Mammoth Camp

August 7-13, 2011

COUNSELOR PRE-PACKET

Mammoth Camp Checklist: Parent Counselors (PARENT COUNSELORS ONLY)

	Received	Not Received
Final Confirmation	_____	_____
Request/Authorization for Volunteer Driver	_____	_____
Driver's License Photocopy	_____	_____
Insurance Photocopy Must Show Full Coverage	_____	_____
Origina DMV Report (Clean) ($5 Reimbursement)	_____	_____
Excursion/Medical Form	_____	_____

Mammoth Camp Checklist: Parent Counselors (Drivers)

Vehicle (Circle One): Personal Rental (Provided)

Vehicle Information (Personal)

Make _____

Model _____

Year _____

Number of Passengers (Additional) ___
(Do Not Included Non-athletes)

NOTE: $150 credit will be put towards Mammoth fees for parents who drive their own personal vehicles. Gas will be covered by the camp.

NOTE: $50 credit will be put towards Mammoth fees for parents who driver rental vehicles. Those parents must be available to pickup the vehicles on Saturday, August 6, 2011 at Enterprise at 7:00pm. Transportation to Enterprise will be arranged.

Please confirm condition of vehicle before driving.

SPECIAL NOTES

Counselors at Mammoth Camp always represent the Gray team. Our team name was and will continue to be "The Spoilers." Each condo is assigned a specific color, they will represent that team for the remainder of the week and compete together with other members of their condo. They will choose a team name prior to camp.

COUNSELOR PACKET

Welcome to the 2011 Mammoth Camp Cross Country Packet. This packet has been created to inform you about the camp, responsibilities of a counselor, as well as the necessary forms you will need in order to attend the camp as a counselor. If you ever have any questions, please do not hesitate to call me at 562-860-5958/562-397-0867 or e-mail me at WUTANABE5@AOL.COM. Thank you very much for your assistance in this matter. You have played a large role in our ability to organize such a camp for these athletes.

Checklist: (COMPLETE ASAP) Packet Due NO LATER THAN July 15, 2011 [ASAP PLEASE]

NOTE We also will be limiting the number of counselors attending this year, as there have been numerous inquiries into attending this year's camp, thus late applications will not be accepted unless necessary. Due to district regulations, we must abide by the deadlines or risk cancellation of the camp.

- ✓ Available on August 7-13, 2011. [August 6, 2011 between 7pm and 9pm for vehicle pickup – RENTALS ONLY]
- ✓ Available on June 17, 2011 for the Mammoth Camp Parent Meeting followed by Drivers' Meeting. (Checklist and Information Will Be Provided If You Cannot Attend)
- ✓ Clean DMV Report ($5) – **SCHEDULE APPT. ASAP - 3/5 YEAR REPORT**
- ✓ Photocopies of Driver's License and Insurance **[Showing Coverage]** (Insurance Must Not Be the Card Only! Please Copy Bill with Detailed Coverage.)
- ✓ Voluntary Excusrion/Field Trip Notice/Medical Authorization Form [Attached] [Includes Non-Drivers]
- ✓ Volunteer Driver/Transportation Form [Read Carefully - Attached] [Drivers Only]
- ✓ Use of Personal Vehicle Form [Individuals Using Personal Vehicle]
- ✓ Drivers – Over 21 Years Old; Over 25 Years Old for Rentals

In addition: [Discount Applicable for Parents ONLY]

Transportation and lodging are two important aspects of which counselors play a role in this camp. Any assistance in these areas will be very much appreciated. The following questions allow us to determine what roles we shall place you in during the duration of the camp. (Please copy and return ASAP.)

- ➢ Are you willing and able to drive to Mammoth Lakes? ($50 Discount) YES NO
- ➢ If not, would you be willing and able to trade off driving with someone? YES NO
- ➢ Would you be able to provide a vehicle for transportation? ($150 Discount/5-6 PSG) YES NO

(Parents with athletes at camp will receive a discount if yes is circled and the vehicle is used. $100 for 3-4 PSG)

- ➢ If so, how many people (including yourself) does the vehicle hold? _____
- ➢ What is the make, model, and year of the car? _____
- ➢ Do you prefer to stay with the adult counselors ___ or your own separate private accommodations ___? (Due to budget constraints we cannot cover **additional** accommodations. Personal private condo $600-800/week.)

Keep in Mind:

We understand the eagerness of some to apply to join us at our Mammoth Camp. However in this process often times, people forget major things that need to be considered prior to agreeing to attend.

- ✓ You will be spending seven days with around forty high school students in Mammoth.
- ✓ Counselors will complete tasks such as organizing, cooking, judging, as well as competing in events.
- ✓ Counselors could be placed in charge of a certain condo, seeing that an adult is present in each one.
- ✓ All those present at camp will rise early in the morning for our morning run.
- ✓ A few meals and events on own may require the use of a counselor's personal funds.
- ✓ A schedule will be distributed and closely followed. Counselors will be given free time during certain events that do not require their attendance. Information will be provided in the packet.
- ✓ Counselors are expected to act appropriately and keep order, however, in the interest of the athletes, must also remember that we are at the camp to learn, train and HAVE FUN.
- ✓ Take precaution in all events, activities, ESPECIALLY when driving.

MAMMOTH CAMP 2011

Registration Forms

Name(s) _____

Student Name _____ Grade _____

Address _____

Phone (_____) _____ E-mail _____

Have you been a counselor at Mammoth Camp? YES NO

Special Food Requirements/Restrictions _____

_____

Comments/Suggestions on Run/Competitions/Activities _____

_____

Do you have any special talents/equipment you can provide? _____

_____

I will be attending the 2011 Cerritos Cross Country Mammoth Camp on August 7-13, 2011 I understand the duties and responsibilities required of me and understand my role as a counselor. (Additional space is for additional counselors.)

Print Counselor Name _____

Counselor Signature _____ Date _____

Print Counselor Name _____

Counselor Signature _____ Date _____

Print Counselor Name _____

Counselor Signature _____ Date _____

ABC Unified School District

VOLUNTARY EXCURSION/FIELD TRIP NOTICE AND MEDICAL AUTHORIZATION - ADULT

Name: _____

Destination: Mammoth Lakes, CA (Mammoth Cross-Country Camp)

Departure Date & Time: 8/7/2011 7:00 AM Return Date & Time: 8/13/2011 6:30PM

As stated in California Education Code Section 35330, I understand that I hold ABC Unified School District, its officers, agents and employees harmless from any and all liability or claims arising out of or in connection with my participation in this activity.

In the event of any illness or injury, I hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care from a licensed physician and/or surgeon as deemed necessary for my safety and welfare. It is understood that the resulting expenses will be the responsibility of the participant.

Signature: _____ Date: _____

Address: _____ Phone: _____

_____

Medical Insurance Carrier Policy No. Address

In the event of illness or accident, please notify:

_____

Name Address Phone

If there are any special medical problems, kindly attach a description of the problem to this sheet. Thank you for your cooperation

Note: *Any parent who transports any child (including his/her own child) on a school field trip is deemed a district volunteer and must submit to the Principal (1) Form 7804-RM (2) proof of automobile insurance and (3) a photocopy of a valid Driver's License.*

ABC Unified School District

Purchasing, Warehouse and Risk Management Department
16700 Norwalk Boulevard, Cerritos, CA 90703
(562) 926-5566 ext. 21212

REQUEST & AUTHORIZATION FOR USE OF VOLUNTEER DRIVER AND PRIVATE VEHICLE FOR A SCHOOL EVENT OR TRIP

Authorization is hereby requested for use of volunteer driver(s) in private vehicles for the following special trip(s):

Date(s)	Time(s) of Departure	Return
8/7-13/2011	7:00am	6:30pm
Destination/To	**From (Site)**	
Mammoth Lakes, CA	Cerritos High School	
Purpose		
Mammoth Cross Country Camp		

It is understood that this trip is subject to the following conditions:

1. **The District's liability insurance does not cover damage to private vehicles or passengers, but merely protects the District in the event of a claim of negligence in organizing the trip. The driver's personal automobile insurance provides the primary coverage.**
2. **The trip must be optional and all students MUST have the prior consent of their parent or guardian.**
3. **The driver must attach a copy of a valid California Driver's License, a DMV report issued within the last 90 days and a copy of proof of insurance as follows: Public Liability & Bodily Injury - $100,000/$300,000 per accident; Property. Damage $50,000 per accident; Medical payments - $2,000.**
4. **Vehicles must be registered in California and be in proper mechanical condition.**
   Vehicles may not be overloaded; each passenger must have and use a seatbelt restraint.
5. **Vehicles may not be overloaded; each passenger must have and use a seatbelt restraint.**
6. **An appropriate District Consent Form must be completed for each participant. Students Must have on file a "District Sponsored Field Trip Form," #7801-RM. Volunteers or Parents must have on file Voluntary Excursion/Field Trip Waiver Notice and Medical Authorization-Adult Volunteer or Parent, #7800-RM.**
7. **The transporting of pupil-personnel is limited to vehicles, which meet the requirements as outlined by the motor vehicle code of the State of California. The transporting of pupils/personnel in pickup trucks or vans with substandard passenger accommodations is expressly prohibited. A copy of rules relating to transportation of students is available from the ABC Unified School District Transportation Department, and it is the responsibility of the driver to obtain, read and abide by all rues. By signature below, driver certifies that he/she has knowledge of these rules and that the vehicle is in proper and safe working order.**
8. **In no instance is a student authorized to transport another student.**
9. **It is the policy of the District to discourage use, or private vehicles for transportation of students. Requester certifies that a diligent effort has been made to obtain District or approved commercial transportation and no such transportation is available or feasible.**

Cerritos High School
Site Requesting _____ **Individual's Name** _____

I have read, and understand the list of conditions and agree to comply with each of the requirements listed.

Driver's Signature (as it appears on license) _____ **Date** _____

Driver's License # _____ **Auto License #** _____ **Insurance Co.** _____ **Policy #** _____

Driver's Home Address _____ **Driver's Phone** _____

Authorization is hereby granted/denied for _____ **to transport a maximum of** _____ **Students in his/her private vehicle and the date(s) and time(s) to the destination specified above. Parents/guardian of all student passengers have been provided with a copy of this form.**

Authorized By _____ **Title** _____ **Date** _____

Distribution: Original: School Site. Copy: Risk Management – Driver
7816-RM (Rev. 1/99-15/4)

ABC UNIFIED SCHOOL DISTRICT
Use of Personal Vehicle

Age of Driver _____

Name of Driver _____ Driver's License No. _____

Address _____

Name of Insurance Company _____

Vehicle Make _____ Model _____ License No. _____

Number of Seat Belts Available _____ Number of Students Assigned _____

Destination _____ Date of Trip _____

I certify that the above-listed vehicle is mechanically safe*. Permission is granted to request a Department of Motor Vehicles check of my driving record.

*Vehicle has been inspected and all of the following are in **good working condition:**

Safe Tires
Safe Brakes (including emergency)
Lights-Front & Back
Windshield Wipers
Horn
Steering Equipment
Directional Signals
All Vehicle Glass Intact
Speedometer

The information on this form is accurate to the best of my knowledge and I am willing to take full responsibility for the use of my personal vehicle for this trip and agree to waive all claims against the district for any injury, accident, or death which may occur.

_____
Owner of Vehicle/Driver

_____
Date

I have read the above and approve the use of this vehicle for the purpose stated.

_____
Site Administrator

_____
School/Department

7102-B
(rev. 2/85)

NON-INSTRUCTIONAL OPERATIONS
Use of Privately-owned Vehicles

Guidelines for Use of Personal Cars in Transporting Students

1. Driver* must possess:
   a. Valid driver's license
   b. Minimum liability insurance as required by the State of California
   *Includes all district employees, volunteers, etc.
2. Number of passengers (including driver) may not exceed the number of permanently attached seats. In no case can the number of passengers, including driver, exceed the number of available seat belts. At no time shall the driver's vision be obstructed.
3. Trip routes to points outside of the district in excess of ten (10) miles must be approved in advance by the site administrator/program director or designee.
4. The limit on the distance of transporting students in private vehicles shall be a radius of 125 miles.
5. Drivers must be adults (21 years or older) for trips beyond a 20-mile radius. **Use of Personal Vehicle Form** must be completed and on file before a trip is taken. (See regulation 3542.4A (c).)
6. Consent slips from parents must be on file prior to a trip.*
7. Use of personal cars where hazardous road conditions exist is prohibited (to include hazardous conditions declared by California Highway Patrol, or other city, county, state or federal agencies authorized to monitor road conditions).
8. **Use of Personal Vehicle Form,** which will be provided by the district, must be completed before a trip is authorized.*

   In cases where the same driver is authorized to transport students throughout the year for illness or disciplinary purposes, the consent slip will not be required and a **Use of Personal Vehicle Form need be submitted only once a year. The section referring to destination and date of trip should indicate "as needed for illness or disciplinary purposes."

District Insurance - Any employee or authorized volunteer, while engaged in authorized activities within the scope of his/her assigned duties, is covered by district insurance for damages caused to persons or property as a result of negligence of the employee or volunteer. However when privately-owned vehicles are used on authorized school business, the **driver's personal liability insurance** will go first to settle any claims. District insurance will cover the unpaid excess up to the policy limits. Collision damage to privately-owned vehicles, owned by either employees or volunteers, is not covered by district insurance.

Student Use of Vehicles

Regulation 3541.4 presents the most **desirable** school district liability insurance posture for vehicles used by students. However, its strict application at the high school level makes a modern community-oriented curriculum and student activity program impossible. In those instances where student drivers and/or student vehicles are necessary, the following precautions should be taken by each teacher or activity supervisor:

1. Require the signing of an **Off Campus Activity Permission Form,** furnished by the district, by all presently foreseeable student drivers of a student vehicle and by student passengers in a student vehicle. The form must be completed and signed by a parent or guardian. (See 3541.4A) (b).)
2. Require the completion of the **Use of Personal Vehicle Form** before authorizing a student driver to use a private vehicle. Uninsured students shall not be authorized to drive or transport other students. (See 3541.4A (c).)
3. Upon request, the district transportation division, through the State Department of Motor Vehicles (DMV), will check on all student drivers who use a private vehicle to transport themselves or other students on school business at least once every two months. The director of maintenance, operations and transportation will make the DMV checks when sent a written request containing student's **name, address** and **driver's license number.**

The director of maintenance, operations and transportation will notify the teacher or sponsor that the DMV check was either satisfactory or unsatisfactory. Students with unsatisfactory DMV checks **shall not** be authorized to drive or transport other students.

As much as possible, all off-campus class activities (bowling, golf, work experience, research, etc.) should be scheduled prior to the first on-campus class or after the last on-campus class.