



EASTERN 4-H CENTER'S OPERATION: 4-HEROES

SEPTEMBER 3-5, 2010

Purpose: The Purpose of Operation 4-Heroes is to give wounded combat veterans and their immediate family members an opportunity to reconnect through challenging activities and relaxing recreation.

Eligibility: Eligible participants are any members of the armed forces who were injured while on active duty. These participants are also invited to bring all members of their immediate family (spouse & children). In the instance that there are no children in the family, a spouse or, if needed, a primary caregiver may accompany the participant.

Activities: Through challenging activities such as archery, rock climbing, crafts & woodworking, and target clay shooting, families will develop new skills with each other while focusing on the abilities of everyone.

About the Eastern 4-H Center: The Eastern 4-H Center is located on the Albemarle Sound near Columbia, NC. The Center is a year-round facility that specializes in conferences, retreats, educational programming and summer camp. This fully accessible site maintains accreditation from the American Camp Association, and is owned and operated by North Carolina State University. Educational programming consists of wetland and forest ecology, corporate and youth teambuilding & challenge course, rock climbing, canoeing, kayaking, and target sports.

Family Surname: _____

List all family members and their ages that will attend Camp:

So that we can better design our program, please list any physical disabilities within your family:

Please list any prosthetics, adaptive, assistive, or medical device(s) that are used by members of your family. Examples include wheelchairs, hearing aids, and canes:

So that we can better design our program, please list any mental or cognitive impairment(s) within your family. Examples may include ADHD and Post-Traumatic Stress Disorder:

We will be offering a “Couple’s Night”, on the last night of Operation:4-Heroes. This will include Dinner for Two from our food service department and a movie shown in our Conference Room. Camp Counselors will have a fun evening planned for your children, so that couples have the opportunity to relax. Will you be participating in “Couple’s Night”? YES NO

Youth will be participating in a barbecue on this evening. After the meal is finished, youth will experience an Astronomy activity and a campfire. How many children can we plan for on that evening? _____

Attached to this document are all registration forms that will be needed for the entire family. Each family member should have individual forms. For example, if there a three family members attending camp, there should be three different sets of forms.

Registration and availability will be accepted on a “first-come, first-served” basis. Registration is not complete, nor is a spot guaranteed until all forms are received by the Center. The Eastern 4-H Center reserves the right to assign and move rooming location according to facility demands.

For more information on Operation: 4-Heroes, please contact the Eastern 4-H Center at 252.797.4800.

By **August 30**, mail registration forms to:

Operation:4-Heroes/Eastern 4-H

100 N Clover Way, Columbia, NC 27925

Fax forms to 252.797.4888

ATTACHMENTS: Eastern 4-H Spring and Fall Participant Health Form, Spring and Fall Participant Program Participation Form, Sample Schedule

Sample Schedule

Friday

4:00-5:00 pm / Check-in & Move-in

5:30-6:00 pm / Formal Welcome

6:00-6:45 pm / Dinner

7:30-9:00 pm / Icebreakers and Family Scavenger Hunt (Joseph)

9:00-10:00 pm / Snacks & return to cabins

Saturday

7:45 am / Flag Raising

8:00-8:45 / Breakfast

9:00-10:15 am / Canoeing (Group 1)Pool(Group 2), Team initiatives (Group 3), Clay Target shooting (Sign-up option)

10:30-11:45 am / Canoeing (Group 2)Pool (Group 3), Team initiatives (Group 1), Clay Target (Sign-up option)

12:00-12:45 pm / Lunch

12:50-2:00 pm / Rest Period/Family Time

2:15-2:45 pm / Camp Store

3:00-5:00 pm / Archery (Group 3)Ecology (Group 1), Team initiatives (Group 2),Rock Climbing (Sign-up Option)

5:30 pm / Youth Barbecue and Cookout, Adult Date night!

6:00 pm / Adult meal served

6:30 - 9:00 pm / Youth Pool Party, Campfire Story telling!

6:30 – 9:00 pm / Adult date night continues followed by Special Movie

9:00 / pm Back to Cabins

Sunday

7:45 am / Flag Raising

8:00-8:45 am / Breakfast

9:00-10:15 am / Family Craft

10:30 – 11:45 am / Free Choice Sign-up Clay Target, Archery, Rock Climbing, Relaxation

12:00 pm / Lunch and Awards Reception

1:00 pm Pack-up and head home!

ALLERGIES: List all known

Medication allergies

Describe reaction and management of the reaction.

Food allergies

Other allergies

DIETARY RESTRICTIONS

PHYSICAL RESTRICTIONS

Use this space to provide any additional information about the participant's behavior and physical, emotional, or mental health about which the camp should be aware.

General Questions (Explain "yes" answers.)

Has/does the participant:

Yes No

Yes No

- 1. Had any recent injury, illness or infectious disease?
- 2. Have a chronic or recurring illness/condition?
- 3. Ever been hospitalized?
- 4. Ever had surgery?
- 5. Have frequent headaches?
- 6. Ever had a head injury?
- 7. Ever been knocked unconscious?
- 8. Wear glasses, contacts or protective eye wear?
- 9. Ever had frequent ear infections?
- 10. Ever been dizzy/passed out during or after exercise?
- 11. Ever had seizures
- 12. Ever had chest pain during or after exercise?

- 13. Ever had high blood pressure?
- 14. Ever been diagnosed with a heart murmur?
- 15. Ever had back problems?
- 16. Ever had joint problems?
- 17. Have any skin problems?
- 18. Have diabetes?
- 19. Have asthma?
- 20. Had mononucleosis in the past 12 months?
- 21. Have problems sleepwalking?
- 22. Have a history of bed wetting?
- 23. Ever had an eating disorder?

Please explain "yes" answers, noting the number of the questions.

Screening Record: For camp use only	Date _____ Time _____
Meds received _____	
Updates/additions to Health History _____	
Current Health needs identified _____	
Screened by _____	

