

# 21<sup>st</sup> Annual Regional Teen Institute June 14 - June 17, 2017

**PARENTS PLEASE READ THE ENTIRE APPLICATION FOR DETAILS AND SIGNATURES ARE NEEDED IN SEVERAL PLACES. Keep pages 5 & 6!**

## Application Form (Please print)

Name: \_\_\_\_\_ Female \_\_\_\_\_ Male \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home phone \_\_\_\_\_ Email address \_\_\_\_\_  
 Name of School \_\_\_\_\_ Grade during 2016-2017 school year \_\_\_\_\_ T-Shirt size \_\_\_\_\_

<u>Applying to be:</u>	<u>Fee</u>	<u>Need Scholarship</u>	<u>APPLICATION DUE</u>
<input type="checkbox"/> <b>Teen Participant</b> (6 <sup>th</sup> , 7 <sup>th</sup> or 8 <sup>th</sup> grade student in 2016-2017) in Boone, Clay, Kanawha or Putnam County)	<b>\$25.00</b>	____yes _____no	<b>JUNE, 10, 2017</b>
<input type="checkbox"/> <b>Youth Staff</b> (Previous TI participant & current high school student)	<b>\$25.00</b>	____yes _____no	<b>APRIL 1, 2017</b>
<input type="checkbox"/> <b>Adult Staff</b> (Thank you!)	<b>None</b>		<b>March 28<sup>th</sup>, 2017</b>

Method of Payment: Check or money order (payable to United Way of Central WV with "Teen Institute" written on the memo line.) Scholarships are available. Just check it on application and it will be taken care of, no need to call about it. No one is turned away.

**Cell phones will be allowed for 30 min. each afternoon.** If parents need to talk to their child at other times an emergency number will be given to you at registration. If you need to talk to your parents, you can use one of the adult's phones. This prevents a lot of distractions and other problems. **No photos are to be taken and uploaded on-line during camp. It would also be nice if you checked with those in your photos for consent to post the pictures, after camp.**

### PHOTO CONSENT

I give the United Way of Central WV permission to use photos, videos taken during the Regional Teen Institute 2015 that include my image. I understand that the photos may be used in both printed and electronic materials. I understand that photos usually group ones, may be posted on the Teen Institute website and/or United Way of Central WV website or Regional Teen Institute Face Book page.

Signature of Applicant: \_\_\_\_\_  
 Date: \_\_\_\_\_

I am the parent/legal guardian of the individual named above. I have read this release and agree to its terms.

Parent/Legal Guardian's Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

To view a video show from previous Regional Teen Institutes go to [www.youthmakeadifference.com](http://www.youthmakeadifference.com)

### Cell Phone Pilot Policy 2017

Cell phones may be brought to TI. Conditions for having a phone at TI: 1.) It is turned into a designated Adult Staff Member and placed in a baggie with your name and picture on it and locked up. 2.) The first 30 minutes of afternoon free time you may have your phone. 3.) You will use it in the Conference Center, the porch beside the kitchen, or dining room only. 4.) At the end of 30 min. phones must be returned, if not returned on time or not used in designated area - phone will be confiscated for the rest of TI. If you bring a phone to camp and do not turn it in, it will be confiscated. If you have questions contact Margo 304-541-5639.

**No photos are to be taken and uploaded on-line during camp. It would also be nice if you checked with those in your photos for consent to post the pictures, after camp.**

**BRING AN ALARM CLOCK AND A CAMERA WITH OUT A PHONE ATTACHED. (DISAPOSIBLES ARE GOOD.)**

I understand that iPads and other similar devices are not permitted at all. I understand the pilot cell phone policy.

Signature of Applicant \_\_\_\_\_  
 I understand the pilot cell phone policy. My child will follow the policy.  
 Signature of Parent or Guardian \_\_\_\_\_

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

Mail Application To and/or For More Information Contact Margo Friend  
 One United Way Square Charleston, WV 25301 mfriend@unitedwaycwgw.org 304-340-3622

**NEW POLICY!!**

**Applications will not be accepted **without** a reference and the reasons why you want to be Youth Staff or a Camper at bottom of the page.**

**A statement of reference must be provided by an individual in your community. Someone who can comment on your character and leadership abilities, which demonstrate your commitment to prevention activities. Examples of individuals include but are not limited to are teachers, principals, counselors, prevention specialists, and other leaders of school, church or community based organizations. (Not a relative)**

Printed Name of Reference: _____
Relationship to Applicant: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone Number: _____
Brief Statement of Reference: _____
_____
_____
Type of Prevention activity the student has been involved in, at your school? _____
_____
Signature of Reference: _____ Date: _____

**Youth and Youth Staff Applicant's Statement**

Please write a short paragraph explaining why you want to participate in Teen Institute.

**Those who are applying for Youth Staff MUST LIST prevention activities in the past year and what skills and talents you would bring to the youth staff if selected.**

## Medical information and Release

Applicant Name: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone \_\_\_\_\_

Insurance Company \_\_\_\_\_

Policy Group Number \_\_\_\_\_

Allergies and /or Health Problems \_\_\_\_\_

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Medications: All medications, including over the counter products, must be checked in at registration. Medications must be in their original prescription bottle or sales packaging. The Nurse will oversee the administration of medications.

<u>Name of Medication (s)</u>	<u>Dosage</u>	<u>Time Administered</u>

I hereby release the United Way of Central WV from all liability resulting from accidental injuries sustained by transportation to a medical facility provided for and /or medical treatment administered to myself while participating in the Regional Teen Institute at Rippling Waters, Romance, WV. I have read and agreed to follow the medication policy as stated above.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

**IF THE APPLICANT IS UNDER 18:** I am the parent/legal guardian of the applicant. I have read the medical release and medication policy and agree to its terms.

Parent/Legal Guardian's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Relationship To Applicant \_\_\_\_\_

### Emergency Contact Information

Contact Name: \_\_\_\_\_

Contact's Relationship to Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

\*Alternative Contact Name: \_\_\_\_\_

Contact's Relationship to Applicant: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**\*ALL APPLICANTS MUST PROVIDE AN ALTERNATIVE CONTACT, who can be responsible for the Applicant and is aware of the Contact's whereabouts.**

## Medication and First Aid Products Permission

I give permission for these products as marked, to be given to my child, \_\_\_\_\_ by the nurse or medical team member, if needed.

Children's Tylenol	Yes _____	No _____
Adult Tylenol	Yes _____	No _____
Aleve	Yes _____	No _____
Excedrin	Yes _____	No _____
Ibuprofen	Yes _____	No _____
Benadryl (pill or liquid)	Yes _____	No _____
Benadryl Cream	Yes _____	No _____
Bee Sting relief medication	Yes _____	No _____
<b><u>(Please have your child Bring an epic-pen if they are severely allergic to bees, etc.!)</u></b>		
Antibiotic ointment	Yes _____	No _____
Alcohol pad or swabs	Yes _____	No _____
Swabs	Yes _____	No _____
Baby powder	Yes _____	No _____
Eye drops/wash	Yes _____	No _____
Cough drops	Yes _____	No _____
Baby wipes	Yes _____	No _____
Hand sanitizer	Yes _____	No _____
Bactine Spray	Yes _____	No _____
Aloe Vera Gel (for sunburns)	Yes _____	No _____
Hand lotion	Yes _____	No _____
Pepto Bismol	Yes _____	No _____
Tums/Rolaids	Yes _____	No _____
Burn Cream	Yes _____	No _____
Neosporin Cream	Yes _____	No _____
Calamine Lotion (for poison ivy)	Yes _____	No _____
Bug repellent (all kinds)	Yes _____	No _____
Sun screen	Yes _____	No _____
Motrin	Yes _____	No _____
Hydrocortisone Cream	Yes _____	No _____

For Girls:

Tampons (all brands)	Yes _____	No _____
Feminine pads (all brands)	Yes _____	No _____

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Date

## THINGS TO BRING

(Please keep this page for your information)

**Regional Teen Institute: June 14-June 17, 2017**  
**Rippling Waters, Romance, WV**

### A GREAT ATTITUDE!!!

Appropriate, comfortable clothing\*

Toothpaste & Toothbrush	<b>Pajamas &amp; Robe</b>	<b>Swim suit and towel</b>
<b>Towels, Wash Cloth, soap</b>	Slippers	Cosmetics (if needed)
<b>Blanket or Sleeping Bag</b>	<b>Pillow</b>	<b>Twin Bed Sheets</b>
Flashlight (batteries)	Bug Spray	Blow Dryer (if needed)
Rain Gear (you will need it!)	<b>SHOWER SHOES</b>	Extension cord (for hair dryer)
<b>Sun screen</b>	(Flip flops)	<b>\$10.00 cash or less</b>

extra pair of walking shoes & good socks since there will be a lot of walking.  
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### \*Appropriate clothing guidelines:

1. **ALL Shirts**, with straps, must have straps at least an inch wide, guys and gals.
2. **All undergarments**, for guys and gals, will be concealed. (Not visible!)
3. **All clothing**, with messages, must convey positive messages.
4. **Footwear is to be worn at all times.**
5. **Something for all temperatures**-it can get cool in the evenings.
6. **Shorts must be as long as your middle finger when arm is held to your side and not show indentations. Pants & jeans must be worn at your waist.** (If not they will be duct taped! LOL!)

In other words, as we say, we don't want to see the "Bs".

Belly, Breasts and Buttocks must be covered by both guys and gals.

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### THINGS NOT TO BRING

\* **Large expensive Head Phones** \* (bring small inexpensive ear buds)

\* Expensive iPods \* Pagers \* Alcohol, Tobacco or Other Drugs \* **Large** Amounts of Money \*

\* Expensive Cameras \* I Pads, etc. \*

(We suggest a disposable camera instead of expensive digital cameras)

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NOTE: ANY PRESCRIPTION MEDICATION MUST BE TURNED IN AT REGISTRATION TIME WITH WRITTEN INSTRUCTIONS FROM THE PARENT AND WILL BE KEPT BY THE CAMP HEALTH SERVICES TEAM FOR PROPER SUPERVISION AND DISPENSING.

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United Way of Central WV and Rippling Waters Campground are NOT responsible for any lost or stolen items.

***In other words, don't bring valuables you might lose!!!***

# Parents Please keep this sheet for your information

Dear TI Parents and Participants!

Welcome in advance to the 21st Annual Regional Teen Institute 2017!

**1. Drop off between 8:00 am and 9:30 am. Wednesday. Pick up is 12:30 on Saturday!**

2. Read the *Things to Bring* list and make sure you have what you will need to enjoy the time at Rippling Waters. Please pay attention to the "what to wear" section, especially about the wearing short shorts!

**Shorts must be as long as one's middle finger when one's arm is held to side. If not you will be sent to change. No one wants to see someone's buttocks, regardless of how good looking they might be!!**

3. We are following the *Kanawha County School Medication Policy* again this year. We have a Registered Nurse, on the staff, who will handle medication. If you take any medication at all, it must be prescription, in the original bottle. We must have the medical form signed and sent in or brought with you. We have a form to grant permission to give some over the counter drugs, etc. to your child, to cut down on the number of calls regarding such matters. Please read it and complete it carefully. **Remember: No signed Forms, no TI for you!!**

4. **We will be talking about teen pregnancy prevention, substance abuse prevention, etc., with the kids and giving all the facts.**

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**Parents:** Some of you may be concerned about the new cell phone pilot policy. We instituted the no cell phone policy because in the past, we had youth phoning friends and deciding to leave without talking to any adult staff members or their parents, ahead of time. We were able to stop them from leaving and talked with their parents. It is an issue of safety that we take seriously. Your child will not be allowed to leave camp without your permission. We are also concerned that inappropriate photos could be taken accidentally with camera phones and be on the internet before we know it. They may take a picture of a friend in the cabin and not notice until picture is viewed that someone was changing clothes in the background. This is why the phones may only be used in and around the conference center. We have realized that some campers may need their phone so they will have a chance to have it each day for 30 minutes, if the conditions on first page of this application are met.

If you need to talk with your child you can call my cell **304-541-5639** and I will make sure your child calls you. If they need to call you, they can talk to one of the adult staff and use one of their phones. If they are homesick they will talk with our counselor and then call you. (We want to know if someone is making them feel unwelcome) We do have trained staff members who will keep your child safe and if there is a problem we will contact you or the emergency contact person you have given us. This policy is new and we want it to work well, so we hope you will cooperate with us. **Please do not encourage them to sneak a phone in, because they will get caught and the phone will be taken.**  
**PLEASE PAY ATTENTION TO THE DRESS CODE AND MAKE SURE THE SHORTS ARE LONG ENOUGH, AND WEARING A LONG T-SHIRT OVER ONE'S SHORTS IS NOT GOOD ENOUGH!**

Sincerely,



**DIRECTIONS: From Charleston:**

1. Merge onto I-77 North in Charleston, WV.
  2. Follow I-77 to exit 116, Haines Branch Road.
  3. Turn Right at the bottom of ramp.
  4. Immediate Left at the stop sign onto RT. 21 North.
  5. RT. 21 North for 1 mile.
  6. Turn Right, just after crossing the bridge, onto Middle Fork Road.
  7. Campground is 3 miles; office driveway is on the Left after the small pond.
  8. Go past pond and office up a little hill, turn into the camp at top of hill through the yellow gate posts. Proceed to the first building for registration and information.
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