



Student Take Home Packet

Included in this packet:

- Packing List
- Forms for parents and guardians to fill out and return to school
- More information about Long Lake!

All forms marked return are due back to school by:

Students @ Long Lake:



Explore:

Be ready to go outside to visit all sorts of magical places; the bog, a totally private lake, acres of woods, and miles of trails are ready for you to explore at Long Lake!



Conserve:

Conservation is the wise use of resources, and when we say resources we mean natural resources we get from the earth and use in our everyday lives. As Long Lake IS a Conservation Center, be ready to conserve resources like electricity, water, food, etc! But, don't worry we feed you a lot of home mead food and it is delicious!



Learn:

Be ready to #learnatlonglake (seriously use the #). This is school trip, so you will be learning some things for school, but you will also learn and try something completely new to you, we promise!



Appreciate:

Be ready for the adventure of a lifetime. Old folks always say to us, "I remember my Long Lake trip gee that was 40 years ago, but I learned so much..." No kidding you will make memories here to last a lifetime by spending time with your friends, exploring, and really learning to appreciate nature!

Parents & Guardians:

Before your student attends Long Lake please:

- Complete the forms in this packet and return the forms marked 'return' to school by the due date given.
- **Special Requests:** To the best of our capability, we will meet dietary, equipment, program, or facility needs with adequate notice. Parents should discuss needs with school staff who will in turn discuss with Long Lake coordinator.
- **Birthdays:** We don't want to miss out on a special day! Students celebrating their birthday while at Long Lake will be recognized at dinner on the second day of attendance.
- Look over the packing list and make sure your student brings everything they need with them.
- Check out our website at longlakecc.org to learn more about us and get your student excited for the trip!

While your student is at Long Lake:

- Contacting your student at Long Lake Long Lake's phone number is 218-768-4653. Office hours are 8 a.m. to 4:30 p.m. Please call outside office hours only in case of emergency. Calls will be answered at all times when students are present. Long Lake staff will relay messages through the student's classroom teacher. Student use of the phone is at the discretion of school staff.

After the Long Lake trip:

- Ask your student:
 - "What did you learn?"
 - "What was your favorite activity?"
- If your student had a great time, their experience at Long Lake does not have to stop! We also provide week long summer camps! Check out our website for more information at longlakecc.org.

Long Lake Field Study Packing List

Please carefully look over the following checklist and check each item as it is packed. If you have trouble coming up with any of these items, please let your teacher know well before your visit, and we will be happy to provide assist in any way we can. When you arrive at Long Lake, come dressed ready to spend the day outside. Parents and Students, please be sure to:

- Put your name on everything.
- Bring OLD clothes and shoes! You will get wet and muddy.

The Essentials

Clothing

- Long Socks (no ankle socks) 4 pair minimum
- Pants (jeans are best) 2 pairs
- Short Sleeved Shirts, 2
- Long Sleeved Shirts, 2
- Stocking cap
- Pajamas
- Underwear

Toiletries

- Hand soap
- Body wash/soap
- Toothbrush & toothpaste
- Hairbrush
- Deodorant (no aerosols)
- Sunscreen

Gear

- Small, empty back pack to use as day pack
- Sleeping bag or bedroll
- Pillow and pillow case
- Hand towel
- Bath towel
- Washcloth

Footwear

- Tennis shoes (old ones that can get dirty)
- Rubber/rain boots
- Closed toe shoes

Seasonal Items

In addition to the essentials, bring the following during the season of your trip:

Fall

- Rain gear
- Warm jacket
- Insect repellent
- Light gloves
- Ball cap
- Sunglasses

Winter

- Long johns/warm under clothing, 2 pair
- Sweatshirt
- Warm shirts
- Warm parka/winter coat
- Ski/snow pants or snowmobile suit
- Mitten, 2 or 3 pairs
- Lined gloves
- Warm socks, 2 pair
- Winter boots

Spring

- Rain gear
- Warm jacket
- Insect repellent
- Light gloves
- Ball cap
- Sunglasses

Extras (optional)

- Camera (labeled)
- Binoculars (labeled)
- Book (labeled)

Do Not Bring

- Weapons of any sort are NOT allowed
- Phones, tablets, iPods, or the like
- Beverage, candy, snacks, gum, etc.
- Knives or cutting tools
- Hair dryers/irons
- Body sprays/colognes
- Aerosol based toiletries



LONG LAKE PARTICIPANT PERMISSION FORM AND LIABILITY WAIVER

Long Lake Conservation Center
28952 438th Lane
Palisade, MN 56469
Fax#: 218.768.2309
Phone#: 218.768.4653
Email: info@longlakecc.org
Website: www.LongLakeCC.org

ASSUMPTION OF RISK AND LIABILITY WAIVER

This form must be signed and returned to school/Long Lake in order for any person, adult or student, to attend and participate in Long Lake programming.

Participant Name: _____

Address: _____ City: _____

State: _____ Zip: _____ Schools Name: _____

Emergency Contact Name: _____ Emergency Contact #: _____

I acknowledge and am aware that this program involves certain inherent risks which I accept and assume. These risks may include (but are not limited to) physical injury, emotional injury, paralysis, permanent disability, illness, death or property damage due to inclement weather; walking on uneven trails; canoeing; cross country skiing; snowshoeing; and other peoples' actions.

I acknowledge that intentional harm to Long Lake property and/or others while at Long Lake may result in compensation for damages and/or legal action.

Following appropriate medical consultation, I have determined that my child's/my health is adequate to participate safely in this program (except as indicated on the Long Lake Participant Health Form). In the event of an emergency, I authorize treatment by emergency medical personnel.

Accordingly, I hereby voluntarily release and forever discharge Long Lake Conservation Center, including all of their personnel, agents, affiliates, staff and directors, from any and all liabilities to me with respect to injury, sickness, disease, loss or damage. This release applies to any and all liabilities to me or my estate of any description, whether arising from ordinary negligence or otherwise, and whether involving fees and expenses of any kind. In the event that some other person or entity seeks compensation for these released liabilities, I or my estate will indemnify and hold harmless Long Lake Conservation Center for all sums reasonably incurred in response to that claim. This release is to be interpreted and enforced under Minnesota law.

By signing this document, I understand and agree that if I am hurt or if my property is damaged during my participation in this activity, I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being release on the basis of any claim for negligence. I have had enough time to read this agreement and consult with legal counsel if I so chose to do so. I understand that this activity may not be made available to me if I were to choose not to sign this release. I have read and understood this document and I agree to be bound by its terms.

I am a (please check one of the following)

- Participant of legal age/adult.
- Parent/Guardian who will not be attending Long Lake
- Parent/Guardian Chaperone who will be attending Long Lake
- Teacher/Staff Member of the participating school/group who will attend Long Lake

Select one below:

- Yes, I authorize Long Lake to use any photos taken during the visit in publicity materials and understand my/my child's name will not be used.
- No, I do not authorize Long Lake to use any photos taken during the visit in publicity materials.

Parent/Guardian or Participating Adult Signature (required): _____

Date: _____



LONG LAKE PARTICIPANT PERMISSION FORM AND LIABILITY WAIVER

Long Lake Conservation Center
28952 438th Lane
Palisade, MN 56469
Fax#: 218.768.2309
Phone#: 218.768.4653
Email: info@longlakecc.org
Website: www.LongLakeCC.org



LONG LAKE PARTICIPANT HEALTH FORM

Long Lake Conservation Center
28952 438th Lane
Palisade, MN 56469
Fax#: 218.768.2309
Phone#: 218.768.4653
Email: info@longlakecc.org
Website: www.LongLakeCC.org

PARTICIPANT INFORMATION

I will be participating in the Long Lake Trip. The following information is my current health information.

My student will be participating in the Long Lake Trip. The following information is my student's current health information.

Participant's name: _____

School/Group Name: _____

Date of Birth: _____

Health Insurance Provider: _____

Policy Number: _____

Physician: _____

Physician's Phone Number: _____

EMERGENCY CONTACT INFORMATION

Primary Emergency Contact:

Secondary Emergency Contact:

Name: _____

Name: _____

Phone: _____

Phone: _____

Alternate Phone: _____

Alternate Phone: _____

Relationship to Participant: _____

Relationship to Participant: _____

Relationship to Participant: _____

Relationship to Participant: _____

DISCLAIMER

Long Lake does not collect any information from this health form. We inform our staff of dietary needs and any health information that could potentially impact the safest participation in Long Lake programming. In case of emergency while staying at Long Lake, the health information is necessary to provide appropriate medical care.



LONG LAKE PARTICIPANT HEALTH FORM

Long Lake Conservation Center
 28952 438th Lane
 Palisade, MN 56469
 Fax#: 218.768.2309
 Phone#: 218.768.4653
 Email: info@longlakecc.org
 Website: www.LongLakeCC.org

DIETARY NEEDS

Participant Name	Gluten Free	Vegetarian	Vegan	Dairy Free	Lactose Intolerant	Peanut Allergy -Severity-	Other Food Allergies (please list specifics)

- Place an "X" under each category that applies
- If you mark gluten free, vegetarian, vegan, or lactose intolerant, you will receive an alternative meal. If you would like to see what the alternative meals are, you may look on the Long Lake website, or ask your school's coordinating teacher for the menu.
- For Peanut Allergies:** list severity "high" or "low"
 - High severity= peanuts cannot be served at Long Lake for anyone during your trip
 - Low severity= participant cannot have peanuts but can be around them. Long Lake can serve peanuts
- If there are specific dietary needs then you MUST contact the Long Lake kitchen staff at least 2 weeks before the trip in order for our staff to plan and prepare specific meals. If dietary needs are severe, you may be asked to send/bring specific food on the trip.**

Long Lake Kitchen Staff Phone Number: 218-768-4653 ext. 236

STUDENT MEDICATION INFORMATION

Participant Name	Environmental Allergies	EpiPen	Inhaler	Other Health Information (i.e. On crutches, in wheelchair, or other medical needs that Long Lake staff would need to know)

FOR STUDENT PARENT OR GUARDIAN ONLY

- My student will not be taking any medication, prescription or other, while at Long Lake.
- My student will need to take medication, prescription or other, while at Long Lake. (see next page for medication directions)

I, _____, parent guardian of _____; hereby give my permission for:

- Long Lake to give non-prescription medication (aspirin-free) to my student if deemed advisable by teachers, chaperones, and Long Lake staff.
- Long Lake staff to transport my child for medical treatment as needed.
- Long Lake staff, in case of emergency, to hospitalize, to secure treatment for and/or to order injection, anesthesia or surgery for my child as named above. (Any direction to the contrary should be specified at the bottom of this form and signed.) I understand that, should a medical emergency arise, every effort will be made to contact me or my designee before such treatment is given.

Parent/Guardian or Participating Adult Signature

(required) _____ Date: _____



LONG LAKE PARTICIPANT HEALTH FORM

Long Lake Conservation Center
 28952 438th Lane
 Palisade, MN 56469
 Fax#: 218.768.2309
 Phone#: 218.768.4653
 Email: info@longlakecc.org
 Website: www.LongLakeCC.org

Parents/Guardians please list any medication, prescription or other; your student will take while at Long Lake. Include medication name, dosage, and time of day medication should be taken. Additionally, if you have other information or directions, you may write them below the chart.

Long Lake Conservation Center staff are unable to distribute or handle any student medications. Therefore, medications need to be turned into school staff/nurse prior to trip. A student with a prescribed inhaler or epi-pen must bring it with and carry it on them during the trip. Long Lake staff are trained in administering epi-pens.

Student Name _____

Medication	Dosage	AM	Noon	PM	Bedtime	As Needed

Additional information or instructions: