussed its policies with my family. I certify that I consent to and will submit to all of the governing policies of the camp. I understand that the standards of the camp do not tolerate profanity, obscenity in word or action, dishonor to the Holy Trinity and the Word of God, disrespect to the personnel of the camp, or continued disobedience to the established policies of the camp.

Mutual Consent

I understand that the services of the camp are engaged by mutual consent, and that either the camp or I reserve the right to terminate any or all services at any time. I understand that these policies do not contractually bind Lakeview Ministries, and are subject to change without notice by decision of the camp's governing body. Admission to the camp is a privilege, not a right, and that any behavior which is not consistent with the camp's standards could result in the loss of that privilege.

Printed names of all minor children attending the program: _____

Signatures of Adult Attendees:

Printed name: _____ Signature: _____ Date: ___/___/___

Printed name: _____ Signature: _____ Date: ___/___/___

Printed name: _____ Signature: _____ Date: ___/___/___

Printed name: _____ Signature: _____ Date: ___/___/___



Adult/Child Retreat Sample Schedule

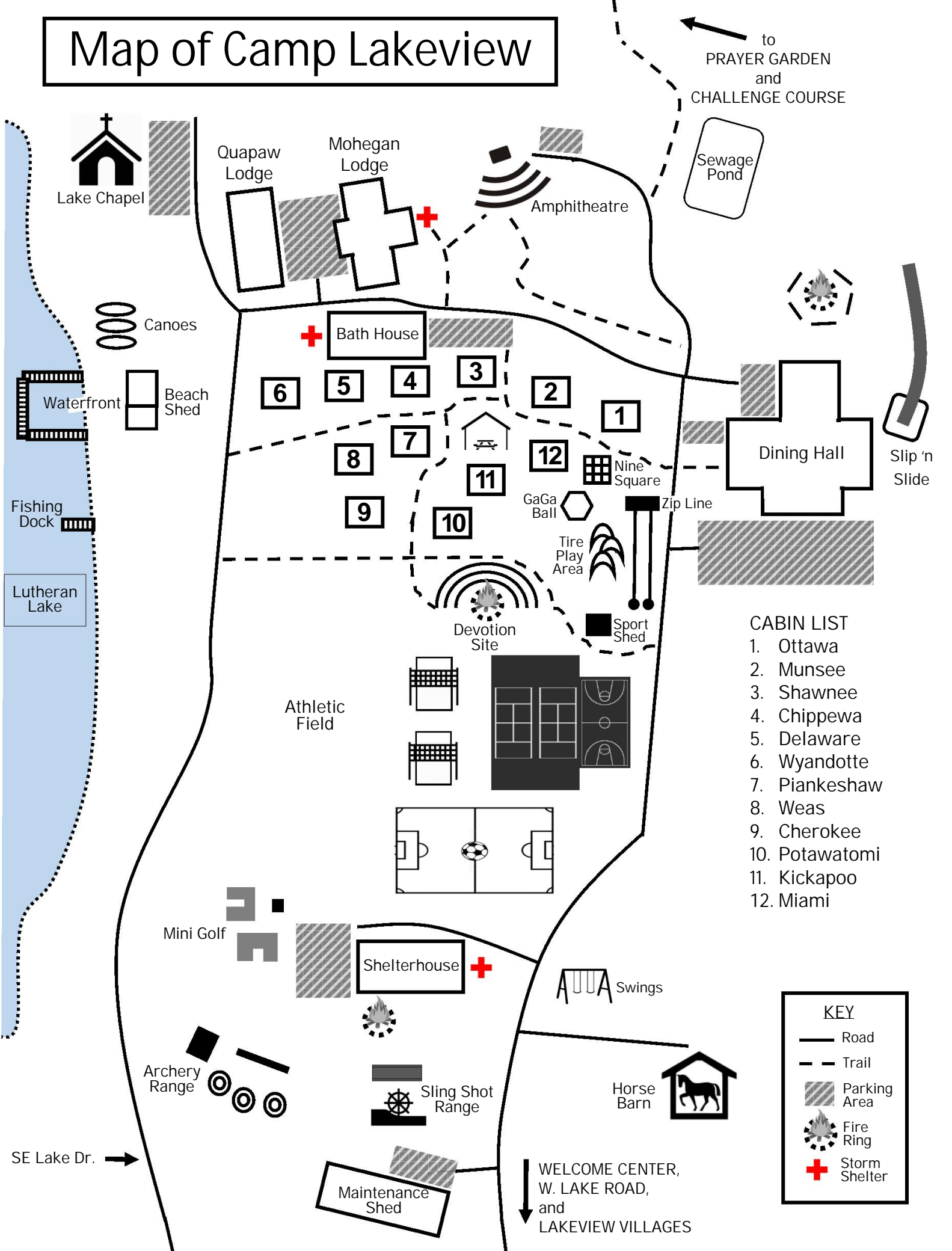
Saturday

9:00	Check-In + Unpack
10:00	Doughnuts and Devotions
10:30	Small Group Games
11:00	Crafts + Slip n Sliding
12:00 p.m.	Lunch
12:45	Dodgeball + Mini Golf
1:45	Horses + Archery
2:45	Creek Stomping
3:45	Free Time
5:45	Supper
7:15	All Camp Game
8:00	Campfire Devotions
8:45	S'mores

Sunday

8:00	Breakfast
8:45	Pack Up / Clean Up
9:30	Closing Worship
10:30	Optional Activities: Village Lake Swimming, Canoeing, Kayaking
12:00	Goodbye!

Map of Camp Lakeview



to PRAYER GARDEN and CHALLENGE COURSE

CABIN LIST

1. Ottawa
2. Munsee
3. Shawnee
4. Chippewa
5. Delaware
6. Wyandotte
7. Piankeshaw
8. Weas
9. Cherokee
10. Potawatomi
11. Kickapoo
12. Miami

KEY

- Road
- Trail
- Parking Area
- Fire Ring
- Storm Shelter

SE Lake Dr. →

↓ WELCOME CENTER, W. LAKE ROAD, and LAKEVIEW VILLAGES

DIRECTIONS TO CAMP

From I-65, take the Ogilville exit (Exit 64). Go WEST on SR 58 for 8 miles. At Waymansville, turn sharp right at the general store onto 930 S (also called "W Lake Rd"). Go 1.5 miles on Lake Rd until you come to the camp entrance.

- Turn RIGHT to go to the Camp Lakeview side of camp
- Turn LEFT to go to the Lakeview Villages side of camp
- The Welcome Center/Main Office is the house on the right by the large Camp Lakeview sign

