

# Activity Schedule

## Friday

4—10 pm  
8—10 pm

Check in at Trading Post  
Campfire and S'mores

## Saturday

8:00 am  
9:00 am

Breakfast at Dining Hall  
Activity session 1 / Hike /  
Climbing Wall / Trail Rides\*

12:00 pm  
1:00 pm

Lunch at Dining Hall  
Activity session 2 / Hike /  
High Ropes Course\* / Ride\*

4:30 pm  
6:00 pm  
7:30 pm  
8:30 pm

Free time  
Dinner at Dining Hall  
Mass  
Campfire Program!

## Sunday

8:00 am  
9:00 am

Breakfast at Dining Hall  
Activity session 3 / Hike /  
Climbing Wall

10:00 am  
12:00 pm

Pony Rides! \*\*  
Lunch at Dining Hall



Share some quality family  
time away from the  
distractions of the work  
week!

- \* Nature hikes
- \* Canoeing and Kayaking
- \* Archery
- \* Handicrafts
- \* Swimming (weather permitting)
- \* Campfires
- \* Climbing Wall
- \* High Ropes Course (\*additional \$15 payable on arrival, must be 10 or older)
- \* Horseback riding (\*additional \$15 payable on arrival, must be 10 or older)
- \* Pony Rides Sunday (\*\*kids age 3-9)



## Weekend Getaways

*Family Camp  
Weekend*

*Mother-Daughter  
Weekend*

*Father-Son  
Weekend*



**Camp Ondessonk**  
*Awaken Your Spirit*

# A Weekend getaway for the whole Family!

Since 1959, Camp Ondessonk has offered quality outdoor recreation and education programs for kids. Over the years, Ondessonk has grown steadily both in size and programming. Today we are proud to offer programs throughout the year to children and adults, promoting our belief that everyone needs a safe place to grow spiritually and emotionally while enjoying God's natural creation.

## What is a "Weekend Getaway"?

During Camp Ondessonk Weekend Getaways, our traditional summer camp activities are open (weather permitting) for campers of all ages to participate in. Some activities, such as guided hikes, are scheduled throughout the weekend, while others, such as archery, are available for campers to come and go as they please. Horseback rides and the High Ropes Course are also available for participants 10 years of age and older for an additional fee. Saturday evening we host Mass followed by an all-camp campfire. The fee for a Weekend Getaway includes Friday & Saturday night lodging, as well as breakfast, lunch and dinner on Saturday and breakfast and lunch on Sunday.

## Lodging

Each lodging choice is a grouping of 3-8 rustic cabins, treehouses, or lodges housing approximately 40 people. Treehouses and cabins are three-sided structures; lodges are four-sided. In keeping with the true camping spirit, units are primitive, without electricity or running water. Modern shower houses are located near units. During Family Camp Weekend and Mother-Daughter Weekend, lodging is also available at the St. Noel Center with climate-controlled bunkhouse style rooms and bathrooms for an additional fee.



### Family Camp Weekend: Sept. 18-20, 2009

Camp is for everyone! Join us for a weekend of family fun and experience a taste of summer camp as the leaves change and the weather turns down-right pleasant. Many of our best traditional camp activities will re-open from summer. Go for a canoe paddle or an afternoon swim, take a horse ride or climb our climbing tower. For a taste of the extreme, give our high ropes course a try. Experience a Camp Ondessonk weekend the whole family can enjoy!

### Mother Daughter Weekend: Oct. 9-11, 2009

The connection between a mother and daughter is a powerful thing. While we all get swept up in the currents of life, the bond remains strong just under the surface. Each fall women get together at Camp Ondessonk to celebrate their bond, and strengthen the connections that flourish amidst the fall foliage. Join us for crisp evenings around the campfire, traditional crafts, canoeing, and other Camp activities including leisurely trail rides, and an exhilarating trip down our zip line!

### Father Son Weekend: April 23-25, 2010

Fathers, Sons, and the Great Outdoors. Camp Ondessonk sets aside one weekend a year for this time-honored tradition as old as America itself. No projects to be done, leaky faucets to repair, or reports to send. Dads are invited to join us for a weekend of tromping through the woods, spending evenings around the campfire, and sharing their love of the outdoors with their sons. Many of our summer camp activities will be open, as well as opportunities to go on a trail ride, climb our 28 foot climbing wall, or test your courage on our high ropes course.

## Registration Form 2009-2010

Feel free to copy. For more information, please contact the Camp Ondessonk office at 618-695-2489.

Family Camp  Mother/daughter  Father/son

Parent's Name \_\_\_\_\_

Child \_\_\_\_\_ DOB \_\_\_\_\_

Child \_\_\_\_\_ DOB \_\_\_\_\_

Child \_\_\_\_\_ DOB \_\_\_\_\_

Child \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Email \_\_\_\_\_

Unit \_\_\_\_\_

I would like to stay with: \_\_\_\_\_

\*\*\* Prices valid for 2009-2010 school year only. \*\*\*

No. in group \_\_\_\_\_ X \$60.00 \$ \_\_\_\_\_

+ St. Noel Lodging\*  
No. in group \_\_\_\_\_ X \$16.50 \$ \_\_\_\_\_  
\*not available for Father/Son

Total Enclosed \$ \_\_\_\_\_

Method of Payment

Check  Visa  MasterCard  Discover

Name on Card \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. date \_\_\_\_\_

Signature \_\_\_\_\_

## Camp Ondessonk

3760 Ondessonk Road  
Ozark, IL 62972

Phone: 618.695.2489

Fax: 618.695.3593

Email: [camp@ondessonk.com](mailto:camp@ondessonk.com)

[www.ondessonk.com](http://www.ondessonk.com)

## Camp Ondessonk Waiver of Claim

I hereby release to Camp Ondessonk and/or the American Camp Association the right's of my or my child's photograph, image, likeness and/or voice as recorded on video tape or film for the purpose of promotion, videos, yearbooks, website or publications. I hereby release any and all claims against Camp Ondessonk, Catholic Diocese of Belleville, its representatives, or officers arising in connection with the usage of my or my child's photo, likeness and/or voice. I acknowledge that this release is formal and final and understand that Camp Ondessonk, Catholic Diocese of Belleville, may proceed in reliance thereon. The undersigned in this release desires to assist in the work of Camp Ondessonk, Catholic Diocese of Belleville, by making their or their child's image likeness or voice available.

In order for children to participate in horseback riding programs at Camp Ondessonk, a parent or guardian is required to complete and sign this release. Under the Equine Liability Act, each participant who engages in an equine activity expressly assumes the risk of engaging in and the legal responsibility for injury, loss or damage to person or property resulting from the risk of equine activities. For value received, the receipt of which is hereby acknowledge, I, on behalf of myself or my minor child/ward, (please print participant's name)

\_\_\_\_\_ hereby release, indemnify and hold harmless, Camp Ondessonk, Diocese of Belleville, Department of Outdoor Ministry and their employees, clergy, volunteers, officers, board members and/or agents from and against any and all claims, losses, suits, damages, or costs (including attorney fees) arising out of, resulting from or relating to my or my minor child/ward's participation in equine activities, including but not limited to horseback riding in or around the premises operated by Camp Ondessonk. I acknowledge and understand that participation in equine activities involve inherent risks, including but not limited to (1) the propensity of an equine to behave in dangerous ways that may result in injury to the participant; (2) the inability to predict an equine's reaction to sound, movement, objects, persons, or animals; and (3) the hazards of surface or subsurface conditions. Notwithstanding this knowledge and awareness, I assume all risks of my or my minor child/ward's participation in equine activities and legal responsibility for injury, loss, or damage to person or property resulting from the risk of such activities.

I, as a participant or as a parent/guardian of a participant, understand I or my child will be participating in activities that involve periods of physical exertion, balancing, heights (up to 80 feet), lifting, pushing, pulling and climbing. I know most activities will be outdoors where I and/or my child will need to watch for slippery and/or uneven footing, limbs and branches, insects or animals and possible exposure to extreme or inclement weather. I acknowledge that my child must be at least 10 years of age to participate in the challenge course program. I fully understand that this physical activity involves risk of injury. I understand the risks may include loss or damage to personal property. I understand that I and/or my child will not be forced to do any activity and that despite all reasonable precaution taken, a guarantee of absolute safety is impossible. I and/or my child agree to exercise good personal judgment and to ask for help if I and/or my child are concerned about personal safety and to be responsible for deciding if a proposed activity is appropriate for myself/him/her. I and/or my child agree to inform the instructors of any physical, mental or medical condition that might affect my/his/her ability to participate or affect other members of my group. I and/or my child also realize that failure to tell that information could result in serious harm to myself/him/her or others. I also state that I and/or my child are not under and will not be under the influence of any chemical substance including alcohol. I and/or my child agree to comply with safety instructions given and to be responsible for my/his/her own personal safety and well being. I agree to hold Camp Ondessonk, its Directors, Officers, Employees, Agents and/or Associates harmless for any accidents, injury, loss of or damage to property that may occur on this problem. I understand that all possible precautions are taken to insure that all programs and activities sponsored by Camp Ondessonk are conducted by mature and qualified personnel in a safe and responsible manner. I understand that Camp Ondessonk in the challenge course program will provide a minimum staff/participant ratio of 1:14. I voluntarily assume the risks of the activities and I and/or my child agrees to report any injuries before leaving the premises. In the event of an emergency, I understand every attempt will be made to contact the parent/guardian. In the event that the parent/guardian cannot be reached, I give permission to Camp Ondessonk to secure proper medical treatment. I understand that any medical expense not covered by Camp Ondessonk medical insurance will be billed directly to me or to my insurance company. I have read and understand all materials outlining the Challenge Course, including this waiver and agree to abide by these terms. I understand that if my child is riding the bus, in the event of an accident, Camp will telephone the parent, however, in the event I cannot be reached by phone, I hereby give permission for medical attention by a physician for my child. I am aware this is a waiver and a release of liability and I sign it voluntarily.

I further acknowledge that (1) I am the parent/guardian of the minor child/ward identified above OR I am the participant identified above; (2) I have read this release in its entirety; (3) I fully understand and accept its terms; (4) I have executed this release voluntarily; (5) I understand that 50% of payment is due two weeks prior to the date of arrival, and the balance is due upon arrival. Should the camp need to litigate in cases involving any unpaid fees I will be responsible for the camp's legal expenses including any NSF fees.

I hereby approve this application for myself or my child to attend Camp Ondessonk and, in consideration of the benefits to be derived, expressly waive any and all claims against the Catholic Diocese of Belleville, Camp Ondessonk, the Department of Outdoor Ministry, or its representatives on account of accident or sickness that may be incurred to the above mentioned person or his or her property in connection with an incident during this camp's activities.

Participant or Parent/Guardian Printed Name \_\_\_\_\_

Participant or Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**PERSONAL MEDICAL HISTORY  
CAMP ONDESSONK  
CATHOLIC DIOCESE OF BELLEVILLE**

**IMPORTANT** – Please be thorough in providing the information requested. Failure to disclose information could result in serious harm to you as a participant in the program(s).

**IF YOU CIRCLE YES TO ANY QUESTION BELOW, DESCRIBE DETAILS ON THE RIGHT SIDE OF THE FORM.** Attach an additional sheet, if necessary.

**DESCRIPTION**

1. Date of last tetanus shot _____.		
2. Do you have any present medical problems or physical limitations?	Y	N
3. Are you taking any prescription or non-prescription medication? (List all and reasons for taking)	Y	N
4. Have you had any surgeries or been hospitalized for any reason?	Y	N
5. Are you allergic to any insect bites or medications? (List all)	Y	N
6. Do you carry an epi-pen for allergic reactions?	Y	N
7. Do you smoke? If so, how much?	Y	N
8. Do you have impairments of vision or hearing?	Y	N
9. Do you have any other physical or mental impairment?	Y	N
10. Have you ever been diagnosed as having high blood pressure?	Y	N
11. Are you currently under treatment for high blood pressure?	Y	N
12. Do you have heart murmurs, episodes of irregular heartbeat, shortness of breath, chest pain on exertion?	Y	N
13. Have you ever been diagnosed as being at risk for heart disease	Y	N
14. Is there any history of heart disease in your family?	Y	N
15. Are you engaged in a regular program of exercise?	Y	N
16. Do you have asthma? (Describe)	Y	N
17. Do you carry an inhaler?	Y	N
18. Do you have diabetes, thyroid trouble or other endocrine problems	Y	N
19. Have you had or do you have ulcers, heartburn or other intestinal disorders? Describe.	Y	N
20. Have you ever had seizures? (Describe)	Y	N
21. Do you have problems with your neck, back, arms, shoulders, ankles or knees that limit you? (Describe symptoms and limitations)	Y	N

Printed Full name \_\_\_\_\_ My birth date is (mo/day/yr) \_\_\_\_\_