

Resurgence Schools Summer Program 2018



The Resurgence Schools Summer Program aims to engage students with project based learning around culturally relevant topics. The theme for our program this summer is: *Our Responsibility to Ourselves, Our Land, and Our Water*. This will be an incredible experience for students to explore new ideas and to meditate upon cultural traditions.

Programmatic Overview

Resurgence Schools seek to:

- Support and cultivate the wellbeing, (cultural, intellectual, emotional, physical, spiritual) & leadership of indigenous youth through community based social change making.
- Develop healthy and resilient youth and inter-generational relationships and communities.
- Develop transformative pedagogies and programs that support the resurgence of indigenous peoples.

Program Details

When: July 2nd – August 3rd // Monday – Friday from 9 am – 3:30 pm
* Class will not be held July 4th *

Cost: There is no cost to students. Breakfast and lunch will be provided.

What to expect:

- Students should come dressed in active wear daily. The first part of the day will generally be spent outside. The second part of the day inside.
- Students will be required to put away all cellular devices in a secure location during programming.
- A day hike every week
- Three day overnight camping trip Aug 1st – Aug 3rd

Credits to be gained:

Students will be able to receive credits in the following areas upon completion of the appropriate learning targets: Environmental Science/Biology (.25 - .50 credit), Physical Education (.25 credit), Cultural Arts (.25 credit), Health (.25 - .50 credits), Language Arts (.25 credit).

**** To be eligible to gain credit, students may not miss more than 3 days****

Resurgence Schools Summer 2018 Application



Personal Information:

Name: _____ Preferred Pronoun (circle): Him / Her / Them

Date of Birth: _____ Gender _____ Male _____ Female _____ Other

Mailing Address: _____

Your Phone: _____ Grade going into: _____

School: _____ ** Please attach a current transcript to this packet **

Ethnicity (may select more than one): _____ White _____ Hispanic/Latino American

_____ Asian _____ Black/African American _____ American Indian/Alaskan Native

_____ Native Hawaiian/Pacific Islander Tribe/Affiliation: _____

Legal Guardian

Name: _____ Guardian Phone: _____

Language Spoken at home: _____ Relation to Youth: _____

Additional Emergency Contact

Name: _____ Phone: _____

Relation to Youth: _____

Insurance Information

Medical Insurance Company: _____ Policy #: _____

Shirt Size: Sm Med Lrg XL XXL XXXL

Physical Activity Level: Low 1 2 3 4 5 High

List all allergies: None

List all medications: None



Native American Youth and Family Center

5135 NE Columbia Boulevard, Portland, Oregon 97218
P (503) 288-8177 | F (503) 288-1260 | www.nayapdx.org

NAYA Staff Use Only:

Date Received ____/____/____

ETO ID# _____

NAYA Legal Consents and Releases

These consents are good for two years, except in the case of the Healing Circle where it is good for 90 days.

Permission/consent to photograph, video, interviews and quotations:

I give consent for myself or my child to participate in NAYA Family Center marketing activities, including interviews, the use of quotes, and the taking of photographs, movies or video tapes by NAYA Family Center employees. I grant NAYA Family Center the right to edit, use, and reuse said products for non-profit marketing purposes including use in NAYA Family Center grant writing and marketing in print, on the internet, and all other forms of media. I also hereby release NAYA Family Center and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

I agree: **Yes** **No**

Please initial: _____

Release of Liability/Assumption of Risk:

By participating in the programs and activities of the NAYA Family Center, I agree to hold harmless the NAYA Family Center, and release any and all rights or claims to damages that may arise in connection with or as a result of myself or my child's participation in the programs and activities of the NAYA Family Center. This release applies to the NAYA Family Center, including any and all officers, agents, employees, volunteers, sponsors, coaches, and/or damages.

I agree: **Yes** **No**

Please initial: _____

Consent to Emergency Care and Relevant Information:

In the event of an emergency, if reasonable attempts to contact persons listed are unsuccessful, I give consent to the NAYA Family Center to transport myself or my child to the doctor or to the Emergency Medical Department of the nearest hospital. If my doctor cannot be contacted, all medical treatments deemed necessary by the attending licensed physician, including examinations, anesthesia, operations, and diagnostic procedures, may be administered. I further acknowledge that I will be responsible for all fees and costs associated with the medical treatment that are not covered by my insurance.

I agree: **Yes** **No**

Please initial: _____

Consent for Transportation in NAYA Vehicles and NAYA Staff Vehicles

I understand that NAYA Family Center programs and activities may include local and long distance travel, and give permission to the NAYA Family Center to provide transportation. The participant understands and agrees to abide by the following rules with being transported.

- All participants must be responsible for wearing seatbelts at all times.
- All children under 80 lbs. are required to be properly placed in a child seat or booster seat.
- Appropriate conduct will be mandatory when being transported.
- Smoking is not allowed in NAYA Family Center vehicles or personal staff vehicles when being transported.

A participant may be subject to suspension of transportation privileges if found in violation of any rules of transportation, or for disobeying the NAYA Family Center staff providing the transportation.

I agree: **Yes** **No**

Please initial: _____

Resurgence Schools Summer Program 2018

Participant Permission & Liability Waiver

As legal guardian, I give my sole permission for my child to attend the Resurgence Schools Summer Program 2018. I understand that by signing below I allow full participation in all events, groups, projects, and activities that include but are not limited to:

- Off-site transportation in private vehicles, rented vehicles, and/or public transit
- Weekly hiking trips to destinations around and outside of the Portland area
- Participating in projects that may require using various hand tools and/or power tools
- Canoeing/Kayaking trips
- Three day overnight camping trip August 1st – August 3rd

I also understand that my child assumes the inherent risks of participation in all events, groups, projects, and activities such as: accidental collisions with other camp participants, tripping/falling on uneven ground, unpredictable reactions to contact with plant materials, bee stings, insect bites, falling into ponds or lakes, sunburn, and dehydration.

I have read and understood the foregoing registration liability release and participant permission form, as well as the NAYA legal consents and releases form on the previous page, and agree to all of its terms and conditions.

Student Name: _____

Student Signature: X _____

Date: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: X _____

Date: _____