General Information (Departure from Chemehuevi)

Schedule and Activities
A schedule of the day’s events will be provided at departure. Students should expect to leave the Chemehuevi Education Center at 8 AM on Saturday, October 3. Students must be at the Old Woman Mountains Preserve (Painted Rock site) no later than 11 AM and can expect to return to the Chemehuevi Education Center at approximately, 6 PM on Sunday, October 4. During the trip, students will be tent camping, hiking, and cooking with adult supervision. The NALC will provide all food and water. Students should not bring food, since it is likely to spoil.

Location and Camping Information
The Old Woman Mountains Preserve is located in the Old Woman Mountains. This is a wilderness with no cell phone service. Students will be expected to follow instructions provided by instructors to ensure their safety.

Travel Information
Participants must provide their own transportation to the Old Woman Mountains Preserve. Travel time from Chemehuevi Reservation is approximately 2 hours. Participants are encouraged to carpool; a high clearance, 4WD vehicle is needed to access the campsite. Directions and additional information will be provided after submittal of this permission slip.

Packing List

Camping Supplies
- □ Sleeping Bag (required)
- □ Pillow (optional)
- □ Sleeping Pad (optional)
- □ Tent (optional)*

Personal Items and Miscellaneous
- □ Toothpaste and Toothbrush
- □ Any Prescription medication
- □ Sunscreen
- □ Reusable Water Bottle

Clothing
- □ t shirt
- □ hat
- □ shorts
- □ pants
- □ sweatshirt
- □ underwear
- □ raincoat/windbreaker
- □ Socks
- □ Sneakers (must be close-toed)
- □ bandana (optional)
- □ long-sleeve shirt (optional)
- □ Sandals (optional)

*Please let the NALC know if your child requires a spot in a shared tent.

Contact information:
Kurt Russo, Executive Director, NALC
Phone: 360-961-4554.
Email: frkvalues@aol.com

Instructors: Matthew Leivas, Chemehuevi [Chemehuevi Indian Tribe]
            Sean Milanovich, Cahuilla [Agua Caliente Band of Cahuilla Indians]
PARENTAL CONSENT AND MEDICAL AUTHORIZATION
For NALC Learning Landscapes Trip on October 3-4, 2015

Permission
I grant permission for my child to attend the Native American Land Conservancy (NALC) event listed above and to participate in NALC activities, which will include hiking and tent camping.

Activity Release
I further grant permission for my child to participate in all supervised activities except as noted below:

____________________________________________________
____________________________________________________
____________________________________________________
____________________________________________________

Medical Release
I hereby grant permission to the NALC and the person acting as its designee in supervising my child, permission to act on my behalf to secure hospitalization or medical services deemed necessary and appropriate by a physician, should my child require medical treatment while participating in this event. I hold harmless the NALC, its staff, contractors, and other supervising adults from any form of negligence and/or improper treatment incurred in the procurement of medical services or process of hospitalization and/or treatment. My child is voluntarily participating in this activity and I am aware of the risks associated with traveling to/from and participating in this event. I agree to assume the risks associated with these activities.

____________________________________________________

Child's Name (please print)  Guardian's Name (please print)

☐ Home  ☐ Cell

Guardian's Phone Numbers  Email

Home Address and City

☐ Home  ☐ Cell

Additional Contact Person and Relationship to Child  Additional Contact Person’s Phone Number

Medical Instructions/Restrictions/Allergic Reactions  Insurance Provider and Policy Number

Other Information
Please list any allergies to drugs, foods, plants, insects, etc. Also list any other dietary restrictions:

Please list any prescription medication (and dosage information) to be taken by the participant:

Please list any additional information relevant to participating in NALC activities (surgeries; serious injuries; chronic or recurring illness; medical conditions such as epilepsy or diabetes; psychiatric counseling or indications, etc.):

Signature of Parent or Legal Guardian  Printed name of Guardian  Date

Please Mail Completed Form by September 15 to:
Native American Land Conservancy, PO Box 3074, Indio, CA 92202