

**BETSY-JEFF PENN 4-H EDUCATIONAL CENTER  
REIDSVILLE, NORTH CAROLINA**

# ***SOARING THRU SPACES PROGRAM***



## ***PLANNING GUIDE***

DAY GROUP  
REVISED OCT2015

**PART ONE: Whatever you do, read this first!**  
**PART TWO: Appendix of Necessary Forms**  
**PART THREE: Frequently Asked Questions**

## **PART ONE:**

**Whatever you do, Read This First!!**



**IF YOU HAVE RECEIVED THIS PACKET, YOU HAVE MADE THE WISE DECISION TO BRING A GROUP TO BETSY-JEFF PENN'S SOARING THRU SPACES PROGRAM... SO WHAT'S NEXT?**

1. **Secure your date** - In order to fully secure your dates, the Session Scheduling Worksheet (Included in email) must be signed and returned, along with the deposit, within 30 days of the receipt of this planning guide. The signed Statement of Responsibility should also be returned. In case of cancellation, this deposit will be refunded in full, assuming we are notified of the cancellation at least 60 days prior to your scheduled trip.
2. **Notify parents & students** - The communication that is made with parents and/or guardians prior to your trip is essential to the success of your trip. Parents need to be warned of any costs that may be passed on to them. Potential donors need to be sought to cover the costs of any participants that can't afford the fees. Parental Agreement & Consent Forms need to be signed. Transportation has to be arranged. Potential chaperons must be found.
3. **Collect Forms** - In order for students to participate in our program, a completed copy of the Parental Agreement & Consent Form must be brought to camp and will be collected by camp staff upon arrival. This allows students to be treated in an efficient manner should medical attention be needed. Adult participants are required to fill out the Adult Agreement and Consent Form
4. **Finalize Details** - Look to the Program Planning Form to find the information that we will need to know in order to fully prepare for your visit. Gather final information, total participant numbers, etc. and mail or fax this form to the Education Director at least 2 weeks prior to your trip. This information can also be emailed. You can reach the Program Director at (336) 349 – 9445 or by email at [kyle\\_shillinglaw@ncsu.edu](mailto:kyle_shillinglaw@ncsu.edu) to discuss details, ask questions, etc.
5. **Come prepared** - Arrive at Penn with signed & completed Parental Agreement & Consent Forms as well as an accurate ES 237 Form to be given to Penn staff for billing purposes. Students should already be broken into and aware of their activity groups. We will meet you in the parking area where Penn instructors will take their activity group directly to the restrooms and begin the day's program.

# THE SCHEDULE

The schedule for one-day trips is flexible, dependent on the group. Arrival can be as early as 8:30am and departure as late as 5:00pm. Each group's schedule will be designed around their determined arrival and departure times.

## TENTATIVE ONE DAY SCHEDULE

8:30-9:00am	Arrival at Penn – Break into activity groups - Begin programming
9:00 – 12:00	Ground Initiatives and Team Challenge Course activities
12:00 – 12:30	Lunch Break – Bag lunches in Picnic Shelter
12:30 – 4:30	High Ropes Course or Continued Team Challenge Course
4:30 – 4:50	Final processing and debrief
5:00	Departure from camp

\*1 Day schedules are dependent on group arrival and departure times. Groups that participate on the High Ropes Course normally begin the High Ropes after lunch. Groups not participating on the High Ropes Course will continue with more challenging Ground Initiatives and Team Challenge Course elements in the afternoon.

\*\*Meals can be provided in the Dining Hall for interested Groups. There is an additional charge and a 25 student minimum. Camp provided meals normally require a longer lunch break depending upon the number of students in the group.

\*\*\*Environmental Education classes may possibly be mixed into a Soaring Thru Spaces experience. Canoeing, Climbing Wall, or a Nature Hike can be included in various parts of the program depending on group size and schedule. Contact the Education Director for more details about any of these options. We are happy and willing to work with your group to create a 1 day schedule to meet your needs.

# **PART TWO:**

## **Appendix of Necessary Forms**

**This section includes the really important forms for your trip.**

**1. The Program Planning Form should be completed and mailed/faxed/mailed to the Education Director 2 weeks prior to your trip.**

**2. The Parental Agreement and Consent Form should be collected and reviewed prior to the trip. Please pay attention to any medical/physical limitations placed on participants and inform camp staff on your Program Planning Form.**

**3. The Packing List may help your students prepare for their day with us. Some groups ask their students to bring changes of clothes, extra shoes, etc. depending on the schedule and time of year. Camp asks that students are reminded this is an outdoor program and outdoor activities continue despite rain, cold, snow, etc.**

**4. The Directions to the Center can be distributed to drivers within your group.**

**5. The ES237 Reporting Form – This form is used for tabulating your bill after your trip and should reflect the number of students/adults in attendance during your visit. This form will need be collected by camp staff upon your arrival.**

**Betsy – Jeff Penn 4-H Center**  
**PROGRAM PLANNING FORM**  
**Soaring Thru Spaces - Day Groups**

\*Please mail or fax (336-634-0110) this form to the Education Director at least 2 weeks prior to your trip.

Name of School / Group \_\_\_\_\_

School Address \_\_\_\_\_

Coordinating Teacher/Adult \_\_\_\_\_ Phone \_\_\_\_\_

Email: \_\_\_\_\_ Phone (other) \_\_\_\_\_

Date of Program \_\_\_\_\_ Grade Level of students \_\_\_\_\_

Arrival Time at Center \_\_\_\_\_ Departure Time from Center \_\_\_\_\_

Total number of Participants \_\_\_\_\_ Total number of chaperons \_\_\_\_\_

Number of Activity Groups \_\_\_\_\_ (15-17 student participants per group)

Is the Center providing any meals for your group? \_\_\_\_\_

If so, Any special dietary needs? (vegetarians, allergies, etc) \_\_\_\_\_

Any medical/physical limitations Penn should be prepared for? \_\_\_\_\_

Have these students been to Penn before? \_\_\_\_\_ If so, what did they do? \_\_\_\_\_

Any other important information? \_\_\_\_\_

\*\*If you have any questions along the way please contact the Education Director.

**Parental Agreement, Liability Waiver, and Consent Form**  
**Betsy – Jeff Penn 4-H Educational Center - School Programs**

Student's Name \_\_\_\_\_ Date(s) of Participation \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent/Guardian Email \_\_\_\_\_

1. I, \_\_\_\_\_ give my permission for my child \_\_\_\_\_ to participate in the Outdoor Education (Orient, Soaring Thru Spaces or Environmental Education) at the Betsy-Jeff Penn 4-H Educational Center in Reidsville, NC. I realize this is an outdoor, active, intensive program which utilizes experiential education methods to teach, depending upon the program selected by your child's school; outdoor science, interdisciplinary lessons and/or challenge course activities (team challenge, low and/or high ropes). These hands-on programs are an extension of your child's current classroom curriculum.

I also understand that there are inherent risks, both known and unknown, involved with such experiential learning activities. These risks are consistent with outdoor learning and include, but not limited to, such environmental risks as insects, animals, weather, water and others. While the Betsy-Jeff Penn 4-H Center and its staff take reasonable measures to mitigate the risks, these risks cannot be completely removed without also removing any and all educational value of the program.

2. I hereby release the Betsy-Jeff Penn 4-H Educational Center, NC Cooperative Extension, NC State University, the local school and school system, their employees and volunteers from financial responsibility or liability for any sickness, injury or accident that may occur during, or as a result of, this program and its activities.

3. To insure prompt attention in the case of a serious sickness or accident, I hereby authorize the persons responsible to incur expenses considered necessary and I agree to pay for the same, if they are not covered by accident or illness insurance policy. Should the need arise, I give my permission for my child to be taken to a doctor or hospital for medical treatment.

My child is covered by health/accident/illness insurance coverage through the following plan:

Policy # \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

\*\*The Betsy-Jeff Penn 4-H Educational Center does not provide health or accident insurance.

4. I understand that informational and promotional videos, recordings and photographs are frequently collected and produced to be distributed by the Department of 4-H Youth Development, College of Agriculture and Life Sciences, North Carolina State University, and the Betsy-Jeff Penn 4-H Educational Center ( herein referred to as the University).

\_\_\_\_\_ I consent to the use of my child's likeness and voice, including all photographs and sound recordings, for informational purposes by the University, or anyone authorized by the University. I acknowledge that the University is the sole owner of all rights to such photographs or sound recordings. I understand that I shall receive no compensation for my appearance and participation in these materials.

\_\_\_\_\_ I do NOT consent to the use of my child's likeness and voice being used by the University.

\*\*If Voice and Likeness Release is not granted, the program director must be notified so that he/she can be sure that no such recordings or photography are taken during your child's visit. Leaving both spaces blank is considered consent.

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

( over )

**Parental Agreement, Liability Waiver and Consent Form - continued**

5. The phone number where I may be reached in case of emergency is:

Day: \_\_\_\_\_ or \_\_\_\_\_

Night: \_\_\_\_\_ or \_\_\_\_\_

If I cannot be reached, contact: Name \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name of Child's physician \_\_\_\_\_ Physician's phone \_\_\_\_\_

6. Health Record: Please provide the following information for use in identifying limitations on your child's activities, and providing proper health history in the event we have to take your child for medical treatment.

A. Birth date \_\_\_\_\_ Last Tetanus immunization \_\_\_\_\_

B. Must any of the following medical or physical conditions be taken into consideration when your child is thinking about performing physical activities? Please mark "Yes" or "No" in the appropriate column below, then give specific detail in the space provided.

	Limitations Must Be Considered? Yes / No
1. Epilepsy, convulsions, loss of consciousness, dizziness, paralysis .....	_____
2. Lung Disease: Asthma, pain in chest or shortness of breath .....	_____
3. Diabetic or Kidney disease .....	_____
4. Arthritis, strained, pulled or weak muscle .....	_____
5. Pregnancy .....	_____
6. Environmental allergies (especially to insects ) .....	_____
7. Impaired vision or hearing .....	_____
8. Allergies to Medicine.....	_____
9. Broken bones, strained/sprained joints .....	_____

If you answered " Yes " in any of the above spaces, please describe in detail any limitations that these conditions might cause while your student is doing various outdoor, physical activities.

---



---



---

Is your child currently taking medication or under the care of a physician? \_\_\_\_\_ If so, please describe

---



---



---

**Adult Participant Agreement and Consent Form**  
**Betsy – Jeff Penn 4-H Educational Center - Soaring Thru Spaces Program**

Participant's Name \_\_\_\_\_ Date(s) of Participation \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

1. I, \_\_\_\_\_, understand that I may be participating in parts or all of the Soaring Thru Spaces Program at the Betsy-Jeff Penn 4-H Educational Center in Reidsville, NC. I realize this is an outdoor, active, intensive program that implements both traditional educational practices as well as challenge course activities that may include ground initiatives, team challenge course elements and high ropes course elements. I understand that I will be participating by my own choice.

I also understand that there are inherent risks, both known and unknown, involved with such experiential learning activities. These risks are consistent with outdoor learning and include, but not limited to, such environmental risks as insects, animals, weather, water and others. While the Betsy-Jeff Penn 4-H Center and its staff take reasonable measures to mitigate the risks, these risks cannot be completely removed without also removing any and all educational value of the program.

2. I hereby release the Betsy-Jeff Penn 4-H Educational Center, NC Cooperative Extension, NC State University, the local school and school system, their employees and volunteers from financial responsibility or liability for any sickness, injury or accident that may occur during, or as a result of, this program and its activities.

3. To insure prompt attention in the case of a serious sickness or accident, I hereby authorize the persons responsible to incur expenses considered necessary and I agree to pay for the same, if they are not covered by accident or illness insurance policy. Should the need arise, I ask that I be taken to a doctor or hospital for medical treatment.

I am covered by health/accident/illness insurance coverage through the following plan:

Policy # \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

\*\*The Betsy-Jeff Penn 4-H Educational Center does not provide health or accident insurance.

4. I understand that informational and promotional videos, recordings and photographs are frequently collected and produced to be distributed by the Department of 4-H Youth Development, College of Agriculture and Life Sciences, North Carolina State University, and the Betsy-Jeff Penn 4-H Educational Center ( herein referred to as the University).

\_\_\_\_\_ I consent to the use of my likeness and voice, including all photographs and sound recordings, for informational purposes by the University, or anyone authorized by the University. I acknowledge that the University is the sole owner of all rights to such photographs or sound recordings. I understand that I shall receive no compensation for my appearance and participation in these materials.

\_\_\_\_\_ I do NOT consent to the use of my likeness and voice being used by the University.

\*\*If Voice and Likeness Release is not granted, the program director must be notified so that he/she can be sure that no such recordings or photography are taken during your child's visit. Leaving both spaces blank is considered consent.

Adult Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

( over )

## Adult Participant Agreement and Consent Form - continued

5. In case of emergency, please contact:  
 Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_  
 Physician's Name \_\_\_\_\_ Physician's phone \_\_\_\_\_

6. Health Record: Please provide the following information for use in identifying limitations on your child's activities, and providing proper health history in the event we have to take your child for medical treatment.

A. Birth date \_\_\_\_\_

B. Must any of the following medical or physical conditions be taken into consideration when you are thinking about performing physical activities? Please mark "Yes" or "No" in the appropriate column below, then give specific detail in the space provided.

	Limitations Must Be Considered? Yes / No
1. Epilepsy, convulsions, loss of consciousness, dizziness, paralysis .....	_____
2. Lung Disease: Asthma, pain in chest or shortness of breath .....	_____
3. Diabetic or Kidney disease .....	_____
4. Arthritis, strained, pulled or weak muscle .....	_____
5. Pregnancy .....	_____
6. Environmental allergies (especially to insects ) .....	_____
7. Impaired vision or hearing .....	_____
8. Allergies to Medicine.....	_____
9. Broken bones, strained/sprained joints .....	_____

If you answered " Yes " in any of the above spaces, please describe in detail any limitations that these conditions might cause while you are doing various outdoor, physical activities.

---



---



---

Are you currently taking medication or under the care of a physician? \_\_\_\_\_ If so, please describe

---



---



---

**Betsy-Jeff Penn 4-H Educational Center**  
**PARTICIPANT “WHAT TO PACK” LIST – Day Groups**

This is an **outdoor** adventure program. Please make sure that clothing is appropriate. Expect to get dirty. If it is warm, shorts and t-shirts are appropriate. Students can always take off a layer, but if they don't have one, it can make for a miserable day. For cold days, please bring several layers of warm clothes and long pants. Being outside for a few hours can make an unprepared person rather cold. Be prepared for all weather conditions. Bring rain gear! Outdoor programming continues even through rain. Shorts should be long enough to fit under climbing harnesses and to comfortably participate in activities.

Warm Weather Items

Shorts of a comfortable length

Short sleeve shirt

Hat / Sunscreen

Rain jacket or Poncho

Closed toe shoes (sandals and crocs are not proper footwear)

Cold Weather Items

Thermal underwear

Gloves and stocking cap

Heavy jacket

Miscellaneous

camera

water bottle

sweatshirt or light jacket

Do Not Bring

Cell phones – at the discretion of the teacher but not needed for program

Money – unless told otherwise by coordinating teacher

Electronics

Jewelry or other expensive items

Food, candy or gum

The Center is not responsible for lost or stolen money or belongings.

**Directions for Travel To  
BETSY-JEFF PENN 4-H EDUCATIONAL CENTER**

Please feel free to duplicate these directions for distribution to your group.

-----

**FROM RALEIGH, BURLINGTON-** Follow US 85/40 W to Greensboro, take exit #41 onto Lee St. and follow the signs to US 29 N. Merge onto US 29 N and continue north out of Greensboro until you come to the 4<sup>th</sup> Reidsville exit, exit #153 for NC158/14. Turn left at top of ramp and follow NC158/14 for about 3.4 miles. **After** the third traffic light, turn left onto Salem Church Rd. Continue with directions entitled *“from Salem Church Rd.”*

**THE BACK WAY:** Off of US 40 West, take exit 138. Turn right onto NC 61 N through Whitsett, to Gibsonville. Follow NC 61 N to the junction of NC 61 N and NC150 E. At the stop sign intersection go straight, this is now NC150 E. Stay on NC150 till it ends at NC 87. Turn left, follow NC 87 until the first traffic light. Continue straight on Barnes St., at intersection of US Bypass 29 turn right to go north on US 29. Take the next exit, #153, turn left onto NC 158/14 and follow for 3.4 miles. **After** the third traffic light, turn left onto Salem Church Rd. Continue with directions entitled *“from Salem Church Rd.”*

**FROM GREENSBORO:** Take US. 29 north to Reidsville, continue on US. 29 Bypass to the NC 14/158 exit, exit #153. Turn west (left) at the exit toward Eden and follow for about 3.4 miles. **After** the third traffic light, turn left onto Salem Church Rd. Continue with directions entitled *“from Salem Church Rd.”*

**FROM WINSTON-SALEM:** Take NC 158 east out of WINSTON-SALEM to the out skirts of Reidsville and the intersection of US 29 Business north towards Danville, go 2.5 miles. Turn left at the second light at the intersection of Business 29 and Moss Street. At stop sign, turn left onto Wentworth St, go 1 mile. Turn right onto Salem Church Rd, just after Upper Piedmont Research Farm, go ½ mile and turn left at the next opportunity onto Cedar Lane. Camp entrance is .8 miles on the left.

**FROM EDEN:** Take NC 14 south about 4.3 miles to a Shell station on the right at the stoplight. Turn right onto Barrymore Rd., continue with the directions entitled *“from Barrymore Rd.”*

**FROM DANVILLE, VA:** Take US 29 Bypass south towards Reidsville to exit #153 (the intersection of NC 14/158) Turn right (west) at that junction, toward Eden. Continue on NC 14 3.4 miles and turn left on to Salem Church Rd., continue with directions entitled *“from Salem Church Rd.”*

**FROM SALEM CHURCH RD. AND HWY 14:** Follow Salem Church Rd. for 1.4 miles. Make the **sharp** right turn onto Cedar Lane (4-H Center sign on left marks this intersection). Continue about .8 miles on Cedar Lane until you see the sign and gates for the 4-H Center on the left, turn down the road and follow signs to parking area.

**FROM BARRYMORE ROAD:** Follow Barrymore Rd. 1.4 miles until the road curves into a right curve. Turn LEFT at this curve onto Cedar Lane. Continue 1.3 miles on Cedar Ln. until you see the sign and gates for the 4-H Center on your right. Turn right onto the entrance road for the 4-H Center and follow the signs to the parking area.

**ENTRANCE TO THE CENTER and PARKING:**

Follow the entrance drive along a long stretch of pastureland, to the welcome sign & stop sign. Make a right and proceed up the hill (speed limit 20 mph please!) to the large, gravel parking lot on the right. All cabins and facilities are within easy walking distance from this parking lot. Please do not park on grassy areas, along roadsides, in staff parking areas, etc

# BILLING FORM

## ES 237 Reporting Form

This information is required by the Federal Government. It is also used in tabulating your bill. **Please help us by returning this form to the program director upon your arrival, so that a bill can be sent in a timely manner.** All information on this form is strictly confidential and will not be identified with your school or organization when used for reporting purposes. Thank you for your cooperation.

Name of school \_\_\_\_\_

City \_\_\_\_\_ Grade Level of Students \_\_\_\_\_

School System \_\_\_\_\_

County \_\_\_\_\_ Date of Participation \_\_\_\_\_

<u>Male Participants</u>	<u>Students</u>	<u>Adults</u>
No. White Males	_____	_____
No. Black Males	_____	_____
No. Hispanic Males	_____	_____
No. Asian Males	_____	_____
No. Native Am. Males	_____	_____
No. Other _____	_____	_____

Total \_\_\_\_\_

<u>Female Participants</u>	<u>Students</u>	<u>Adults</u>
No. White Females	_____	_____
No. Black Females	_____	_____
No. Hispanic Females	_____	_____
No. Asian Females	_____	_____
No. Native Am. Females	_____	_____
No. Other _____	_____	_____

Total: \_\_\_\_\_

## **PART THREE:**

### **Frequently Asked Questions**



## How do I contact the Education Director?

Via the following three steps (not necessarily in this order):

1. **Session Scheduling Worksheet** - This worksheet was (hopefully) emailed to you along with this planning packet. Please fill in any available details and return it to Penn along with a check for your group's deposit. The signed "Statement of Responsibility" should also be returned. These items should be returned to the Center within 30 days of receiving this planning packet email.

2. **Program Planning Form** - This planning form, found in the appendix of this guide, asks the important questions that we really need to know to provide a quality, timely program. As the date of your program draws near, the details sought in the Program Planning Form will become clear. Please mail or fax this form, with all the details, to the program director at least 2 weeks prior to your program. If Emailing the info is easiest...Email me!

3. **Personal Conversations or Email** - Any time you have questions, or need to change participant numbers, or just want to say "hello", please call or email the Education Director. There is no such thing as a stupid question, an insignificant concern or "too much" preparation. Please call Kyle at (336) 349 – 9445 ext.305 or send him an email at [kyle\\_shillinglaw@ncsu.edu](mailto:kyle_shillinglaw@ncsu.edu)

## What if the number of participants changes?

When teachers, group leaders or administrators reserve dates for the STS program, they must give a preliminary number of students that they expect to participate. Please keep the program director informed when this number changes, whether it increases or decreases. Changes in the number of participants have bearings on staffing, group sizes, group numbers, cabin numbers, etc. Most importantly, changes in participant numbers, and how early the program director is made known of these changes has a direct bearing on the amount of your total bill!

If there is a decrease in numbers, lead teachers &/or group leaders are responsible for notifying the center 30 days before the scheduled program. After that date, the Center will accept free of charge a 10% drop from the group. Beyond the 10% drop, there will be a \$25.00 charge for each person a group is short of their reservation.

## What is the cancellation policy?

Lead teachers &/or group leaders are responsible for notifying the Center 60 days before the scheduled program date for a cancellation and full refund. Cancellations that occur between 60 and 30 days prior to the scheduled program will only lose the full deposit. Cancellations that occur within the last 30 days prior to a program date will be treated as a drop in numbers, wherein the Center accepts the first 10% free of charge and the remaining spots are billed at \$25.00 per person.

This policy is not meant to be punitive. It is necessary because by the last 30 days the food has already been ordered, the staff hired & the materials collected. (And, quite possibly, other schools have been turned away from an otherwise full schedule.)

## What time can we arrive? What time do we leave?

Our basic Schedule for a 1 Day group is to arrive as early as 8:30am and stay at camp as late as 5:00pm. Early arrivals and late departures can be arranged when scheduling your group. There will be additional fees depending on your schedule. Not all groups are able to arrive that early or stay that late but we do try to offer a full day for schools able to coordinate this.

## How many chaperons do I need?

We recommend bringing *at least* one adult per activity group. This means at least one adult for every 15-17 participants. There is no limit to the number of chaperons you can bring. The center does not charge adult chaperons for our day group programs unless a meal is being provided to them.

## What do the chaperons/teachers need to do?

Penn's staff of facilitators is trained to handle minor discipline problems, give first aid, respond to weather emergencies, etc. So when the students are with our staff, the chaperons & teachers are welcome to sit back and watch the festivities.

The time when the chaperons'/teachers' roles come to the forefront is during meal times and restroom breaks. Adult chaperons are not expected to participate in ground initiatives and team challenges. Any participation on the part of adults should be limited as our goal is to allow the students to work together through various problems to solve each challenge.

## Into how many activity groups should I divide my students?

We have found that groups of 15-17 create the best scenarios for group dynamics during ground initiatives, teams course elements and high ropes. Any smaller than that and there doesn't seem to be a quorum. Any larger and it becomes hard to keep the group together, and students will not be able to experience as much. Use the following guide to find out the number of activity groups for which to plan.

Total Number of Participants	Number of Activity Groups
15 - 17	1 group
18 - 34	2 groups
35 - 51	3 groups
52 - 68	4 groups
69 - 85	5 groups
86 - 102	6 groups
103 - 119	7 groups
120 - 136	8 groups

**Careful thought should be given to group assignments to ensure that individuals will be compatible and groupings will meet the maximum objectives of the teacher or youth leader. The time spent programming is usually maximized if all the students are aware of what group they are in prior to arrival at camp!**

## Can I have smaller group sizes?

Our prices for the Soaring Thru Spaces program are based on group sizes of 15-17. Breaking into smaller groups, say 12-14, would require more staffing and more meeting spaces, and therefore raise the costs borne by the Center. So, for the most part we try to stay with the group sizes of 15-17.

However, if you find it imperative that group sizes be 15 or less, you do have an option. The center has a policy in place that allows an individual school to decrease the ratio of students to instructors. It works two ways:

1. By paying normal price for “empty spaces”, a school can reach the threshold over which another group would be needed. For example, if a school came with 48 students (technically 3 groups of 16), they could get a fourth group (4 groups of 12) by paying for 52 normal participants, or four “empty spaces”.

2. Since option #1 has the potential to be disproportionately costly to larger groups, schools who bring more than 48 students have the option of just adding an extra five dollars to each normal participant’s fee.

**\*\*In order to ensure proper staffing, warning should be given to the program director when your group is scheduled if you choose to take either of these options. Thank You!**

## What activities will my students participate in?

Some of our 1 day STS groups choose to include our High Ropes Course into their day and others choose to focus primarily on the Ground Initiatives and Team Challenge Course (low ropes). The activities for each group are mostly determined by their trained Penn instructor. Our instructors are trained on a wide range of activities and are able to utilize these depending on each group’s strengths and weaknesses. It is safe to say that not all activity groups will do exactly the same set of activities while you are here.

## What High Ropes Elements will we do?

This will depend on total group size and length of stay. Obviously groups visiting for 1 day will not have as much time on the course as our 3 day groups. The High Ropes Course at Penn is operated dynamically...which basically means the Penn instructor working with each activity group will belay each participant one at a time onto the course. The length of time each element takes varies greatly by group and even individual course elements. We try to design each groups schedule to allow activity groups to try 2–3 different elements at the High Course, but this is never guaranteed! In most cases only groups coming to camp for our 3 day program (or longer) will be able to experience the Zip-line. Elements such as the “flying squirrel” and “pamper pole” require the use of a full body safety harness, which normally requires additional time for harnessing participants. These elements may or may not be used depending on your schedule. If you have any questions or requests in regards to the High Ropes Course please do not hesitate to contact the Education Director.

Please check your Session Scheduling Worksheet to be sure that your group is signed up to use the High Ropes course while you are here. The fee is slightly higher for groups using the High Course to cover maintenance, equipment, inspections, etc. All are quite costly!!

## Who takes care of the medical needs of our students?

The Center does not provide a nurse on site during the program, although most staff are First Aid and CPR certified. Minor medical needs can be handled by the on-site staff or a designated chaperon. First Aid kits and supplies are kept at locations throughout the Center. The center is accessible to Emergency Medical Services and the Annie Penn Hospital is located less than 10 miles away in Reidsville. A teacher or chaperon from your group will be responsible for transporting and accompanying students to medical care facilities if the need arises.

**A SIGNED PARENTAL CONSENT FORM IS EXTREMELY IMPORTANT IN EXPEDITING EMERGENCY TREATMENT. DO NOT BRING A CHILD WITHOUT THIS FORM.**

\*Schools that have their own forms requiring the same information as Penn's will no longer be required to have both forms completed. Please be sure all info required by the Penn form is included in your school's form.

Make sure that you have checked the health section of each parental consent form prior to the trip and are aware of any special health needs; diabetes, epilepsy, bee sting allergies, sleep walking, bed wetting, etc. Make sure to inform on-site instructors and/or the appropriate chaperons of any conditions ahead of time. The other major role of the teacher &/or chaperon is to collect all medications, (i.e. Claritin, Ritalin, etc.), keep them in a safe place, and dispense them as directed by the parents. Be sure that parents have provided adequate information on how medication should be dispensed to their child before you leave the school. Penn staff are unable to dispense any ingested medications.

## What if my student(s) do not have insurance coverage?

The Betsy-Jeff Penn 4-H Center highly recommends that all students and adults participating in our program be covered by health and accident insurance. The Penn 4-H Center does NOT provide insurance coverage for participants. It is the responsibility of each group to ensure that all participants are covered, depending on the requirements of your particular school.

## What forms must I bring with me when I come?

**Parent Agreement & Consent Form** - Provides permission for students to participate in the program. Also provides necessary medical, contact & insurance information in case of emergency. Provides permission for center staff &/or emergency medical staff to treat participant in case of emergency. *Must be signed, returned & brought with lead teacher in order for student to participate in program!*

**Adult Participant Agreement & Consent Form** - Provides necessary consent and medical, contact and insurance information in case of emergency. If adults are not going to participate in any of the challenge course activities, they need not complete the form. However, adults often times get swept up in the fun and it is much simpler to have an agreement form already completed ahead of time.

**ES 237 Form** - Since we are technically a state agency, we must account for the number of students for whom we provide programming. The most important way these numbers are used is in the tabulation of your final cost. So, it is very important that this form be filled out accurately and turned in to the program director upon arrival.

**\*\*\* A check covering the balance of your fees is not necessary at the time of arrival. We will use the numbers given on the ES 237 to formulate your final cost, deduct any deposits made previously, then send a bill to you after your trip.**

## What do my students need to know when they arrive?

- The Students should already be divided into and aware of their activity groups prior to arrival. The day tends to run more smoothly if the transition from the buses/cars to activity groups is quick.
- We have found that students who have been advised as to the nature of this experience usually fare better. They should realize that there is more to this than just having fun. There is learning to be done. The lessons that can be learned, and the fun that can be had are very much dependent on a participant's willingness to take emotional risks, make exerted efforts, and put forward a positive attitude.
- Students should also be warned that Soaring Thru Spaces is an outdoor program. Outdoor activities continue despite heat, rain, snow, etc. Students should come prepared with layers, and rainwear. Don't trust the weather person when they say it'll be nice for your time at camp. Weather systems are complex and constantly changing...be prepared!
- Along the same lines, keep in mind many of our activities are done in the woods, in grassy areas, etc. Clothes and shoes will come home dirty, so students should not bring their nicest. Shorts are fine if they are long enough to fit under a harness (aim for just above the knee) and will allow full range of movement, as you will be lifting, climbing, scooting, stretching, etc. *Show your style by the way you act & lead within your group, not by the tag on your clothes.*

## Can Camp provide our group with lunch?

Yes! The camp can provide your group with lunch during your visit. Most of our day groups choose to have students pack a lunch. the logistics of coolers and bagged lunches can sometimes be overwhelming. Some groups find it easier to purchase lunch from camp. There is a minimum group size of 25 and an additional fee of \$6.50/person. We generally do not charge adult chaperons for our 1 day programs, but do charge for adults eating meals.

## Can we choose our own menus?

The Penn kitchen staff are given a multi-faceted challenge:

1. Produce kid-friendly meals that will fill the bellies of active, growing, hungry students.
2. Produce meals that will also satisfy and sustain adult chaperons, teachers and staff.
3. Make sure these meals are healthy, representing all the major food groups each day.
4. And do all this on a very tight budget!

One of the best ways the kitchen staff can be cost effective in this process is to be able to put together a week's worth of menus than can work well together. (Ingredients bought can work well in multiple different meals, etc.) Such cost effectiveness is reduced when groups choose their own menus. (Retreat groups have traditionally been given this privilege, and pay handsomely for it.)

For those school groups that do wish to choose their own menus, an additional fee will be assessed in order to cover the reduced cost effectiveness. Please notify the education director at least 30 days prior to your visit if you would like to select your own menu. Menu selection is on a first-come, first-served basis.

## What if there is a vegetarian or a diabetic or someone with severe food allergies in the group?

If there are any specific dietary needs among your participants, please inform the program director as soon as possible before your trip. Vegetarian options are available at each meal provided they are requested on the Program Planning Form. The Center is also peanut free as peanut allergies have become more and more common. We have found that students with various allergies (milk, gluten, etc) often choose to bring their preferred brand of substitute if they feel it necessary. As a rule, the kitchen is unable to cater to vegan or other diets considered "by choice".

## Will there be other groups on camp when we come?

Depending on your total group size it is very possible that other groups may be on-site. There may be an adult conference group using our facilities. There could be another school group here for the Environmental Education Program or ORIENT Program, or, maybe doing the Soaring Thru Spaces program just like you. We try to serve as many schools as are interested in the short seasons we have, yet avoid bringing in so many participants at the same time that the quality of the program is compromised. If indeed you share camp with another school, each school group will be assigned to separate cabins, class groups and dining hall tables.

## What is "Store Break"?

Most of our 1 day groups choose NOT to have a store break. Store Break does take away time that would otherwise be spent on your program. However, some groups like to offer students a store break prior to departing camp, and we are happy to accommodate.

Our camp store sells all sorts of souvenirs, t-shirts (\$12) and other items that will remind students of the experience they had at Penn. We also sell non-caffeinated sodas & various snacks. Please discourage your students from bringing more than \$10.00 to \$20.00 for the store. Any more than that is just asking for trouble. Updated store price lists may be available from the Education Director. Store break, of course, is completely optional. If you do not wish your students to pump themselves full of sugar or spend any more of their parents hard-earned money, that is perfectly fine. Of course there are compromise positions as well, where we only sell snacks and drinks, or we only sell souvenirs. Please let the program director know whether store break should be included in the plans for the day.

**WOW!! That is a lot of information! If at any point you have questions, comments, or concerns please do not hesitate to contact the Education Director at 336-349-9445 or by email at [kyle\\_shillinglaw@ncsu.edu](mailto:kyle_shillinglaw@ncsu.edu)**

**We look forward to your visit!**