



7050 Camp Dogwood Drive
PO Box 39, Sherrills Ford, NC 28673
800-662-7401, www.nclionscampdogwood.com
Sponsored by North Carolina Lions, Inc.
Susan King
Camp Dogwood Director

January 2012

Hello Campers!

The views out our windows are very different in the winter, but we are already thinking of summer here at Camp Dogwood. Whether you are an alumni or new camper we hope you are planning to join us here at camp. Fun and fellowship will abound! New friends are waiting to be found! Your favorite pastimes are in place, and we hope to add more musical performances and guest speakers in 2012. Wireless internet is available for those of you bringing computers. New for summer 2012 we have added a dog run area for service dogs.

We want to make your visit to Camp Dogwood the highlight of your summer, so if you have suggestions or comments regarding how we may serve you better, please call or email me. I would love to speak with you and listen to your ideas. We would especially like your input about recreational activities at camp.

We have made some changes to our application packet and the camp schedule. Please read it carefully, or have it read to you. We do not automatically mail application packets to sighted persons. If you need additional application packets please contact the camp office or you may print the forms from our website at www.nclionscampdogwood.com. Application packets are dated; **the 2012 packets are the only acceptable forms.** It is very important that your **application packet is filled out completely** and returned as soon as possible to ensure your placement at camp. **All incomplete forms will be returned to you and this will delay your placement.** We do not accept faxed forms. Once we process your completed application packet, we will send you a confirmation for the week you are scheduled to attend camp. **If for any reason you are unable to attend your scheduled session of camp, please notify the camp office as soon as possible by calling 1- 800-662-7401 x230 or x229. Please leave a message including your name and telephone number if no one is available to take your call.**

Everyone, whether sighted or visually impaired/blind, who plans to attend Camp Dogwood must complete a 2012 application packet. Sighted individuals will be accepted to accompany the visually impaired or blind as spouse, minor child, caregiver, legal guardian caregiver and companion.

Please contact me if you have any questions/concerns at 800-662-7401 ext. 229 or email me at susan@nclionsinc.org. I look forward to sharing this wonderful summer with you.

Best Regards,
Susan King
Camp Dogwood Director

2012 Adult weeks application packet Out-Of-State

*****Please note: Departure time on Saturdays has been changed to 10:00 am.*****

(This change will help us better prepare for the next group of campers on the following day.)

NORTH CAROLINA LIONS, INC.
CAMP DOGWOOD
RULES AND REGULATIONS FOR SUMMER SESSION CAMPERS 2012
KEEP THESE IMPORTANT DIRECTIONS REGARDING CAMP

1. No alcoholic beverages or illegal drugs may be in a camper's possession or consumed by a camper while on camp premises or any camp transported off-campus trip. Any camper found in violation of this regulation will be sent home.
2. Medications:
 - If you will be turning your medications into the nurse all prescription medications must be in the original pharmacy bottle with the label intact. All other medications should be marked with camper's name and the label intact.

OR

 - If you will be turning your medications into the nurse and are bringing your medications in a pre-filled medicine box, you must complete the Pre-Filled Medication Box Release Form enclosed in your application. This form should be provided upon arrival at camp.
 - Should your medications or doses of your medications change from the medical form list; it is your responsibility to provide us with an updated list prior to or upon your arrival at camp.
 - If a camper should forget to bring their medicine and the camp must purchase it for them, the camper will be billed for the purchase price plus any necessary phone calls relating to the situation.
3. **Should your medical conditions change from the medical form; it is your responsibility to update this information prior to or upon your arrival at camp.**
4. **Should you require a wheelchair, walker, cane, etc., it is necessary for you to bring your own. Camp Dogwood does not furnish these items.**
5. Any camper who refuses medical treatment deemed necessary by the nurse or camp director will have to leave camp immediately.
6. Pets: No pets are allowed. Certified service animals are welcome.
7. Service animals: Owners are responsible for the behavior of their service animals and any damage caused by them. Owners are responsible for cleaning up after their service animal as well. ***** New for 2012, we have installed a dog run behind the Lineberger dorm. Owners are required to remain with their dogs while using the dog run. No unattended dogs are allowed in the dog run. *****
8. Smoking Policy – Camp Dogwood is a non-smoking facility. Smoking is only allowed in marked designated areas.
9. Weapons: Weapons of any type are not permitted on campus, even with permit.
10. Visitors: All visitors are welcome, but must sign in immediately upon arrival at front desk in the Joyce Lodge, and receive a visitors badge to be worn while on property. Visitors are not allowed to participate in camp activities without permission of the Camp Director. Visitors are not permitted in other buildings without permission of the Camp Director.

**NORTH CAROLINA LIONS, INC.
CAMP DOGWOOD**

RULES AND REGULATIONS FOR SUMMER SESSION CAMPERS 2012 continued

11. All minor children, under the age of 18, must be accompanied by their parent or guardian at all times.
12. **If for any reason you are unable to attend your scheduled session of camp, please notify the camp office as soon as possible by calling 1-800-662-7401 ext. 230 or ext. 229. Please leave a message including your name and telephone number if no one is available to take your call. Failure to notify the camp office will result in your next application being processed last.**
13. Any camper who has a legal guardian must attend camp with that legal guardian or that legal guardian must provide a caregiver for the camper during camp. The substitute caregiver must be authorized to make decisions, medical and otherwise, for the camper. Legal guardian caregivers will also need to complete a 2012 application packet. Legal Guardian caregivers must be at least 18 years old.
14. All campers must be able to eat, bathe, dress, and toilet independently, otherwise they must bring a sighted caregiver to assist them. Caregivers will need to complete a 2012 application packet. Caregivers must be at least 18 years old.
15. After receiving orientation on the arrival Sunday, campers must be able to get themselves out of their building should a fire alarm sound. Campers needing assistance may bring a caregiver with them. Caregivers must complete a 2012 application packet. Caregivers must be at least 18 years old.
16. All campers must be able to independently make all of their medical care decisions. If not they must bring a caregiver to fill this role. Caregivers must complete a 2012 application packet. Caregivers must be at least 18 years old.
17. We are applying for a fishing license waiver from the wildlife department for the camp season. If we receive this, you may fish from our property without a license if you desire. However, we recommend if you are legally or totally blind that you obtain a free lifetime license from the North Carolina Wildlife Resources Commission. This form is available online at www.ncwildlife.org/License/documents/FishingLicBlindAppl_090109.pdf or by calling phone # 888-248-6834. Please bring your license with you if you have one.
18. **Acceptance of tips and or gifts from campers or any sighted persons accompanying the visually impaired or blind by staff, counselors, and volunteers is strictly prohibited.**

Guide for Caregivers at Camp Dogwood

This document is designed to give you, as a caregiver, an idea of what is expected as you accompany a camper to Camp Dogwood. Please read over this document, to help insure everyone has the best time possible at camp. If you have any questions, please contact Susan King, Director at Camp Dogwood, at 800-662-7401 ext. 229. It is recommended that you go over this sheet as well as the rules and regulations with the camper you will be assisting.

A caregiver's role here at camp is an important one. In many instances when a camper needs a caregiver, he/she would not be able to come to camp otherwise. **Your role is to ensure that the camper you are accompanying gets the most out of the program. Each caregiver's duties at camp will be different, because each camper is different. As a general rule, your role is to provide whatever assistance your camper needs. Examples are: medication administration, personal care assistance (i.e. toileting, bathing, grooming, dressing, eating), mobility, etc. A legal guardian caregiver's role is the same as a caregiver with the additional responsibility of making any and all decisions, medical and otherwise for their camper. A caregiver should be with their camper at all times. If campers leave Camp Dogwood, caregivers must accompany them (i.e. shopping, bowling, etc.).** Caregivers will be assigned a room with their camper. If you have any questions about your responsibilities, versus counselor/staff responsibilities, please ask us.

Caregivers are not responsible for meal service. This is provided by the staff. A caregiver is not responsible for doing anything for their camper that the housekeeping staff would do for any other campers. For example, changing and laundering of soiled bed linens, trash disposal, or any maintenance of the camper's living quarters.

Many people who attend as caregivers are friends or family of the campers, and find their week here very enjoyable. The opportunity to spend quality one on one time with your friend or family member is a valuable opportunity. The Lions motto is "We Serve". This sentiment is integral to our program and we hope you will take it to heart when you accompany a camper to Camp Dogwood. We hope you will enjoy your stay at with us and return again and again.

NORTH CAROLINA LIONS, INC.
CAMP DOGWOOD
THINGS YOU SHOULD KNOW ABOUT CAMP 2012

CAMP PHONE AND ADDRESS:

The Camp Dogwood business telephone number is (828) 478-2155 (x227 front desk, x230 secretary, x229 director). This number is for campers to call for camp information or emergency calls from family while campers are here. Personal phone calls may be made from the public phone, number (828) 478-9608. You will need to use a calling card or call collect for outgoing calls from this number. Your mailing address at camp is Camp Dogwood, PO Box 39, Sherrills Ford, North Carolina 28673. Our physical address is 7050 Camp Dogwood Dr., Sherrills Ford, North Carolina 28673.

WHEN DO I ARRIVE?

You should plan to arrive between 1:00 p.m. and 5:00 p.m. your first scheduled day. However, if this is not possible, please contact the camp director to make other arrangements *as soon* as possible. **Please note: Camp Dogwood gates will not open until 1:00 p.m. on Sunday.** Registration will be in the Lodge and the staff is not available until registration time. No food is served until the evening meal at 6:00 p.m. If you are traveling via private transportation, please do not arrive before 1:00 p.m. If you travel by public transportation please notify the camp office, prior to your date of arrival, of your arrival time, and be sure to attach an identification tag to your luggage. **If traveling via public transportation (i.e. train or bus) please try to arrive after 1:00 p.m. whenever possible.** This will facilitate your pickup. Transportation to camp for those arriving by public transportation (bus or train to Charlotte, NC) is only provided on Sundays. We will only pick up those campers who arrive by bus/train on that Sunday.

WHEN DO I LEAVE?

If someone is picking you up, they should be at Camp Dogwood no later than 10:00 a.m. on Saturday. Staff are off duty 10:00 am. **If you are traveling by public transportation (i.e. bus or train) please schedule your departure time before 9:00am on Saturday.** We only make one drop off run on into the city Saturday mornings. Departure tickets must be obtained before your arrival. Transportation from camp for those departing by public transportation (bus or train from Charlotte, NC) is only provided on Saturdays. We will only take those campers who are departing by bus/train on that Saturday. No meal is served after breakfast. **Again, let us remind you all staff are off duty at 10:00 a.m.**

WHAT DO I BRING TO CAMP?

1. No linens. All linens are furnished - bedding, towels, washcloths and soap.
2. Clothing: Bring enough clothes for seven days. There are no laundry facilities available for campers. Casual clothes are recommended. However, we have an awards night on Friday and you may wish to have one dressier outfit, but this is optional. Be sure to bring your swimsuit, **water shoes**, and plenty of sunscreen. If you wish to go horseback riding, you will need to bring long pants and closed-toed shoes. **Please Tag All Luggage With Name And Address Of Camper.**
3. Personal items: Any needed toilet articles. Camp Dogwood will not be responsible for the personal property of campers. We can only be responsible for money and valuables checked at the office and left in our supervision.
4. Money: You will not need much money. However, we do have a Snack Bar/Café. Souvenirs include shirts, caps, visors, jewelry, mugs, post cards, etc. Snacks, drinks, ice cream and sandwiches are available as well. Keep in mind the off campus shopping trips when deciding what funds to bring.
5. Bring games, puzzles or sporting equipment if you wish (soccer balls, fishing gear, etc). Musical instruments are very welcome.
6. **No special diets are available at camp. Sugar free desserts are available at mealtimes.**
7. You may wish you bring your laptop computer with you. Wireless Internet access is available in all buildings and dorms.

NORTH CAROLINA LIONS, INC.
CAMP DOGWOOD
THINGS YOU SHOULD KNOW ABOUT CAMP 2012 continued

HOW TO REACH CAMP DOGWOOD:

Camp Dogwood is located about 15 miles from Mooresville, 15 miles from Lincolnton, 30 miles from Hickory and 30 miles from Charlotte.

FROM THE NORTH TO CAMP DOGWOOD:

Take I-77 South to Exit #36, turn right onto Hwy. 150 West and go to Terrell, about 7 miles. At Terrell, turn right onto Sherrills Ford Rd. go approximately 4 miles turn left onto Mt. Pleasant Rd. - Camp Dogwood is approximately 2 miles on your right.

FROM THE EAST TO CAMP DOGWOOD:

Take I-40 West to Statesville, then take I-77 South to Exit #36 and turn right onto Hwy. 150 West. Go to Terrell, about 7 miles, at the light turn right onto Sherrills Ford Rd. go approximately 4 miles and turn left onto Mt. Pleasant Rd. - Camp Dogwood is approximately 2 miles on your right.

FROM THE WEST TO CAMP DOGWOOD:

Take I-40 East to Statesville. In Statesville take I-77 South to Exit #36, turn right onto Hwy. 150 West and go to Terrell, about 7 miles. At Terrell, turn right onto Sherrills Ford Rd. go approximately 4 miles turn left onto Mt. Pleasant Rd. - Camp Dogwood is approximately 2 miles on your right.

FROM CHARLOTTE TO CAMP DOGWOOD: VIA HWY 16:

Take Hwy. 16 North, Turn right onto Hwy.150 East - approximately 2.5 miles to General Store. Turn left onto Mt. Pleasant Rd. - approximately 3 miles; Camp Dogwood is on your left.

FROM CHARLOTTE TO CAMP DOGWOOD: VIA I-77:

Take I-77 North to Exit #36, turn left onto Hwy. 150 West and go to Terrell, about 7 miles. At Terrell, turn right onto Sherrills Ford Rd. go approximately 4 miles. Turn left onto Mt. Pleasant Rd. Camp Dogwood is approximately 2 miles on your right.

NORTH CAROLINA LIONS, INC.
2012 CAMP DOGWOOD SUMMER SCHEDULE

SESSION	DATE	COOKOUT THEME
<u>1</u>	<u>JUNE 3 – JUNE 9</u>	<u>Luau/Beach</u>
<u>2</u>	<u>JUNE 10 – JUNE 16</u>	<u>Western/Cowboys & Cowgirls</u>
<u>3</u>	<u>JUNE 17 – JUNE 23</u>	<u>Peace, Love & Hippies</u>
<u>4</u>	<u>JUNE 24 – JUNE 30</u>	<u>Luau/Beach</u>
<u>5</u>	<u>JULY 1 – JULY 7</u>	<u>Western/Cowboys & Cowgirls</u>
<u>6</u>	<u>JULY 8 – JULY 14</u>	<u>Peace, Love & Hippies</u>
<u>7</u>	<u>JULY 15 – JULY 21</u>	<u>Luau/Beach</u>
<u>8</u>	<u>JULY 22 – JULY 28</u>	<u>Western/Cowboys & Cowgirls</u>
<u>9</u>	<u>JULY 29 – AUGUST 4</u>	<u>Peace, Love & Hippies</u>
<u>10</u>	<u>AUGUST 5 – AUGUST 11</u>	<u>Luau/Beach</u>

***** Youth week has been suspended until further notice. Session 6 is now an adult week and available to reserve. *****

ALL SESSIONS BEGIN ON SUNDAY AFTERNOON AND END ON SATURDAY MORNING.

COST: \$600.00 PER PERSON FOR OUT-OF-STATE BLIND AND VISUALLY IMPAIRED.
\$600.00 PER PERSON FOR SIGHTED PERSON ACCOMPANYING THE BLIND AND VISUALLY IMPAIRED.

NORTH CAROLINA LIONS, INC.
2012 CAMP DOGWOOD SUMMER SESSION APPLICATION

Please type or print legibly using ink. Applications are accepted on a first come, first served basis. Return application, along with medical form, as soon as possible to assure better choice of session and housing. No Session Will Be Assigned Without Medical Form Completed And Signed By Your Doctor. Incomplete applications and medical forms will be returned.

FOR CAMP USE ONLY

Session _____
 1st TC _____
 LC Sent _____
 Travel _____
 Fee _____
 Vision _____
 Confirm _____

NAME AND ADDRESS

LAST	FIRST	INITIAL	CALLED

MAILING ADDRESS	COUNTY

CITY	STATE	ZIP	AREA CODE & PHONE #

BIRTH DATE	AGE	SEX

IF APPLICABLE, EMAIL ADDRESS

Have you ever been convicted of any crime including sex-related or child-abuse related offenses? YES NO
If yes, explain details in full, including dates, details of offense(s) charged, jurisdiction and disposition of case. Use separate sheet of paper if necessary.

VISION: Sighted individuals will be accepted to accompany the visually impaired as spouse, caregiver, legal guardian caregiver, companion or minor child.

VISUALLY IMPAIRED LEGALLY BLIND TOTALLY BLIND TOTALLY SIGHTED

SESSION

Indicate 1st, 2nd, or 3rd choice of sessions you wish to attend. Put session numbers in blanks below. If your 1st choice is the only week you can come, do not fill out the 2nd or 3rd choice.

1st choice	2nd choice	3rd choice

If space is not available in the sessions you choose at this time, would you like to be put on the waiting list? YES NO

LODGING

DO YOU HAVE A ROOMMATE CHOICE? If yes, give name:

DO YOU HAVE A LODGING PREFERENCE? If yes, circle one: Lineberger Udovich White Duplex

This Is Only Your Preference For Lodging. This does not confirm your room.

IN CASE OF EMERGENCY PLEASE CONTACT

NAME

ADDRESS, CITY, ZIP

DAYTIME AREA CODE & PHONE #

EVENING AREA CODE & PHONE #

IF APPLICABLE, CELL PHONE AREA CODE & PHONE #

RELATIONSHIP TO CAMPER

2012 CAMP DOGWOOD SUMMER SESSION APPLICATION **continued**

CAMPER FEE

The camp fee is \$600.00 per person for out-of-state blind and visually impaired. The fee for out-of-state sighted persons accompanying the visually impaired/blind is also \$600.00 per person. Payment in full or confirmation of Lions Club sponsorship must be received by arrival at camp. Make checks payable to: NCLI, and mail to NCLI, PO Box 39, Sherrills Ford, NC 28673.

FEE WILL BE PAID BY ME: YES NO IF "NO", YOU MUST COMPLETE THE FOLLOWING:

FEE WILL BE PAID BY:

Name of Organization

Contact person

Address

Area code & phone #

Have you discussed sponsorship with them: YES NO If "yes", when

OTHER INFORMATION

Will you be bringing a certified service dog? YES NO

Have you attended Camp Dogwood before? YES NO If "yes", when?

Do you use a wheelchair, walker or support cane? YES NO If yes, which one(s)?

Would you prefer a handicapped accessible bathroom? YES NO Do you need a "roll in" shower? YES NO

Do you need a shower chair? YES NO

PERSONAL CARE SKILLS

Are you able to independently take care of your daily needs such as eating, bathing, dressing, and toileting? Yes No

Are you able to independently make all of your medical care decisions? Yes No

With orientation are you able to get yourself out of a building should a fire alarm sound in that building? Yes No

If "no" to any of the above, state the name, address, and phone number of the caregiver who will accompany you to camp. Your caregiver will need to complete a 2012 application packet as well.

Name

Area code & phone number

Address

City

State

Zip Code

LEGAL GUARDIAN INFORMATION

Do you have a legal guardian? YES NO Any camper who has a legal guardian must attend camp with that legal guardian or that legal guardian must provide a caregiver for the camper. This caregiver shall be authorized to make all decisions medical and otherwise for the camper. If "yes" state the name, address, and phone of your guardian.

Name

Address

City

State

Zip Code

Area code & phone number

If applicable, cell phone area code & phone #

2012 CAMP DOGWOOD SUMMER SESSION APPLICATION continued

Camper's Name: _____

FISHING LICENSE INFORMATION

Do you have a valid fishing license issued by the North Carolina Wildlife Resources Commission?

Yes No

WAIVER OF RESPONSIBILITIES

When the North Carolina Lions, Inc. (NCLI) or its agent, Camp Dogwood, accepts this application for a camping term at Camp Dogwood, I, the undersigned do hereby release and discharge the North Carolina Lions, Inc. and any of its agents, affiliates, employees, and servants from any and all claims, liabilities, demands, or rights which I, or any of my friends or relatives, may have against said organization or its agents, affiliates, employees, or servants on account of connecting with or growing out of any injury, accident, loss, or damage or suffering, I or my immediate family may hereafter sustain while on the premises or property owned, leased, or used by the NCLI arising out of acceptance of this application for a camping experience, whether said property be known as Camp Dogwood, Lake Norman, or any other named designation or location.

I further agree to release to Camp Dogwood all rights and privileges to photographs taken of me for use in Camp publicity that is in the proper interest of the Camp.

I have read, or caused to be read to me, the foregoing and do hereby acknowledge that I fully understand each and every part thereof. I have read, or caused to be read to me, the Camp Rules and Regulations and agree to abide by them.

This the _____ Day of _____, 2012.

My signature below certifies that I am legally competent and that I am able personally to care for my daily needs while at camp or that I plan to have a caretaker accompany me to camp.

Signature of Adult Applicant _____
Please have all marks (X) witnessed. Signatures do not need to be witnessed

The signature of the legal guardian below certifies that he/she has read and completed the foregoing application accurately, that he/she has read the Camp Rules and Regulations, and that he/she will either act as caretaker to the camper during camp or provide for a caretaker for the camper during camp, which caretaker is authorized to make decisions, medical and otherwise, for the camper.

Signature of legal guardian _____

RETURN TO: CAMP DOGWOOD, PO BOX 39, SHERRILLS FORD, NC 28673

CAMP DOGWOOD
2012 SUMMER CAMP MEDICAL HISTORY AND CURRENT MEDICATION FORM

THIS FORM IS TO BE **COMPLETED** AND MAILED BACK WITH APPLICATION, **BEFORE YOU CAN BE ACCEPTED TO CAMP.** (PLEASE PRINT LEGIBLY OR TYPE)

CAMPER INFORMATION:

Name	Date of birth	Age
Address		
City	State	Zip code
Day area code & phone #	Evening area code & phone #	
If applicable, name of caretaker at Camp Dogwood		
If applicable, name of legal guardian at Camp Dogwood		

IN CASE OF AN EMERGENCY PLEASE CONTACT:

Name	Relationship
Address	
City	State Zip code
Day area code & phone #	Evening area code & phone #
If applicable, cell phone area code & phone #	

IF INDIVIDUAL ABOVE CAN NOT BE REACHED PLEASE CONTACT

Name	Relationship
Address	
City	State Zip code
Day area code & phone #	Evening area code & phone #
If applicable, cell phone area code & phone #	

INSURANCE:

Hospitalization: Yes <input type="checkbox"/> No <input type="checkbox"/> Company	Policy No.
Accident: Yes <input type="checkbox"/> No <input type="checkbox"/> Company	Policy No.

MEDICINE INFORMATION:

Do you administer your own medicines at home? YES NO

Are you planning to administer your own medicines at camp? YES NO If no and the nurse will not be helping you with your medicines at camp, please specify who will be helping you. _____

Will the nurse be helping you with your medicines at camp? YES NO

Will you be bringing a pre-filled medicine box to camp? YES NO **If Yes AND The Nurse Will Be Assisting You With Your Medicines, You Must Bring A Completed Pre-Filled Medication Box Release Form With You To Camp.**

Will you need any assistance from the nurse at camp? YES NO Please check all that apply.

- Administering daily medications
- Blood sugar checks
- Insulin injections
- Other injections
- Other Please explain:

CAMP DOGWOOD
2012 SUMMER CAMP MEDICAL HISTORY AND CURRENT MEDICATION FORM continued
PLEASE PRINT LEGIBLY

Camper's Name _____

Medical History: (Answer All Numbered Areas, If There Are Any Yes Answers, Fill In All Alphabetical Areas Below It.)

1. **Please Give Date Of Last Tetanus Immunization** (If Known) _____
2. **Diabetes** YES NO
 - a. If Yes, Controlled/Stable? YES NO
 - b. If Yes, Insulin Dependent Diabetic Or Insulin Treated Diabetic YES NO
 - i. If Yes, Is Sliding Scale Insulin Used Yes No If Yes, List Sliding Scale With Medications _____
 - c. If Yes, Blood Sugar Testing Required YES NO
 - i. If Yes, List Frequency _____
 - ii. If Yes, Average Blood Sugar Ranges _____
3. **HIV** YES NO Unknown
4. **Hepatitis** YES NO Unknown
 - a. If Yes, Describe: _____
5. **Hearing Problems** YES NO Which Ear(S)? _____ Hearing Aide YES NO
6. **Alzheimer, Dementia, Senility** YES NO
 - a. If Yes, Is Able To **Independently** Make **All** Medical Care Decisions YES NO
7. **Mental Retardation** YES NO
 - a. If Yes, Is Able To **Independently** Make **All** Medical Care Decisions YES NO
8. **Mental Illness** YES NO
 - a. If Yes, Is Able To **Independently** Make **All** Medical Care Decisions YES NO
 - b. If Yes, Describe Mental Illness: _____
9. **Multiple Sclerosis** YES NO
 - a. If Yes, Date And Description Of Last Exacerbation _____
10. **Seizures** YES NO
 - a. If Yes, Date And Description Of Last Seizure _____
11. **Kidney Disease History** YES NO
 - a. If Yes, Date And Details _____
 - b. If Yes, Kidney Status: Controlled/Stable? YES NO
 - c. If Yes, Dialysis YES NO If Yes, List Frequency _____
12. **Cardio Vascular Disease History** YES NO
 - a. If Yes, Date And Details _____
 - b. CV Status: Controlled/Stable? YES NO
13. **Hypertension/High Blood Pressure** YES NO
 - a. Controlled/Stable? YES NO
14. **Average BP** _____
15. **CVA** YES NO
 - a. If Yes, Date And Details _____

CAMP DOGWOOD
2011 SUMMER CAMP MEDICAL HISTORY AND CURRENT MEDICATION FORM continued
PLEASE PRINT LEGIBLY

16. **Mobility Problems** YES NO
- a. If Yes, Describe _____
- b. Uses Walker YES NO
- c. Uses Wheelchair YES NO
- i. If Yes, Motorized YES NO
- ii. If Yes, Is Patient Restricted To A Wheelchair YES NO
- d. Uses a cane for support or mobility? YES NO
17. **Speech Problems** YES NO
- a. If Yes, Describe _____
18. **Tuberculosis** YES NO Unknown
- a. If Yes, Describe _____
19. **Pulmonary History** YES NO
- a. If Yes, Date And Details _____
- b. Pulmonary Status: Controlled/Stable? YES NO
20. **Uses Oxygen** YES NO If Yes, Patient Is Responsible For Bringing All Needed Supplies.
- a. If Yes, List Amount, Route, & Mask or Nasal _____
21. **Uses CPAP** YES NO Will Patient Bring CPAP To Camp? YES NO
22. **Uses Nebulizer** YES NO If Yes, List Order With Medications _____

OTHER: _____

Camp Dogwood is a recreational/vacation facility for the blind and visually impaired. Campers have the opportunity, but are not required, to participate in activities such as tubing, water skiing, boat riding, swimming, bowling, Putt-Putt golf, shopping trips and art and crafts. Campers must be able to provide their own personal care skills such as eating, bathing, dressing and toileting or bring a caretaker to assist them with these needs. Campers ambulate from their dormitories to the dining hall/medication room up to a distance of 600 feet with a 12% grade in one direction. No special diets are available at camp. Our counselor to camper ratio is 1 to 6. There is one nurse per 88 campers on site. The nurse is available to assist with routine medications and emergencies. **CAMP DOGWOOD IS NOT A NURSING OR CARE FACILITY.**

23. **As Indicated Above, This Patient's Medical Status Is Stable And Controlled. In My Opinion This Patient Is Able To Attend The Facility Described Above.** YES NO

24. **Physician's signature:** _____ **Date:** _____

Please list additional comments as needed (Please Print): _____

If you have any questions about this form please contact Susan King, Camp Dogwood Director, 800-662-7401 ext. 229 or susan@nclionsinc.org or Camp Dogwood, PO Box 39, Sherrills Ford, NC 28673.

2012 PRE-FILLED MEDICATION BOX RELEASE FORM

Only those campers that the **camp nurse will be assisting with medications AND who are bringing pre-filled medication boxes must complete the following form.** This form should be **provided upon arrival at camp.**
PLEASE PRINT LEGIBLY

Camper Name _____

The above camper's medication box was prepared by _____,
(Print full name)

Relationship to camper: _____, **OR**

_____ at _____ facility where the camper resides.
(Print Job Title) (Print Name of Facility)

The person listed above who prepared the medication box is responsible for accurately dispensing all medications.

The camp nurse, Camp Dogwood, and NCLI Inc. are not responsible for the contents of the pre-filled medication box.

The camp nurse is responsible for facilitating the camper's self-administration of pre-prepared medications at scheduled times indicated by the camper or their legal guardian.

The following is a list of the medications contained in the pre-filled medication box. **Please Print Legibly**

Medication & Strength	Dose	Frequency	Prescriber name and phone number OR pharmacy name and phone number

Pre-filled medication box preparer signature _____ Date _____

Camper's signature _____ Date _____

Legal guardian signature if applicable _____ Date _____

NORTH CAROLINA LIONS, INC. / Camp Dogwood

2012 TRANSPORTATION INFORMATION

Camper Name: _____

Area Code & Phone #: _____ Session #: _____

Please Fill Out #1, #2, #3 Or #4 Below*

1. I will be transported to and from Camp as part of an organized group of campers. Which group?

2. I will be getting a ride to and from Camp via a friend _____, relative _____, Social Worker _____, or Lion _____.
****** Please provide the name(s) and CELL phone number(s) of your driver(s):**

3. I will be traveling to and from Camp via public bus transportation. My bus will arrive at Charlotte at approximately _____ on Sunday afternoon. The bus will be coming from _____. My bus will depart for home at _____ on Saturday morning. (Note: **You must ride a bus coming to Charlotte. No other pickup will be made.**)
4. I will be traveling to and from Camp via public train transportation. My train will arrive at Charlotte at approximately _____ on Sunday afternoon. The train will be coming from _____. My train will depart for home at _____ on Saturday morning. (Note: **You must ride a train coming to Charlotte. No other pickup will be made.**)

******If This Information Changes, It Is Your Responsibility To Notify Us! We Will Not Make Extra Trips To The Bus Or Train Station******

SUNDAY BUS & TRAIN ARRIVALS MUST BE SCHEDULED FOR SUNDAY AFTERNOONS. IF YOU NEED TO ARRIVE EARLIER OR LATER PLEASE CONTACT THE CAMP DIRECTOR. Transportation to camp for campers arriving by bus or train to Charlotte, NC is only provided on Sundays. If you arrive on another day (i.e. Monday or Tuesday) you will need to make your own transport arrangements.

SATURDAY BUS AND TRAIN DEPARTURES MUST BE SCHEDULED FOR 9AM OR EARLIER. Transportation from camp for campers departing by bus or train From Charlotte, NC is only provided on Saturdays. We only make ONE early morning run. Departure tickets must be obtained before your arrival.

Please Be Sure To Tag All Luggage With The Name And Address Of The Camper.

******Camp Dogwood Gates Will Not Open Until 1:00 P.M. On Sunday!**

******NEW!!! All Campers Must Be Picked Up Before 10:00 A.M. On Saturday!**