

## Leadership Challenge Information

Thank you for choosing the Camp Miakonda's Leadership Challenge program. 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 Leadership Challenge 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.

# "Leadership Challenge"

## (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 jamborees 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 participant 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.

### **Leadership Challenge program at Camp Maikonda**

The Leadership Challenge Program at Camp Miakonda is one of the best course sites in the United States. Sign up to have your business / organization join in the fun with activities such as the Telephone Pole Shuffle, Tire Traverse, Giant's Ladder, and the Meat Grinder! And all the time they are developing their skills in: Leadership, Trust, Problem Solving, Decision making, Communications, Teamwork and Self Esteem.

Reservations may be made by contacting the Miakonda Operations Director at Camp Miakonda or by calling the Operations Office at (419) 882-1651. The fees for the Leadership Challenge program will vary according to activities chosen. Program and food service 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 be prepaid.

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

## **CAMP MIAKONDA LEADERSHIP CHALLENGE INFORMATION**

Thanks for choosing Camp Miakonda's Leadership Challenge program. The following information should help you in planning your outing. Please read carefully!!

- Select a program date and two alternate dates.
- Complete and return the following forms with payment:
- Leadership Challenge Program Survey
- Hold Harmless Agreement
- 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.

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

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 and participate in the program.

**For your convenience, an original of the Health/Understanding form is enclosed. Please copy for each participant in your group.** All others accompanying a group must also supply a completed form.

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

Leadership Challenge 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! Layers of clothing that may be removed as the day warms work best for cool weather.

Sweat suits, shorts, or elastic waist pants without a belt are NOT appropriate clothing for Leadership Challenge. 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. Pockets should be empty of all pointed objects.

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 leather work gloves are a good choices. 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) 392-3595, Camp Ranger, (419) 467-8528.

### **DIRECTIONS TO CAMP MIAKONDA / LEADERSHIP CHALLENGE**

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 Leadership Challenge 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 Leadership Challenge 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 Leadership Challenge area is approximately a one-half mile walk from the parking lot.

### **SOUVENIRS**

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

**RETURNING FORMS 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.** Leadership Challenge 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.

## Fee Schedule

Leadership Challenge	Low Course	\$ 80.00/ person
	High Course	\$ 105.00/ person
	High/Low Combined	\$ 150.00/ person
Food Service	Continental Breakfast	\$ 5.50/ person
	Lunch	\$ 6.50/ person

**ERIE SHORES COUNCIL  
BOY SCOUTS OF AMERICA  
NON-BSA GROUPS**

**Miakonda Operations  
5600 West Sylvania Avenue  
Toledo, Ohio 43623**

**LETTER OF AGREEMENT ESTABLISHING CAMP USE**

This letter of agreement is for the purpose of establishing the use of Camp Miakonda for the purpose the Leadership Challenge.

1. \_\_\_\_\_ to have the of the following facilities from \_\_\_\_\_ beginning at \_\_\_\_\_ a.m. / p.m. to \_\_\_\_\_ at \_\_\_\_\_ a.m. / p.m. \_\_\_\_\_ .

2. The Erie Shores Council requires the following documents and \_\_\_\_\_ agrees to provide the Erie Shores Council with the following documents at the time of making a reservation for the use of council facilities.

a. A certificate of liability insurance with a minimum of \$1,000,000 CSL with the Erie Shores Council, Boy Scouts of America, and the National council, Boy Scouts of America, named as additional insured, ten (10) days written notice of cancellation, and the period of time involved.

b. A Hold Harmless Agreement. (copy Attached)

c. A roster showing the names of all participants in this activity. (Due at camp check in).

3. It is understood and agreed to by both parties that the fee for use of Camp Miakonda is \_\_\_\_\_.

4. It is understood and agreed by both parties that all fees are required to be paid at the time reservations are made. Reservations are not confirmed until fees are paid,

5. It is understood and agreed by both parties that \_\_\_\_\_ shall be responsible for any and all damages to camp property which may reasonably be attributed to the actions of the said group and \_\_\_\_\_ agrees to promptly pay any and all reasonable damage claims when presented.

6. It is understood and agreed by both parties that no alcoholic beverages or illegal drugs of any kind are permitted to be used on the premises.

7. It is understood and agreed to by both parties that the group will abide by any and all of the camp operating rules as outlined on the attached sheet and directions and instructions of the Camp Ranger, Camp Director or Camp Operations Director.

8. It is understood and agreed to by both parties that should the group fail to provide proper leadership or fail to abide by camp rules or directions of the Camp Ranger, Camp Director or Camp Operations Director the Erie Shores Council Camp Management Staff may, in their discretion, terminate this agreement and require the renting parties to evacuate the camp, forfeiting any and all fees and monies agreed to herein.

9. Accident insurance is not provided by the Council. Groups and individuals are responsible for their own accident insurance coverage.

AGREED TO BY:

Erie Shores Council, Inc. #460  
Boy Scouts of America

\_\_\_\_\_  
By

\_\_\_\_\_  
By

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

(419-882-9607) Operations Office

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Telephone

NOTE: Please return the original and one copy along with other required documents and the fees to:

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

**Make Checks Payable To: Erie Shores Council BSA**

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FOR COUNCIL USE

Camp information sheet issued \_\_\_\_\_

Insurance Certificate \_\_\_\_\_

Hold Harmless Agreement \_\_\_\_\_

Roster of Participants \_\_\_\_\_

CAMP PERMIT \* \_\_\_\_\_

CABIN/SITE \_\_\_\_\_

CAPACITY \_\_\_\_\_



# LEADERSHIP CHALLENGE 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: \_\_\_\_\_

A Parent of Legal Guardian must sign below if person attending is under the age of 18.

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

**Statement of Understanding**

I am aware in signing this statement of understanding for participation in Leadership Challenge 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 Leadership Challenge 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. Leadership Challenge 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 Leadership Challenge course. I acknowledge the risks associated with this activity.

Date: \_\_\_\_\_ Signature participant: \_\_\_\_\_

A Parent of Legal Guardian must sign below if person attending is under the age of 18.

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

**Note: Duplicate this form and distributed to the individuals attending. At the conclusion of the program our staff will collect this form.**

## LEADERSHIP CHALLENGE COURSE EVALUATION

Please take five or ten minutes to help us evaluate the LEADERSHIP CHALLENGE 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 Leadership Challenge instructor or director before leaving camp.

\_\_\_\_\_  
Leadership Challenge course leader's name(s)\_\_\_\_\_

Group name:\_\_\_\_\_Leadership Challenge course date:\_\_\_\_\_

During the Leadership Challenge course I experienced:

- |                           |                       |
|---------------------------|-----------------------|
| _____laughter             | _____fear             |
| _____physical challenge   | _____trust in others  |
| _____friendship           | _____mental challenge |
| _____confidence in myself | _____a safe feeling   |
| _____group support        | _____boredom          |

The Leadership Challenge course instructors were:

- |   |                                     |
|---|-------------------------------------|
| _____effective  | _____caring                         |
| _____encouraging  | _____competent in leading the group |
| _____competent in using the equipment                       |                                     |
| _____I want to go on the Leadership Challenge course again. |                                     |

What was the best thing you got out of the Leadership Challenge course?

What do you see as the values of the Leadership Challenge course?

List strengths and/or weaknesses of your Leadership Challenge staff:

Additional comments:

Your name (optional): \_\_\_\_\_ female \_\_\_\_\_ male \_\_\_\_\_

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

**ERIE SHORES COUNCIL  
BOY SCOUTS OF AMERICA**

**Miakonda Operations  
5600 W. Sylvania, Ohio 43623**

**HOLD HARMLESS AGREEMENT**

\_\_\_\_\_ shall indemnify, hold free and harmless, assume liability for, and defend the Boy Scouts of America, it's chartered affiliates, agents, servants, employees, officers, 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 which the Boy Scouts of America, its chartered affiliates, agents, servants, employees, officers, and directors may pay or become obligated to pay on account of any, all and every demand for claim or assertion of liability, or any claim or action founded thereon, arising or alleged to have arisen out of \_\_\_\_\_ use of real or personal property belonging to the Boy Scouts of America, its chartered affiliates, agents, servants, employees, officers and directors, or by any action or omission \_\_\_\_\_ it members, agents, servants, employees, officer or directors.

\_\_\_\_\_  
Organization

\_\_\_\_\_  
Agent Signature

\_\_\_\_\_  
Title

Property and period to be used: As set forth in letter of agreement