



PATHKEEPERS *for* INDIGENOUS KNOWLEDGE

P.O. Box 463

Culpeper, Virginia 22701

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[www.pathkeepers.org](http://www.pathkeepers.org)

[info@pathkeepers.org](mailto:info@pathkeepers.org)

## **WELCOME TO PATHKEEPERS** **6<sup>TH</sup> ANNUAL NATIVE YOUTH LEADERSHIP CAMP!**

Dear Campers, Parents and Guardians:

Pathkeepers for Indigenous Knowledge is excited to announce our 6<sup>th</sup> Annual Native Youth Leadership Camp from **Sunday, July 15, 2018 to Sunday, July 22, 2018**. The Camp will be held at Woods Edge Farm in Culpeper, Virginia. All Campers must be between the ages of 11-17. There is no cost to attend the Camp. All donations are eligible for tax-deduction on your income taxes. Parents are responsible for their children's own travel to and from the Camp.

The Camp will provide Native youth with opportunities to experience traditional and cultural activities, explore educational goals, identify healthy and sustainable food and life choices, and explore their personal interests and tribal identity. By providing these opportunities, we aim to build Native youth's appreciation and understanding of traditional lifeways, and to also build their self-esteem, leadership and consensus skills, educational and career goals, and health and wellness. Of course, Campers also make great friendships and memories!

**CHECKLIST:** Included in your child's enrollment packet you will find the following forms, which must be mailed to Pathkeepers and post-marked by May 1, 2018. All forms are required, except Campers have the option to submit letter(s) of recommendation from tribal leaders, teachers, elders, etc. if they want to.

- Application
- Emergency Contact and Medical Information
- Camper Essay Question
- Tribal Enrollment or Native Descendancy Form
- Release Form for Photos, Voice Recordings, and Video Images
- Release of Liability and Equine Waiver Form
- Camp Policies and Procedures Form
- Camp Application Fee, \$10.00/youth (check/money order to "Pathkeepers for Indigenous Knowledge")
- Letter(s) of Recommendation from tribal leaders, teachers, elders, etc. (optional)

**ALL APPLICATIONS MUST BE COMPLETE IN ORDER TO ATTEND.  
MAIL COMPLETED APPLICATION, RELEASE FORMS, AND APPLICATION FEE  
BY MAY 1, 2018, TO:**

Pathkeepers for Indigenous Knowledge  
P.O. Box 463  
Culpeper, VA 22701

For more information, contact Pathkeepers at (202) 957-2696, or [info@pathkeepers.org](mailto:info@pathkeepers.org), or go to our website, [www.pathkeepers.org](http://www.pathkeepers.org).  
**THIS IS A DRUG, ALCOHOL AND CIGARETTE FREE EVENT.**

## ADDITIONAL CAMP INFORMATION

### THINGS TO BRING TO CAMP:

Towel	Necessary medicines/inhaler	Shirts/shorts/camp clothing
Toothpaste/toothbrush	Raincoat/poncho	Horse riding or cowboy boots
Sunscreen	Sleeping bag & pillow	Tennis shoes
Brush/comb	Hiking or sturdy boots	Jacket/pants
Soap/shampoo/conditioner	Swimsuit	

### THINGS **NOT** TO BRING TO CAMP:

Food of any kind	Pocketknives	Short shorts
Weapons of any kind	Radios/Tape Players	Tobacco Products
Electronics	Cell phones/iPods	Axe and Other
Video games	Jewelry/Valuables	Body Sprays

*Pathkeepers for Indigenous Knowledge is not responsible for loss or destruction of expensive or personal items.*

### MEALS, LODGING AND TRANSPORTATION:

All meals, lodging and transportation during the Camp will be provided by Pathkeepers for Indigenous Knowledge. If your child will be flying to the Washington, D.C. area, they should fly into Washington Dulles International Airport (IAD). Pathkeepers staff will make a couple of runs between the Camp and the Dulles airport (IAD) on Saturday, July 14<sup>th</sup>, to meet the campers at the airport. Please schedule your flights to arrive between 6:00 p.m. and 8:00 p.m. (eastern time) on Saturday, July 14<sup>th</sup>, and depart on Sunday, July 22<sup>nd</sup> between 5:00 and 7:00 p.m. (eastern time). We will transport your child to the Dulles airport and their departure gate. *Please call us to help coordinate flight times.* For those driving, plan to pick up your child between 1:00 p.m. and 2:00 p.m. on Sunday, July 22<sup>nd</sup>. Camp runs until 1:00 p.m., so please do not plan to arrive to pick up your child until after 1:00 p.m.

### NONDISCRIMINATION POLICY:

Pathkeepers does not discriminate on the basis of race, color, national and ethnic origin, in administration of its educational policies, admissions policies, and athletic and other Pathkeepers administered programs. Pathkeepers' camps and educational programs provide Indian students of any race, color, national and ethnic origin all rights, privileges, programs and activities generally accorded or made available to students in the Pathkeepers' camps and programs.

### ADMISSIONS PROCESS:

In the event we receive more eligible applications than we have funding, we will base admission to the Camp on a number of factors, including but not limited to, demonstrated interest in traditional and cultural knowledge, assessment of campers' motivation, educational and career aspirations, the order in which we receive applications, and letters of recommendation (if included).

Thank you.  
Pathkeepers for Indigenous Knowledge

**PATHKEEPERS 6<sup>TH</sup> ANNUAL NATIVE YOUTH LEADERSHIP CAMP (2018)  
APPLICATION**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender:  Male  Female

Preferred Name: \_\_\_\_\_ Tribe(s): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Street Address: (  same as child) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number(s): H \_\_\_\_\_ W \_\_\_\_\_ C \_\_\_\_\_

Email: \_\_\_\_\_

Person to Notify if Parent(s)/Guardian(s) cannot be reached:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email: \_\_\_\_\_

Camp Fee \$10.00/Youth Must Accompany Application    Check \_\_\_\_\_ Money Order \_\_\_\_\_

Additional Person(s) authorized to pick up child and their relation to child:

Name	Relation	Name	Relation
T-Shirt Size (circle one):	Small    Medium    Large	XL    XXL    XXXL	
Will your Child be bringing a Cell Phone to Camp? _____ If so, what is brand? _____			
Will you or your tribe be making a donation to Pathkeepers? _____			
If so, what is the amount? _____			

Administrative Use Only:

\_\_\_ App Compl    \_\_\_ Fee Received    \_\_\_ Accepted    \_\_\_ Wait List    \_\_\_ Contrib    \_\_\_ Letter    \_\_\_ Ph.

## EMERGENCY CONTACT AND MEDICAL INFORMATION (2018)

Child's Name	Date of Birth	M or F Gender	
Mother's/Guardian's Name	Father's/Guardian's Name		
( ) Home Phone	( ) Work Phone	( ) Home Phone	( ) Work Phone
Address	Address		
City, State, ZIP Code, Email	City, State, ZIP Code, Email		

### Alternative Emergency Contacts

Primary Alternate Emergency Contact	Secondary Alternate Emergency Contact
( ) Home Phone	( ) Home Phone
( ) Work Phone	( ) Work Phone
Address	Address
City, State, ZIP Code, Email	City, State, ZIP Code, Email

### Medical Information

Physician's Name	Phone Number
Insurance Company and Phone Number	Policy Number

Allergies/Special Health Considerations/Date of last tetanus injection

***Check here if your child has particular medical concerns and describe these in detail on a separate sheet of paper and sign and date that paper as well, and include your child's name on that paper.***

I authorize all medical and surgical treatment, X-ray, laboratory, anesthesia, and other medical and/or hospital procedures as may be performed or prescribed by the attending physician and/or paramedics for my child and waive my right to informed consent of treatment. This waiver applies only in the event that parent/guardian cannot be reached in the case of an emergency.

I give permission for my child to go on field trips and to be treated for minor scraps, bruises, cuts, etc. by Pathkeepers staff. I release Pathkeepers for Indigenous Knowledge and individuals from liability in case of accident or injury during activities related to Pathkeepers Native Youth Leadership Camp.

Parent's/Guardian's Signature	Date
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## CAMPER ESSAY QUESTION (2018)

Camper’s Name: \_\_\_\_\_

Please limit your answer to the space below.

**Describe your experience with and/or interest in traditional cultural knowledge, like beading, dancing, drumming, basket making, plant collection, etc. Describe how you can be a part of learning about traditional cultural knowledge and passing that information to younger generations. Also, describe your educational and career ambitions and goals and how they relate to your culture.**

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**TRIBAL ENROLLMENT OR NATIVE DESCENDANCY FORM (2018)**

To attend the Pathkeepers Native Youth Leadership Camp, a youth camper must be tribally enrolled or a descendant of an American Indian tribe. Enrollment will be determined by including an enrollment number, copy of CDIB card, or copy of child’s enrollment letter. Descendancy will be determined by including parents or guardians' enrollment certification, birth records, or other documentation. Please attach appropriate documentation to demonstrate which category you and your child are applying under. If you have any trouble with providing documentation, call Pathkeepers at 202-957-2696, to discuss alternate options.

Please indicate which category you and your child are applying under:

\_\_\_\_\_ (1) enrolled member of a federal or state recognized tribe,  
- state tribe(s)/enrollment number: \_\_\_\_\_; OR

\_\_\_\_\_ (2) descendant of an enrolled member of a federal or state recognized tribe,  
- state tribe(s): \_\_\_\_\_, and  
- state which child’s relative is enrolled, for example, “mother,” “father,”  
“grandmother,” “grandfather”: \_\_\_\_\_; OR

\_\_\_\_\_ (3) descendant of any American Indian who was subject to governmentally sanctioned policies treating American Indians differently than others based on their status as American Indians,  
- state tribe(s): \_\_\_\_\_), and  
- state which child’s relative is enrolled: \_\_\_\_\_.

I certify that my child meets the Pathkeepers Native Youth Leadership Camp tribal enrollment and descendancy requirements.

Print Name of Child/Camper: \_\_\_\_\_

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

Signature of Parent/Guardian and Relationship: \_\_\_\_\_

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

**RELEASE FORM FOR PHOTOS, VOICE RECORDINGS,  
AND VIDEO IMAGES (2018)**

I hereby give the Pathkeepers for Indigenous Knowledge and its sponsors, affiliates and agents the absolute right and permission to copyright, publish, televise, and use photographs, or audio recordings, or video tapes of me and my child, in which I and/or my child may be included. Said images or recordings may be included within or utilized as illustrations, advertisements or publications, either in printed form, on television, or in digital format. I hereby certify and covenant that I am of legal age. (A parent or legal guardian must sign for a minor.)

Print Name of Child/Camper: \_\_\_\_\_

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

Signature of Parent/Guardian and  
Relationship: \_\_\_\_\_

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

## RELEASE OF LIABILITY AND EQUINE WAIVER FORM (2018)

1. I hereby expressly waive any claim of liability against Pathkeepers for Indigenous Knowledge (“Pathkeepers”) including its employees and representatives, and release them from all liability in connection with Camp program and activities, including field trips.
2. I agree that I am voluntarily engaging in an Equine Activity, which includes but is not limited to, any and all Equine Activities (such as horse sports, competitions, trail riding, pleasure riding, visiting equine facilities, attending horse-related clinics or workshops, camps, lessons, and daily activities related to care and grooming, etc.).
3. I acknowledge that ANY kind of Equine Activity involves **INTRINSIC DANGERS** which means those dangers or conditions that are an integral part of equine activities, including but not limited to: (a) the propensity of equines to behave in ways that may result in injury, harm, or death to persons on or around them; (b) the unpredictability of an equine’s reaction to such things as sounds, sudden movement, and unfamiliar objects, persons, or other animals; (c) certain hazards such as surface and subsurface conditions; (d) collisions with other animals or objects; (e) the potential of a participant acting in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the equine or not acting within the participant’s ability; and (f) the possibility of equipment breakage -- any and all of which may result in serious injury or death to myself and/or others, to my child/ward, horse, or to property.
4. Therefore, in consideration for being permitted to participate in this Equine Activity, I **EXPRESSLY WAIVE ANY RIGHT TO SUE AND ASSUME ANY AND ALL RISK OF INJURY OR LOSS RESULTING FROM THE INTRINSIC DANGERS OF EQUINE ACTIVITIES** to my persons, including any person in attendance with me, animals, property, and agree to indemnify and hold harmless Pathkeepers, owners, family members, officials, employees, or any and all associated with Pathkeepers from and against any and all claims, demands, causes of action and liability of any nature which arises from connection with the Pathkeepers, owners, agents, event(s), et. al., including claims resulting directly or indirectly from alleged negligent acts or omissions of the Pathkeepers, owners, family members, employees, officials or anyone associated with Pathkeepers or event(s).
5. The Camper’s Parent or Guardian is responsible for the actions of any guest(s) he or she may bring on the premises.
6. Pathkeepers is not responsible for lost, stolen, or damaged property belonging to the Camper, Parent or Guardian, nor any injury, illness, or death to the Camper, Parent or Guardian during the Camp.
7. This waiver is binding upon myself, my spouse, legal representatives, heirs, executors and assigns. This agreement is subject to the laws of the Commonwealth of Virginia and the Virginia Equine Activity Liability Act, §§ 3.1-796.130-133.

Print Name of Child/Camper: \_\_\_\_\_

\_\_\_\_\_  
CAMPER’S PARENT/LEGAL GUARDIAN  
(print and sign name)

\_\_\_\_\_  
DATE



## **CAMP POLICIES AND PROCEDURES FORM (2018)**

I agree that my child will abide by the policies and procedures set forth by the Pathkeepers for Indigenous Knowledge Leadership Camp while attending camp and participating in camp activities. I assume full responsibility for any damage to person(s) or property caused by my child.

I hereby give the Pathkeepers for Indigenous Knowledge Leadership Camp Staff permission to seek medical attention for my child in the event that my contact persons or I cannot be reached, and Pathkeepers for Indigenous Knowledge staff determine that the medical treatment is absolutely necessary. I agree that the payment of such bills will be my sole responsibility.

I agree to pick my child up from Camp if the rules are not followed. I will be available to pick my child up when camp is over between 1:00 p.m. and 2:00 p.m. on Sunday, July 22, 2018, or make necessary arrangements to do so. If I do not pick up my child within one hour of pick up time and have not contacted the Camp coordinators with arrangements for pick up, I understand that the proper authorities may be contacted.

I have read and understand the policies of Pathkeepers for Indigenous Knowledge Native Youth Leadership Camp and in signing this form, agree to said policies.

Print Name of Child/Camper: \_\_\_\_\_

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

Signature of Parent/Guardian and  
Relationship: \_\_\_\_\_

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