

Submit the registration form at:
615 Stedman Street
Ketchikan, Alaska 99901
Telephone: (907) 228-9365 Fax: (800) 718-3201
By email to: lschrack@kictribe.org



Ketchikan Indian Community's 2018 Culture Camp Monday June 18th – Sunday June 24rd at Orton Ranch, Naha

<u>Please complete a separate registration form for each participant.</u>

Come for a six-day camping adventure at Naha's Orton Ranch. Sessions will include traditional harvesting and food preparation, plant identification, hiking, canoeing, weaving, language, sewing & beading, traditional songs & dance, storytelling and more! Meals & supplies provided.

Students will need to bring the following:

- Backpack
- Three changes of clothes
- 6 pairs of underwear
- 6 pairs of socks
- Boots
- Rain coat
- Sweatshirt

- Bathing suit
- Towel
- Sleeping bag
- Toothbrush & toothpaste
- Hairbrush or comb
- 2 Plastic grocery bags

Optional Items: Small camp pillow, rain gear, flashlight

ITEMS NOT ALLOWED AT CAMP:

- Any electronics including, iPods, smart phones, MP3 players, handheld video game devices
- Drugs, alcohol, tobacco, prescription medication without a current prescription in the name of the child
- Money or other valuables

Are you	interested i	n giving KIC	feedback	on ideas t	for futur	e Culture (Camps?
Yes	No						

REGISTRATION DUE JUNE 1ST by Noon

Space is Limited! Tribal members will be given first priority

Late registrations will be considered on a first come, first serve basis



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Student Name:	Age:	
Traditional name:	Date of Birth:	
KIC Member: Yes No Enrollm	ent #: Saxman Resident:	١c
Parent/Guardian:		
Address:		
Home Phone:	Cell Phone:	
Work Phone:	E-mail:	
Siblings/Relatives also attending:		
Moiety/Phratry (circle one): Raven	Eagle Killer whale Wolf Unsure	
Language Preference (circle one): T	lingit Haida Tsimshian Undecided No Preference	
Clan:	Crests:	_
<u>=</u>	Small Medium Large X-Large Small Medium Large X-Large	
·	rs of person(s) who can assume responsibility for the child if ely in an emergency and/or are authorized to take the child from e.	I
NAME:	NAME:	
Address:	Address:	
Phone:	Phone:	



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ALLERGIES, FOOD RESTRICTIONS, MEDICATION, & PHYSICAL LIMITATIONS

food and drugs and physical limitation	cerns, needs, or limitations that staff sh s or medication to be given during prog our child a medical release form will be ediation without staff help.	gram hours. If a staff
Co	nsent & Liability Waiver	
over on and off-trail terrain, travel to a road system or emergency medical s and facilitate transportation and partic	I include being transported by car, bus, and accommodations in a remote locati ervices. KIC will provide food, general scipation in planned activities. Participaty hazardous activities and conditions on hiking, wildlife).	ion without ready access to supervision and guidance, ing youth may be exposed
release KIC from all liability resulting for Camp. I further agree to hold KIC harm	oll hazards of allowing my child to partice from any injury, illness, and/or death the foless from any loss, damage, or legal lia lated to my child's participation in Cultu	at may occur during Culture bility associated with
I give permission for my child (print na and participate in KIC's Culture Camp, staff and volunteers for the Culture Ca	and to be transported, supervised, and	to attend given provisions by KIC
(Signature-Parent/Guardian)	Printed name Parent/Guardian	 Date



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Media Release Consent

I do hereby consent and agree that Ketchikan Indian Community, its officers, agents, and employees have the right to take photographs, videotape, or digital recordings of my child,, to use in any and all media exclusively for the purpose of KIC							
media (examples: website, newsletter, flyers, etc.). I further consent that my child's name and identity may be revealed therein or by descriptive text or commentary. I waive any rights, claims, or interest I may have to control the use of my child's identity or likeness in whatever media is used. I understand there will be no financial or other remuneration for use of my child's identity or likeness by KIC media.							
Parent/Guardian Name:							
Parent/Guardian Signature:	Date:						
Statement of Ur	adorstanding						
Statement of Ur	iderstanding						
Travel to Culture Camp includes a 45-minute boat non-boardwalk remote trail. There is limited space bodied and capable of walking for long periods, not a small load. Participants should bring only what thike in potentially rainy conditions.	e for personal items, and youth must be able- ovigating inclines, mild climbing while carrying						
I further understand that KIC will institute and enf throughout Culture Camp that my child will be exp understanding and following these rules prior to a coordinate the pick-up of my child should it be det my child to stay at Culture Camp if persistent rule creates a disturbance, distraction, or unsafe condi	pected to abide by. I agree to assist my child in ttending Culture Camp, and further agree to termined that it is not safe or permissible for violations or behavior issues should arise that						
Parent/Guardian Name:							
Parent/Guardian Signature:	Date:						



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Tentative Schedule

Monday, June 18th – Leave the Dock by 10am, Arrive to Camp by 12:30pm

Tuesday-Saturday, June 19-23nd

7am Wake up

8am Breakfast

9am Morning Sessions

• Language Sessions

Harvesting/Food Prep

Mini Fish Camp

12pm Lunch

1:30pm Afternoon Sessions

Hikes

Canoeing

Swimming

3pm Snack

5pm Dinner

6pm Free time - Sewing, beading, weaving, games, fishing

8pm Campfire, Storytelling & Songs

9pm To Cabins, Ready for Bed

10pm Lights out

Sunday, June 24th – Depart from Camp 10am, Back to the Dock by 1pm

^{*}Final schedule and information letter to be sent to parents upon acceptance to camp*