



## Code of Conduct & Discipline Policy

*Please review these rules with your child.  
The staff will review these rules with your child at the beginning of camp.  
Thank you in advance for your cooperation!*

The Irvine Ranch Outdoor Education Center staff would like your child to have the best experience possible while participating in our camp programs and activities. Thus, all participants must understand and follow our guidelines and rules. The following guidelines and expectations are in place to ensure the safety of your child and our staff.

1. Listen to staff.
2. Respect staff, other campers and yourself.
3. Respect camp property and facilities.
4. Keep hands, feet, and other objects to yourself.
5. Participate in camp activities.
6. Use an inside voice when indoors.
7. Follow staff instructions.
8. Treat others as you want to be treated.
9. Clean up after yourself.
10. Be positive and have fun!

Should a participant choose not to follow any of these rules, these are the Discipline Guidelines that the staff will follow to handle the situation:

### Discipline Guidelines

Step 1: Verbal Warning

Step 2: Time-out & meeting with Camp Director and/or Teacher (Parents Notified)

Step 3: Camper will be sent home

In the event a camper engages in behavior which poses an imminent threat of bodily harm to himself, others, damages the property, creates an emergency situation, (such as leaving camp without permission or notification), or violates one or more of the Causes for Immediate Discharge, (outlined on the following page), that camper will be escorted from all program activities and the parent will be called to come remove the camper from the property immediately. No warnings or time-outs will apply. No refunds or credits will be granted.

**THIS FORM IS TWO-SIDED WITH CONSENT SIGNATURE(S) REQUIRED**

## Causes for Immediate Discharge

### 1. Physical Violence / Assault

Fighting, hitting, kicking, slapping, pushing, etc ... has no place in an enriching camp environment. This includes but is not limited to any camper(s)-to-camper(s) physical contact by hand or other item, (sticks, rocks, shoes, etc ...)

### 2. Sexual, Racial, Religious Harassment and/or Misconduct

Participating in, or conspiring for others to engage in acts that injure, degrade, or disgrace, harm or embarrass other individuals. This includes misuse of photo and video cameras in changing areas, bathrooms, etc ...

### 3. Bullying / Abusive or Inappropriate Language

"Bullying" means repeated behavior by an individual student, an individual student within a group of students, or group of students that is intended to cause the victim(s) to feel frightened, threatened, intimidated, humiliated, shamed, disgraced, ostracized, or physically abused. Bullying implies an imbalance in power or strength in which the student being bullied has difficulty defending him or herself. Bullying can take many forms, including physical, verbal, social/relational and/or cyberbullying. Additionally, campers are prohibited from using profane, abusive or vulgar language or found to be engaged in slurs of any type.

### 4. Alcohol, Tobacco Products, Drugs & Drug Paraphernalia and/or Weapons

Controlled substances of any kind, (with the exception of medications prescribed by a physician and listed on a camper's Medication Form), and weapons of ANY kind are strictly forbidden on property. Such items include but are not limited to; knives, guns, (including pellet, air-soft, paintball, etc ...) and personal archery equipment.

### 5. Damage, Theft, Vandalism & Graffiti

Willful removal, damage, destruction or defacing of personal or camp property and/or facilities. (\*Camper shall be held liable for all resulting costs & fees).

I have reviewed the Code of Conduct and Discipline Policy with my child and hereby agree to abide by the terms and conditions therein.

---

Camper Name(s)

---

Date

---

School or Camp Group Name

---

Parent Signature

---

Parent Name (Please Print)



CALIFORNIA  
MANDATED  
REPORTER





# The Irvine Ranch Outdoor Education Center Health and Permission Form

## HEALTH AND PERMISSION FORM

A Health and Permission Form must be completed for each person participating in activities at The Irvine Ranch Outdoor Education Center (IROEC). Individuals will not be allowed to participate in IROEC programs or activities without a completed and signed form on file at IROEC. *The Irvine Ranch Outdoor Education Center is owned and operated by Orange County Council, Boy Scouts of America.*

### Participant Information

Name:		
Birth Date:	Age:	Sex: M F

### Parent/Guardian and Emergency Contact Information

Parent/Guardian Name:		
Address:		
City:	State:	Zip:
Home Phone:	Cell Phone:	Email:
Emergency Contact Name:		Phone:

### Insurance Information

Is the participant covered by family medical/hospital insurance:	
	YES NO
If so, indicate carrier or plan name:	Group #
Family Doctor:	Doctor's Phone:

### Participant's Health History

Condition	YES	NO	Comments
Severe bee sting allergies			
Allergies – Hay Fever, Pollen, Other			
Asthma			If yes, include date of last attack:
If your child has asthma, will he/she be bringing an inhaler?			
Health Conditions			If yes, please explain:
Behavioral Issues			If yes, please explain:
Food Allergies/Dietary Restrictions (i.e. vegetarian, vegan; religious dietary needs, etc.):			
Date of last tetanus:			
Other: Please use this space to provide any additional information about your child's behavioral, physical, or emotional needs that will help us to better serve them.			



# The Irvine Ranch Outdoor Education Center Health and Permission Form

## MEDICAL TREATMENT AUTHORIZATION AND CONSENT FOR MINOR

I, the undersigned do hereby authorize The Irvine Ranch Outdoor Education Center, its employees, agents and volunteers as agent for the undersigned to consent to any x-ray examination, anesthetic, medical, dental or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of, any physician and surgeon licensed under the provisions of the Medical Practice Act on the medical staff of any hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. This includes authorization to consent to any X-ray examination, anesthetic, dental or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered to the minor by or under the supervision of a dentist licensed under the provisions of the Dental Practice Act. It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority to power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment, or hospital care which a physician, meeting the requirements of this authorization, may, in the exercise of his/her best judgment, deem advisable. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California.

(We) (I), hereby authorize any hospital which has provided treatment to the above-named minor pursuant to the provisions of Section 25.8 of the Civil Code of California to surrender physical custody of such minor to (my) (our) above-named agent(s) upon the completion of treatment. The authorization is given pursuant to Section 1283 of the Health and Safety Code of California.

This authorization will remain effective while the above minor is enroute to or from or involved or participating in any IROEC program or activity unless revoked in writing by the undersigned, and delivered to the aforesaid agent(s).

## PHOTO AND VIDEO RELEASE

I hereby authorize The Irvine Ranch Outdoor Education Center (IROEC) and the Orange County Council Boy Scouts of America to photograph, video tape, or use any other electronic method of recording my child's likeness and/or voice to be used at the IROEC's discretion in IROEC-related publications and/or web sites. The photographs and/or video footage will not be digitally manipulated to change its content. I hereby give the IROEC the absolute right and permission, without restrictions, to make, copyright, and/or use, re-use, or publish said photographs/video footage of my child in which I may be included in whole or in part, and waive any right to inspect and/or approve the finished printed materials, videos and/or web sites where my image appears. I further consent that my child's name and identity may be revealed therein or by descriptive text or commentary.

I release the IROEC and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I may have in connection with such use. I understand that all such recordings, in whatever medium, shall remain the property of the IROEC.

I waive any right to compensation for my appearance in these printed documents, videos or web sites in any and all future uses of the photographs and/or video footage.

## RELEASE AND INDEMNIFICATION

I understand that use of facilities at The Irvine Ranch Outdoor Education Center (IROEC), owned by the Orange County Council, BSA, involves a certain degree of risk that could result in injury or death. In consideration of the benefits to be derived, after carefully considering the risk involved, and in view of the fact that the Boy Scouts of America is a not-for-profit organization: I hereby release and waive any and all claims that I may have against Boy Scouts of America, Orange County Council, or Scouting's chartered organizations, and any of their affiliates, agents, servants, employees, officers, volunteers, and directors from any and all costs and expenses, including but not limited to, attorneys' fees, reasonable investigative and discovery costs, court costs, and all other sums that the IROEC and any of its affiliates, agents, servants, employees, officers, volunteers, and directors incur as a result of any demand for claim or assertion of liability under any municipal, state or federal law or cause of action, including any action under the Americans with Disabilities Act, arising or alleged to have arisen out of any act or omission of, or any use of real or personal property belong to the IROEC and any of its affiliates, agents, servants, employees, officers, volunteers, and directors.

I have carefully read this agreement and fully understand its contents. I am aware the agreement includes a medical treatment authorization, photo and video release, waiver of liability, an assumption of risk, and an agreement by me to indemnify The Irvine Ranch Outdoor Education Center and the Orange County Council Boy Scouts of America, and I sign it of my own free will.

---

Parent/Guardian (print)

---

Parent/Guardian (signature)

---

Date



# Medication Information Form

All medications and supplements MUST be in the original retail package or pharmacy container with the patient's name, drug, and dosage clearly marked and clear instructions indicated on THIS form.

The IROEC does not stock or provide ANY medications and can NOT dispense any over-the-counter medications or supplements, (not even a cough drop), unless provided by the parent in the original, store-bought container and with specific written instructions / permissions below.

## THIS FORM IS TO BE COMPLETED BY THE CAMPER'S PARENT / LEGAL GUARDIAN

Camper's Name: \_\_\_\_\_

Name of Parent / Guardian: \_\_\_\_\_

Phone: Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Mobile (\_\_\_\_) \_\_\_\_\_

Primary Physician Name: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Known Allergies: \_\_\_\_\_

**Medication Name:** \_\_\_\_\_

Dosage: \_\_\_\_\_ Storage Instructions: \_\_\_\_\_

Quantity Sent to Camp:\* \_\_\_\_\_ Reason for Medication: \_\_\_\_\_

Side Effects: \_\_\_\_\_

(ie. reactions to food, dehydration, stress hives, interaction with other meds, decreased balance, increased activity, concentration, drowsiness, lethargy, etc.)

Every camper in need of medications and/or supplements must arrive with a sufficient quantity. ***\*The IROEC does not 'count' pills or weigh-in medications received.***

Time	S	M	T	W	T	F	S

**Medication Name:** \_\_\_\_\_

Dosage: \_\_\_\_\_ Storage Instructions: \_\_\_\_\_

Quantity Sent to Camp:\* \_\_\_\_\_ Reason for Medication: \_\_\_\_\_

Side Effects: \_\_\_\_\_

(ie. reactions to food, dehydration, stress hives, interaction with other meds, decreased balance, increased activity, concentration, drowsiness, lethargy, etc.)

Every camper in need of medications and/or supplements must arrive with a sufficient quantity. ***\*The IROEC does not 'count' pills or weigh-in medications received.***

Time	S	M	T	W	T	F	S

**Medication Name:** \_\_\_\_\_

Dosage: \_\_\_\_\_ Storage Instructions: \_\_\_\_\_

Quantity Sent to Camp:\* \_\_\_\_\_ Reason for Medication: \_\_\_\_\_

Side Effects: \_\_\_\_\_

(ie. reactions to food, dehydration, stress hives, interaction with other meds, decreased balance, increased activity, concentration, drowsiness, lethargy, etc.)

Every camper in need of medications and/or supplements must arrive with a sufficient quantity. ***\*The IROEC does not 'count' pills or weigh-in medications received.***

Time	S	M	T	W	T	F	S

**THIS FORM IS TWO-SIDED WITH CONSENT SIGNATURE(S) REQUIRED**

Medication Name: \_\_\_\_\_

Dosage: \_\_\_\_\_ Storage Instructions: \_\_\_\_\_

Quantity Sent to Camp:\* \_\_\_\_\_ Reason for Medication: \_\_\_\_\_

Side Effects: \_\_\_\_\_

(ie. reactions to food, dehydration, stress hives, interaction with other meds, decreased balance, increased activity, concentration, drowsiness, lethargy, etc.)

Every camper in need of medications and/or supplements must arrive with a sufficient quantity. ***\*The IROEC does not 'count' pills or weigh-in medications received.***

Time	S	M	T	W	T	F	S

Medication Name: \_\_\_\_\_

Dosage: \_\_\_\_\_ Storage Instructions: \_\_\_\_\_

Quantity Sent to Camp:\* \_\_\_\_\_ Reason for Medication: \_\_\_\_\_

Side Effects: \_\_\_\_\_

(ie. reactions to food, dehydration, stress hives, interaction with other meds, decreased balance, increased activity, concentration, drowsiness, lethargy, etc.)

Every camper in need of medications and/or supplements must arrive with a sufficient quantity. ***\*The IROEC does not 'count' pills or weigh-in medications received.***

Time	S	M	T	W	T	F	S

We believe no child should be denied an opportunity to experience The IROEC camp facilities and programs due to disability, chronic illness or developmental challenges. We make every accomodation possible to fulfill that goal.

It is strongly encouraged that if your child needs a round-the-clock care-provider, medical monitoring and/or any sort of special or "extra" assistance, that you consider attending camp with them. Other options include removing your child in the evenings, coming to camp during meal or medication times or engaging a private care-provider.

I \_\_\_\_\_ give permission to The Irvine Ranch Outdoor Education Center (IROEC) Staff to administer the above-described medication(s) to my child; \_\_\_\_\_ according to the administration and dosage directions I have hereby provided.

I HEREBY KNOWINGLY AND VOLUNTARILY WAIVE, RELEASE AND DISCHARGE THE IROEC, AND THEIR RESPECTIVE OFFICERS, AGENTS, EMPLOYEES, VOLUNTEERS AND INDEPENDENT CONTRACTORS (COLLECTIVELY, THE "RELEASED PARTIES") FROM ANY AND ALL CLAIMS FOR INJURIES, DAMAGES OR LOSS, OF ANY KIND OR SEVERITY WHATSOEVER, WHICH MY CHILD MIGHT SUSTAIN AS A DIRECT OR INDIRECT RESULT OF THE RELEASED PARTIES' ADMINISTRATION OF MEDICATION TO MY CHILD. FURTHER, I SHALL INDEMNIFY, DEFEND AND HOLD HARMLESS THESE SAME RELEASED PARTIES.

I HEREBY KNOWINGLY AND VOLUNTARILY WAIVE, RELEASE AND DISCHARGE THE RELEASED PARTIES FROM ANY ACCIDENTAL OR NEGLIGENT VIOLATION OR BREACH OF ANY PRIVACY RIGHTS INURING TO MYSELF OR MY CHILD, IN STATUTE OR COMMON LAW, OR RELEASE OF ANY PERSONAL MEDICAL INFORMATION, IN WHOLE OR IN PART, FURNISHED TO THE IROEC IN RELATION TO THE RELEASED PARTIES' ADMINISTRATION OF MEDICINE TO MY CHILD.

In the event of accident, injury, or sudden illness, I authorize needed medical treatment by a physician and / or hospital to be administered to my child.

\_\_\_\_\_  
Parent / Legal Guardian Signature:

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



# Recreational Activity Waiver

Shooting Sports • Aquatics • Zip Line & Challenge Courses

This Liability Waiver / Participant Agreement limits the liability of The Irvine Ranch Outdoor Education Center, (IROEC).

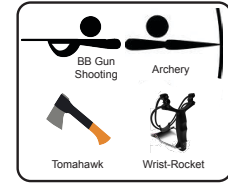
**PLEASE READ IT CAREFULLY**

## Shooting Sports (Archery, BB Gun, Tomahawk & Wrist-Rockets)

Injuries and accidents can be nearly eliminated when safety rules are followed. Students will show mastery of the safety rules and procedures prior to using any IROEC Shooting Sports equipment. Students will be taught proper form, safety rules and general knowledge of the equipment. Students will be expected to adhere to all safety rules and follow guidelines on care of the equipment. Anyone ignoring or not following expectations may be sidelined from the activity until sufficient retraining has occurred to insure everyone's safety.

Absolutely no Shooting Sports equipment is to be brought from home. No BB Guns, air-rifles, AirSoft® rifles, tomahawks, bows, arrows, arm guards, sights or releases may be brought by participants.

*California Penal Code Section 12552: Every person who furnishes any BB device to any minor, without the express or implied permission of the parent or legal guardian of the minor, is guilty of a misdemeanor.*



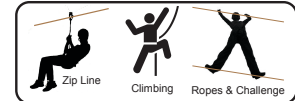
Tomahawk: 13+ yrs. old  
Other Areas: 8+ yrs. old

Under 8 must be accompanied by an adult, one-on-one, at all times.

## Zip Lines, Challenge Courses, Climbing & High Ropes Area (C.O.P.E.)

The Challenging Outdoor Personal Experience (C.O.P.E.), activities offered at The Irvine Ranch Outdoor Education Center, involve a certain degree of risk that could result in injury or death.

All participants shall be provided with and instructed in the proper use of helmets, harnesses, belay equipment and other items as may be required to safely complete each specific challenge area. Participants will be taught proper form, safety rules and general knowledge of the equipment. All will be expected to adhere to all safety rules and follow guidelines for proper care of the equipment. All participants MUST follow the instructions of IROEC trained staff at all times. Anyone ignoring or not following expectations may be sidelined from the activity until sufficient retraining has occurred to insure everyone's safety.



40 lbs. - 300 lbs.  
High Ropes: 13+ yrs. old  
Other Areas: 8+ yrs. old

Younger & Under 40 lbs.  
at discretion of IROEC staff

*Shooting Sports, Zip Line and C.O.P.E. Course participants MUST wear sturdy, closed-toe shoes at all times.*

## Aquatics (Swimming, Water Sports, Water Slide)

All participants will be expected to adhere to all safety rules and follow instructions of the IROEC Aquatics Staff and Lifeguards. Anyone ignoring or not following expectations may be sidelined from the activity until sufficient retraining has occurred to insure everyone's safety.

An adult must accompany children 5 years and under, one-on-one in the water at all times.



Swim-checks required for deep-end access.

In consideration of the benefits to be derived and after carefully considering the risk involved and in view of the fact that the Boy Scouts of America is an organization in which participation is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of myself (and any minor children for whom I have the capacity to contract), I have carefully considered the risk involved and have given the participant identified below, my consent to participate in the Recreational Activities available at The Irvine Ranch Outdoor Education Center\* (IROEC).

In consideration of accepting this registration, and to the extent permitted by law, I hereby agree to release, indemnify, defend and hold harmless on behalf of myself (and any minor children for whom I have the capacity to contract), the IROEC, the Boy Scouts of America, Orange County Council, program staff, activity coordinators, all employees, volunteers, or other organizations associated with IROEC from and against any and all liabilities, claims, penalties, losses, or expenses (including attorneys' fees), of any kind or nature whatsoever, whether related to bodily injury, property damage or any other form of injury or loss to myself (and to any minor children for whom I have the capacity to contract), caused by any negligent act or omission of the IROEC or its officers, clients, agents or employees, arising out of or in any way related to participation in the activity for which I (and any minor children for whom I have the capacity to contract) am registering.

I give permission to the IROEC to take photographs of me, my children and any minor children for whom I have the capacity to contract, while participating in this activity for use in future publicity and understand that I will not receive any compensation for such use. In case of emergency, I hereby give my permission to the physician selected by the IROEC, to secure proper treatment, including hospitalization, anesthesia, surgery, or injections of medication for myself or any minor children for whom I have the capacity to contract.

*\*The Irvine Ranch Outdoor Education Center is owned and operated by Orange County Council, Boy Scouts of America.*

I acknowledge that the activities to which this release applies can be dangerous and as a result of signing below, I am accepting those risks for myself and for any minor participants for whom I can contract. I CERTIFY THAT I HAVE READ, UNDERSTAND AND AGREE TO ALL THE SPECIFICATIONS OF THIS WAIVER.

EVENT NAME OR GROUP

EVENT DATE(S)

NAME OF PARTICIPANT (Please Print)

SIGNATURE OF PARTICIPANT

DATE

NAME OF PARENT / GUARDIAN (Please Print)

SIGNATURE OF PARENT / GUARDIAN

DATE

THE IRVINE RANCH OUTDOOR EDUCATION CENTER  
2 Irvine Park Road • Orange, CA 92869 ~ 714.923.3191 ~ [info@outdooreducationcenter.org](mailto:info@outdooreducationcenter.org)





# **The Irvine Ranch Outdoor Education Center Academic Overnight Programs What To Bring List**

## **WHAT TO BRING LIST**

### **Items to Bring**

- Sleeping bag or sheets and a blanket
- Pillow
- Long pants (REQUIRED for all ropes course activities and zip line)
- Shorts (no short-shorts)
- Short sleeve t-shirts
- Long sleeve t-shirt (at least 1)
- Jacket appropriate for the weather
- Raincoat or Poncho (if the forecast calls for rain)
- Sturdy, closed-toe shoes
- Socks
- Pajamas
- Underwear
- Toothbrush/Toothpaste
- Towel and washcloth
- Medications
- Sunscreen
- Hat with sun visor
- Water bottle
- 2 pencils

### **Pool Usage – if pool is a part of your program**

- Bathing suit/swim trunks
- Towel (different from your bunkhouse towel)

### **Optional Items**

- Shampoo and conditioner
- Sunglasses
- Camera
- Binoculars
- A book to read

### **Things NOT to Bring**

- Cell phones
- Electronic games of any kind
- iPods or other personal music players
- Clothes that can't get dirty
- Food
- Alcohol and drugs
- Personal sports equipment
- Weapons
- Animals
- Anything that would be banned at school

***Remember to pack your things securely!  
Put your name on everything!***