

CAMP MIAKONDA C.O.P.E. INFORMATION

Thank you for choosing Camp Miakonda's C.O.P.E. course. The following information should help you in planning your outing. Please read carefully, and fill out all corresponding forms.

Before we can permit an individual to participate in the program, we must have a Health/Understanding form before they can go on the course. (Completed by parent/guardian if under age 18)

**RETURN HEALTH/UNDERSTANDING FORMS FOR EACH PARTICIPANT AT
LEAST 10 DAYS IN ADVANCE OF COURSE**

For your convenience, an original of the Health/Understanding form is enclosed. Please copy for each participant in your group. Youth forms **MUST** be signed by a parent or guardian in two places to be allowed on the course. All adults accompanying a group must also supply a completed form. Please verify signatures.

You will also need to:

- Select a course date and two alternate dates.
- Complete and return the C.O.P.E Program Survey with payment.
- When your forms are received, we will select one of the dates you have chosen and contact you.
- Return Health/Understanding form for each participant 10 days before your scheduled day on the course.
- Please inform your group members of the types of clothing to wear and what to bring.

Fact Sheet

PROJECT C.O.P.E.

WHAT IS PROJECT C.O.P.E.?

Since its founding in 1910, the Boy Scouts of America have offered its members an outdoor program stressing personal fitness. The organization is also recognized for its leadership development with youth and adults.

HISTORY AND BACKGROUND

The 1979 Dalajamb International Encampment in Sweden provided a number of challenging events of great interest to Scouts from the United States. Foremost among them was the pioneering course constructed by a group of veteran Swedish Scouts. This course was laid out in a heavily wooded area and utilized terrain elevations as part of the design. Bridges were built across ravines of varying widths and depths. Zip lines were swung for traversing the ravines, and novel constructions were used for climbing.

Scouts took to this course with such enthusiasm that an effort was made to duplicate some of the features at the 1981 National Scout Jamboree at Fort A. P. Hill, Va. The Challenge Trail and the Pioneering Area became two of the jamboree's most popular offerings.

SUCCESSFUL EXPERIMENT

The National Council of the Boy Scouts of America was interested in programs equal to the successful overseas and jamboree activities that could be promoted on a nationwide basis. Project C.O.P.E. was identified as having that potential because it offered older Scouts the kind of challenging and exciting program that encouraged them to return to summer camp and increased their tenure. An unexpected dividend was the use of Project C.O.P.E. by youth and adults outside of Scouting. These groups found it an excellent tool for developing both team effort and individual achievement.

Project C.O.P.E. is an acronym for Challenging Outdoor Personal Experience. It is comprised of a series of outdoor challenges; beginning with basic group initiative games (warm-up activities) and progressing to more complicated low-course and high-course activities. Some of these events involve a group effort, while others test individual skills and agility. Participants climb, swing, balance, jump, rappel, and think through solutions to a variety of challenges. Most participants find that they can do much more than they initially thought they could.

Project C.O.P.E. is an exciting outdoor activity that can attract and hold older boys in Scouting. It is designed to meet the needs of today's youth who are seeking greater challenges to their physical and mental abilities. The underlying goals of a Project C.O.P.E. course are consistent with the methods of Scouting. Group activities are ideal for emphasizing the patrol method and in developing leadership. Individual activities help promote personal growth.

A Project C.O.P.E. course provides an opportunity for every participant to achieve success as an individual and as a member of a patrol or team. The activities are not designed to be competitive or to be a race against time. More important objectives including building individual confidence and developing leadership and a sense of common cooperation among team members are emphasized. The course is designed to build more self-confidence in a shorter length of time than anything most people have experienced.

OBJECTIVES

Before implementing a course, the group/supervisor should determine what it seeks to accomplish. Seven major goals are commonly associated with Project C.O.P.E. activities:

1. Development of leadership
2. Problem solving
3. Communication
4. Self-esteem
5. Trust
6. Decision-making
7. Teamwork

(A videotape of a group using the C.O.P.E. course is available upon request)

SAFETY

National promotion of Project C.O.P.E. enables the Boy Scouts of America to establish standards designed to meet Scouting's needs and concerns for safety within a strong network. The safety of Scouts, leaders, and staff is imperative. Mere concern about safety is not sufficient. Directors and staff members must demonstrate this concern and must be knowledgeable and personally skilled in the respective course activities, who are effective teachers, and who are constantly alert to safety procedures and participants' needs. Prospective staff members are carefully screened. A qualified staff has been assembled with enough members to ensure that continuation of the program is not dependent on one or two people. Standards for Project C.O.P.E. are stringent, so that the experience will be both safe and successful.

Only C.O.P.E. trained and certified personnel run and supervise the course.

C.O.P.E. COURSE AT CAMP MIAKONDA

The C.O.P.E. Course at Camp Miakonda is one of the best in the America. Sign up to have your troop join in the fun with activities such as the Telephone Pole Shuffle, Tire Traverse, Giant's Ladder, and the Meat Grinder!

Reservations may be made by contacting the Miakonda Operations Director at Camp Miakonda or by calling the Operations Office at (419) 882-9607 or Camp Office at (419) 882-1651. The fees for C.O.P.E. will vary according to activities chosen. **C.O.P.E. fees must be prepaid.**

Overnight accommodations are available on a first-come/ first-serve basis at Camp Miakonda. The camp's food service offers a variety of meal plans to groups. Plans include meals on an individual basis, (Breakfast, Lunch or Dinner) or the weekend meal plan. Accommodations and meals must also be prepaid.

WHAT TO WEAR/BRING (*Please share this information with all participants*)

C.O.P.E. is a Rain OR Shine (or snow) activity. You must wear long pants to participate on the course. In general, participants should wear old but durable long, loose fitting jeans or pants with a belt (no large buckles), T-shirt or long sleeve shirt according to the weather, and athletic shoes or lightweight boots. A hat is necessary in cool weather. Nylon jackets or other clothing with a slick shiny surface should not be worn. If a nylon jacket is worn on the course the participant will be asked to remove it for certain events. Please have participants dress for the weather! For cooler weather, dress in layers of clothing that can be removed as the day warms. Sweat suits, shorts, and elastic waist pants without a belt are NOT appropriate clothing for C.O.P.E. Expect to get dirty!

Bring a bandanna, rain gear, insect repellent, and personal water bottle and/or cup. Long hair should be pulled back and secured. Do not wear jewelry or watches. All pointed objects should be removed from the participants' pockets.

Leave all valuables at home or locked in your car. Camp Miakonda cannot be responsible for items brought to camp. Mark all outerwear and other items brought to camp with name of participant and group name. If your group is doing the high course participants should bring leather palm gloves, bike gloves or leatherwork gloves. Helmets will be supplied and must be worn at all times in the high course area.

PHONE NUMBERS

If you have questions, please call Camp Miakonda (419) 882-1651, and ask to speak to John Bolster. Emergency telephone number for the day your group is on the course: (419) 882-1651/ Camp Ranger, (419) 467-8528, and John's Cell phone (419) 392-3595. Remember - they are for Emergency use only.

DIRECTIONS TO CAMP MIAKONDA / C.O.P.E.

Camp Miakonda is at 5600 West Sylvania Avenue, Toledo. The entrance is ¼ mile east of the intersection of Holland-Sylvania and West Sylvania Avenue on the north side of the road. Or ¾ of a mile west of Corey/Whiteford Road on West Sylvania Avenue on the north side of the road. You will enter into the parking lot. Park and lock the car.

After arrival at Camp Miakonda, have all participants meet their C.O.P.E. Instructor at Miakonda Lodge. Miakonda Lodge may be reached by leaving the parking lot on the paved trail (road) near the ranger's residence. Walk over the bridge and up the hill. At the top of the hill on the right is Miakonda Lodge.

SPECIAL NEEDS

If you have a large group and wish to have some input into how they are divided into small groups of 8-15 please inform the director when you are contacted.

MEALS

Meals are available from the Camp Miakonda Food Service. All meals are served in the Ford Center the camp's dining hall. Arrangements for food service can be made on the C.O.P.E. Program Survey. Special dietary needs can be accommodated when prior arrangements are made. We have a shelter area available for picnics. The picnic shelter and C.O.P.E. area is approximately a one-half mile walk from the parking lot.

C.O.P.E. SOUVENIRS

Hats and camp souvenirs are available at our Trading Post if arrangements are made before coming to camp. Indicate your interest on the C.O.P.E. Program Survey.

FORMS TO RETURN AND FEES

All fees are due within 10 days of making the booking.

**Erie Shores Council, BSA
Miakonda Operations
5600 W. Sylvania Avenue
Toledo, Ohio 43623**

Make checks payable to: Erie Shores Council, BSA

A delay in returning forms ahead of time will result in a delay in getting on the course while necessary paperwork is completed the day of your visit.

Payment of fees within 10 days of booking may result in your reservation being canceled.

C.O.P.E. programs are a Rain OR Shine (or Snow) activity.
Fees will not be returned in the case of inclement weather if you choose to cancel because of weather.

Changing scheduled program dates with less than two weeks notice may result in an extra fee being charged.

Erie Shores Council	Fee Schedule	
Erie Shores Council Scout Units & Schools	Low Course	\$ 20.00/ person
	High Course	\$ 30.00/ person
	High/Low Combined	\$ 45.00/ person
Non Council Groups	Low Course	\$ 30.00/ person
	High Course	\$ 45.00/ person
	High/Low Combined	\$ 60.00/ person
Food Service	Lunch	\$ 6.00/ person

C.O.P.E. Program Survey

Course Type

Group: _____ Course Dates: 1. _____ Low High
 2. _____ Low High
 3. _____ Low High

Indicate the time you would like the program to start. _____

Indicate the time you would like the program to end. _____

Name and telephone number of the group contact person. This form is to be completed and returned, completed and with full fees, within 10 days of scheduling the course.

Participants must be: 13 years old or older, dressed as requested and must have a Health Understanding form properly signed in order to participate.

Fee per Participant \$ _____ X number of participants _____ = \$ _____
 Fee for meals per participant \$ _____ X number of participants _____ = \$ _____
TOTAL \$ _____

(Make checks payable to Erie Shores Council, BSA.) Fees returned only in the case of verifiable illness or injury less 15% administrative fee. All requests must be made in writing within 10 days of course date.

Our group(s) would like to work on the following C.O.P.E Objectives: Rate 1 to 7, with 1 being the highest priority.

- | | |
|------------------------------|---------------------|
| _____ Leadership Development | _____ Communication |
| _____ Trust | _____ Teamwork |
| _____ Problem Solving | _____ Self Esteem |
| _____ Decision Making | |

We would like to have the Trading Post open at some time during our visit. Yes ____ No ____

Signature of contact person: _____ Phone _____ Date _____

Return: Program Survey, Hold Harmless Agreement and payment within 10 days of scheduling. The Health/Information form for each participant must be returned no less than 10 days before course date.

Return forms to: Miakonda Operations
5600 W. Sylvania Avenue
Toledo, Ohio 43623.

Indicate method of payment:
 Check _____
 Purchase Order _____
 Master Card or VISA Exp. Date: _____
 Account # _____
 Account Name: _____

ERIE SHORES COUNCIL BOY SCOUTS OF AMERICA

C.O.P.E. Health/Understanding Form

Participant Name: _____ Age: _____ Course Date: _____

Address: _____
Number and Street, city zip

Home Phone: () _____

Emergency Medical Information for Participant

Check all items that apply to health history, past or present, and give explanation for all checks.

- | | |
|---|----------------------------|
| Allergies _____ | Asthma _____ |
| Food _____ | Convulsions/Seizures _____ |
| Medicine _____ | Diabetes _____ |
| Insects _____ | High Blood Pressure _____ |
| Other _____ | Kidney Problems _____ |
| Back Problems _____ | Head/Neck Problems _____ |
| Sprains _____ | Broken Bones _____ |
| Surgery _____ | Hernia _____ |
| Serious Injury _____ | Serious Illness _____ |
| Ears _____ | Eyes __, Glasses _____ |
| Contacts _____ | Nervous Condition _____ |
| Teeth __, Dentures _____, Bridge _____ | Mental Retardation _____ |
| Fainting _____ | Hemophilia _____ |
| Heart Condition _____, Murmur _____ Rheumatic Fever _____ | |
| Acrophobia / fear of heights _____ | |
| Claustrophobia (fear of narrow or closed spaces) _____ | |

Last Tetanus toxoid inoculation date: _____

List any medications to be taken, and schedule for them, while at camp:

List any physical or behavioral conditions that might prevent full participation in strenuous physical and mental activities: _____

Health/Accident Insurance Carrier: _____ Policy Number: _____

In case of an emergency, please contact: Name: _____

Address: _____

Business address and phone: _____

Home Phone: _____ Relationship: _____

If the person named above is not available, please contact:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Preferred Physician: _____ Phone: _____

Preferred Dentist: _____ Phone: _____

Emergency Medical Authorization

I understand that every effort will be made to contact my spouse or next of kin at the above number(s). In the event that they can not be reached, I hereby give my permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery, injections, or medication for me.

Date: _____ Signature: _____

Statement of Understanding

I am aware in signing this statement of understanding for participation in C.O.P.E. that certain activities are physically, mentally and emotionally demanding. Physical fitness will increase my ability to participate. I shall consult with the Instructor before participation in any activity in which I feel my ability to participate may be limited or if I have questions about an activity. Some of the possible dangers that I may encounter while on the C.O.P.E. course include, but are not limited to, poison ivy, falling on the trail, cuts, bumps, bruises, insect bites, sprains, and fractures. Trained Instructors will supervise all activities to minimize risks. C.O.P.E. activities are held outside in all types of weather. I shall dress accordingly (rain gear, gloves, warm clothing). I recognize the necessity of following all safety procedures and instructions during activities on the C.O.P.E. course. I acknowledge the risks associated with this activity.

Date: _____ Signature of parent/guardian or adult participant: _____

Date: _____ Signature of youth: _____

C.O.P.E. COURSE EVALUATION

Please take five or ten minutes to help us evaluate the C.O.P.E. course. On the blanks below, mark "Y" for yes, "N" for no, "S" for somewhat, or leave blank if it does not apply. Then return it to a C.O.P.E. instructor or director before leaving camp.

C.O.P.E. course leader's name(s) _____

Group name: _____ C.O.P.E. Course date: _____

During the C.O.P.E. course I experienced:

_____ laughter

_____ fear

_____ physical challenge

_____ trust in others

_____ friendship

_____ mental challenge

_____ confidence in myself

_____ a safe feeling

_____ group support

_____ boredom

The C.O.P.E. course instructors were:

_____ effective

_____ caring

_____ encouraging

_____ competent in leading the group

_____ competent in using the equipment

_____ I want to go on the C.O.P.E. course again.

What was the best thing you got out of the C.O.P.E. course?

What do you see as the values of the C.O.P.E. course?

List strengths and/or weaknesses of your C.O.P.E. staff:

Additional comments:

Your name (optional): _____ female _____ male _____

Age: _____ 13-18 _____ 19-25 _____ 26-35 _____ 36 and up