



**INFORMATION AND SIGN-UP FOR
CAMP CIELO
April 28th to April 30th, 2023**

WHO: Every Camp Fire group with adult supervision, (No Pets), children under 4 by Request only

WHAT: Camp Cielo weekend Camp Out at Lopez Lake, Camp French

WHEN: Friday April 28: 3:00 PM until Sunday April 30th: 11:00 AM

SCHEDULE: Friday:

Arrive and set up Tent site- Dinner not included (on your own) BBQ areas available if needed. From 5:30 PM to 7:30 PM bring white T-shirt to prepare for tie-dye at the picnic table.

****** 6:30 PM-7:30 PM ALL CAMPER MEETING, SNACK AND CAMPFIRE**

Saturday:

7:00 AM Breakfast

8:00 AM All campers morning hike

9:00 AM-12:00 PM- All camper activities

12:30 PM Lunch

1:30 PM Outdoor play or free time until afternoon snack.

6:30 PM Dinner followed by surprises, night hike, campfire, skits and smores

Sunday:

8:00 AM Breakfast

9:00 AM-10:00 AM Clean up camp site and all areas.

10:00 AM-11:00 AM- Awards, T-shirts and Closing Followed by departing home drive safely!

COSTS: include camping fees (tent site), food, craft activities **Due by 4/8/23.**
Payable by cash or check (made out to Camp Fire) *after 4/9 additional charge of \$10pp
\$50.00 -Youth \$40.00 -Adults \$20.00-Registered Leader (one per club)

CRAFT: Please bring 1 white t-shirt or pillowcase for tie-dye. For best results items should be at least 50% cotton.

PACKING LIST: Bring the following camp gear with you

TENT	TOWEL	BAG-CRAFTS	SWEATSHIRT	WATER BOTTLES
SLEEPING BAG	SHIRTS	AIR MATTRESS	TOILET ARTICLES	SUNSCREEN
2 BLANKETS	PILLOW	FLASHLIGHT	MEDICATION/IF ANY	WASH CLOTH
UNDERWEAR	SOCKS	SHORTS, JEANS	CAMERA (optional)	HATS
WARM PJ'S	JACKET	2 DRINKING CUPS- 1 HOT, 1 COLD (NOT DISPOSABLE)		
SHOES (no sandals)	DINNER FOR FRIDAY NIGHT		CAMP FIRE T-SHIRT/SWEATSHIRT	

LEADERS: Have prepared a club skit performance for Saturday night's event.

This weekend will be packed full of fun for all levels of Camp Fire! It is a wonderful Opportunity for leaders, parents and youths from all areas to have a refreshing outdoors experience!

Leaders and parents, we will need your help! Everyone plan to attend and have a great time.

Note: No cell service at camp site or Lopez Lake.

PLEASE RETURN ALL SIGNED FORMS BY April 8, 2023 or sooner. TO INSURE CHILD'S REGISTRATION IN CAMP



REGISTRATION AND PERMISSION SLIP FORM
CAMP CIELO
at Lopez Lake April 28th to April 30th, 2023

ONE FORM PER PERSON
(YOUTH)

Date Received: _____
_____ Registration

CHILDREN UNDER 4 BY REQUEST ONLY

Amount Enclosed_ \$50.00

Full Name _____ Address _____

Parent Name _____ Home Phone _____ Cell Phone _____

Email Address _____

Camp Fire Member _____ Yes _____ No, Leader Name _____ Age _____ Grade _____

Family Physician _____ Phone _____

Medical history: Diabetes _____ Yes _____ No; Epilepsy _____ Yes _____ No; Other _____

Subject to specific allergies _____ Yes _____ No; if yes, please list _____

Is on any medication _____ Yes _____ No; if yes, please list _____

EMERGENCY CONTACTS: Be certain that the LOCAL emergency contact people listed below are available and know you are depending on them, if you cannot be reached.

Name _____ Phone _____ Relation to child _____

Name _____ Phone _____ Relation to child _____

I certify that my child _____ is in good health and can participate in all the normal activities of the group and has my permission to attend the Camp Cielo Weekend at Lopez Lake Campground under the direction of Camp Fire Central Coast of CA. His/Her leader or another designated adult _____ will be in charge for that weekend, April 28th to April 30th, 2023. I will assure that my child is properly prepared for all activities including having proper clothing and equipment, being in good health and willing and able to participate in camp activities, and will abide by camp policies and follow directions of camp personnel. I hereby give my permission for my child to receive medical treatment in the event of an emergency until I can be reached. This applies to accidents and/or illness. I understand that reasonable measures will be taken to safeguard the health and safety of the group and that I will be notified as soon as possible in case of emergency. In the event of sickness or accident, I will not hold the group leaders or Camp Fire Central Coast of CA responsible. I agree to be responsible for payment of expenses incurred in such emergency treatment.

Parent and/or Guardian Signature _____ Date _____

(NO PETS ALLOWED)
TO INSURE CHILD'S REGISTRATION IN CAMP PLEASE RETURN ALL SIGNED FORMS BY APRIL 8, 2023
Mail to: Camp Fire Office Camp Cielo, P.O.Box 1269, Arroyo Grande, CA 93421



REGISTRATION AND PERMISSION SLIP FORM

CAMP CIELO

at Lopez Lake April 28th to April 30th, 2023

Date Received: _____

**ONE FORM PER PERSON
(ADULT)**

_____ Registration \$40
_____ Leader (one per club) \$20

Amount Enclosed \$ _____

Full Name _____ Address _____

Parent Name _____ Home Phone _____ Cell Phone _____

Email Address _____

Camp Fire Member _____ Yes _____ No,

Family Physician _____ Phone _____

Medical history: Diabetes _____ Yes _____ No; Epilepsy _____ Yes _____ No; Other _____

Subject to specific allergies _____ Yes _____ No; if yes, please list _____

Is on any medication _____ Yes _____ No; if yes, please list _____

EMERGENCY CONTACTS: Be certain that the LOCAL emergency contact people listed below are available and **know** you are depending on them, if you cannot be reached.

Name _____ Phone _____ Relation _____

Name _____ Phone _____ Relation _____

I certify that I _____ am in good health and can participate in all the normal activities of the group and will be attending the Camp Cielo Weekend at Lopez Lake Campground under the direction of Camp Fire Central Coast of CA. **April 28th to April 30th, 2023**. I will make sure that I am properly prepared for all activities including having proper clothing and equipment, being in good health and willing and able to participate in camp activities, and will abide by camp policies and follow directions of camp personnel. I hereby give my permission to receive medical treatment in the event of an emergency until I can be reached. This applies to accidents and/or illness. I understand that reasonable measures will be taken to safeguard the health and safety of the group and that I will be notified as soon as possible in case of emergency. In the event of sickness or accident, I will not hold the group leaders or Camp Fire Central Coast of CA responsible. I agree to be responsible for payment of expenses incurred in such emergency treatment.

Signature _____ Date _____

(NO PETS ALLOWED)

TO INSURE ADULT'S REGISTRATION IN CAMP PLEASE RETURN ALL SIGNED FORMS BY APRIL 8, 2023

Mail to: Camp Fire Office Camp Cielo, P.O.Box 1269, Arroyo Grande, CA 93421

Join Us At Camp Cielo!

Where: Lopez Lake, Camp French

When: April 28-April 30

\$50.00 -Youth

\$40.00 -Adults

\$20.00-Registered Leader (one per club)

Payment due by 4/8/23.

