



# WELCOME TO THE 2019 FAIRVIEW LAKE PARENT MEETING!

Please sign in by classroom

Please turn in required documents

## FVL PARENT MEETING: AGENDA

- Program introduction and background
- Directions /Phone Number/ Communications
- Program Description & Sample Schedule
- Permission Slips & Medical Forms
- Clothing List
- Monday Night Check-in
- *Final head count: Friday, Dec. 13*
- Intro to FVL Staff and Fairview Lake presentation



# GOAL

The Fairview Lake experience will provide a hands-on, cooperative learning experience where students can discover our natural environment, develop their self-confidence and gain respect for one another.



<http://www.fairviewlakeymca.org>

# WHERE IS FAIRVIEW LAKE?

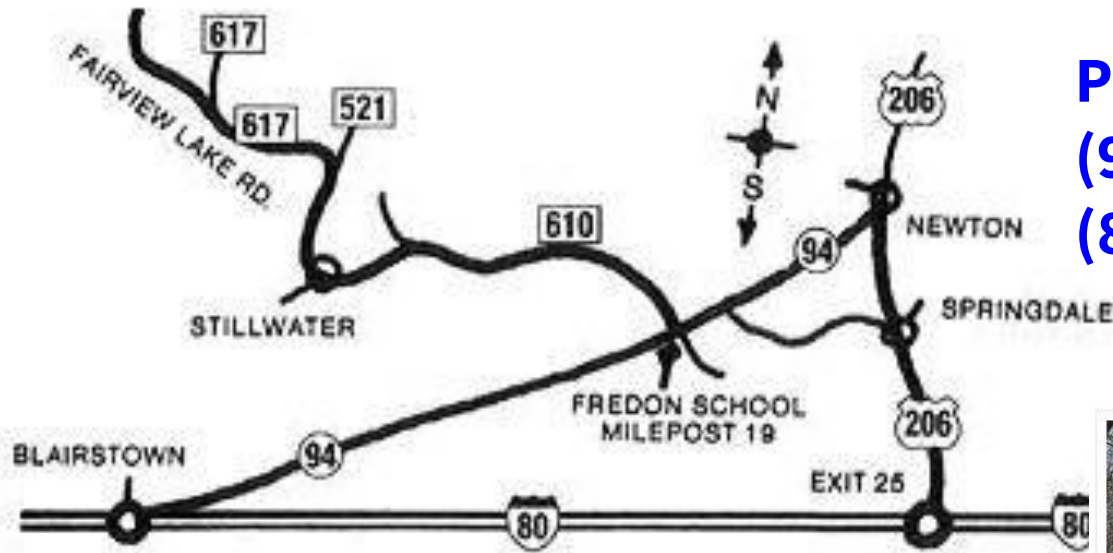
**Address:**

**1035 Fairview Lake Rd.  
Stillwater, NJ 07875**

**Phone:**

**(973) 383-9282**

**(800) 686-1166**



**[www.fairviewlakeymca.org](http://www.fairviewlakeymca.org)**

# COMMUNICATIONS

- ★ Children are not permitted to bring cell phones or any other electronic devices on the trip.
- ★ Honeywell mass texts will be sent upon arrival at FVL and departure from FVL.
- ★ We will attempt to send a brief daily update.

# WHAT WILL THEY BE DOING?

7:00	Wake Up
7:45	Servers report to the Dining Hall
8:00-8:45	Breakfast
9:00-10:30	Activity #1, i.e. ASE (Team Building)
10:45-12:15	Activity #2 i.e . Candle Making
12:30-1:15	Lunch
1:30-3:00	Activity #3 i.e . Winter Survival Skills
3:15-4:45	Activity #4 i.e. Orienteering
5:15	Servers report to the Dining Hall
5:30-6:15	Dinner
6:30-7:00	Trading Post, journal writing
7:15-9:00	Evening Activity
9:15	Snack
9:30	Return to Cabins
10:15	Lights Out

# STUDENT JOURNALS

- Analyze and reflect on daily activities
- Parent Page
- Graded Assignment
- Due: Feb. 26th

# MEDICAL FORMS

- ★ Medical Information sheets, consent for ER treatment must be completed for your child to attend.
- ★ Medications: The Medication Request form must be completed by your physician and signed by you in order for any **prescription medication** or **over the counter medication** to be dispensed.
- ★ Parent signature is required for Tylenol/Ibuprofen to be dispensed.



# MEDICATIONS

- ★ Medication must be brought to school by the parents in a zip-lock baggie with student's name, teacher and date of birth on the bag. All medication must be in original container. Medication must be brought in the evening luggage is dropped off at school **or before if possible.**
- ★ **Medication needs to be picked up on Friday in the health office, when the students return to school from FVL.**
- ★ If your child needs a nebulizer, one will be in the nurse's cabin, but we need your prescription med and tubing.
- ★ Please let us know if your child gets car sick... the bus ride is long. If your child needs medicine for this, we do need a doctor's note.

# MEDICATION/ PHYSICIAN FORM

★ **Part 1: To Be Completed and Signed by Child's Physician:**

★ Reason for medication: \_\_\_\_\_

★ Name/Description of medication: \_\_\_\_\_

★ Dosage: \_\_\_\_\_ Time: \_\_\_\_\_

★ Method of administration: \_\_\_\_\_

★ Side Effects/Precautions: \_\_\_\_\_

★ Date to Begin: 2/4/20 Date to Conclude: 2/7/20

★ *Student may self-administer inhaler:* \_\_\_\_\_ Yes \_\_\_\_\_ No

★ **Fairview Lake Procedure:** Students may attend a partial or full day field trip during the day. If the trip time interferes with administration times and the medication is not an emergency medication, please indicate what action you want taken:

★ \_\_\_\_\_ **Give dose late and notify parent.** \_\_\_\_\_ **Omit dose**

★ **Other Guidelines:** \_\_\_\_\_

★ **Date:** \_\_\_\_\_

★ **Signature of Child's Physician:** \_\_\_\_\_

★ **Name of Physician:** \_\_\_\_\_ **Office Phone #:** \_\_\_\_\_

# MEDICATION/ PARENT FORM

★ **Part 2: To Be Completed by Parent/Guardian for ALL STUDENTS going to Fairview Lake.**

★ I request permission for my child,

\_\_\_\_\_

★ to take medication at Fairview Lake. I shall bring to the school nurse the appropriate amount of unexpired medication, in the original labeled container, with my child's name, medication name and dosage. I realize it is my responsibility to have my child's physician complete the request form. I understand information regarding my child's health and medications may be shared with school staff on a need to know basis.

★ **Does the staff nurse have your permission to administer the following medications as needed?**

★ Yes \_\_\_\_\_ No \_\_\_\_\_ Tylenol \_\_\_\_\_ Motrin \_\_\_\_\_

★ Date: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

## IF YOUR CHILD BECOMES ILL...

- ★ If your child becomes ill - vomiting, diarrhea, fever  $>100.4$  – they will not be able to stay at Fairview Lake and you will need to pick them up.
- ★ This will ensure the safety and well-being of other students, as well as for their own comfort.
- ★ If your child is not feeling well the day of the trip, please keep them home on Tuesday. If they feel better, then they can join us later in the week.

# OTHER CONCERNS

Please notify the nurse or teachers regarding any concerns with your child at night:

- ❖ Sleepwalking
- ❖ Fear of dark
- ❖ Bathroom issues, bed wetting
- ❖ If your child has never slept away from home without his/her family, a sleepover away from home is strongly recommended prior to FVL.

# HYGIENE

- ★ Students will have to shower during their stay.
- ★ Students are strongly encouraged to use deodorant.
- ★ Students are encouraged to use hand sanitizer and wash hands throughout the day.
- ★ Ms. Natalie will speak to plumbing issues in a few minutes.

# WHO WILL BE IN MY CHILD'S CABIN?

- Students will select 3 peers to be with in their cabin.
- They will be **guaranteed at least one** of them in their cabin.
- Cabins will be announced when we arrive at FVL.



# TRANSPORTATION

- ★ Students will arrive at school on Tuesday, February 4<sup>th</sup>, as usual (no book bag).
- ★ We recommend that you do not come to school to see your child off.
- ★ Our Coach Bus has a bathroom.
- ★ If there is inclement weather, parents will be notified of the contingency plan through the Honeywell Alert system.



# COMING HOME

- ★ Parent pick-up will be **Friday 2/7 sometime between 1:00 and 2:30**. A Honeywell message will be sent upon departure from Fairview Lake.
- ★ Due to luggage and time of return to CES, students cannot ride school buses home or walk. They must have a designated ride home.
- ★ Please leave written arrangements with the your child's teacher **as well as** the main office before the trip if someone else is taking your child home.

# FAIRVIEW LAKE BEHAVIOR CONTRACT

1. First Offense- Warning that their behavior is inappropriate.  
**NAME WILL BE WRITTEN ON A LIST**
2. Second Offense- Warning that their behavior is still inappropriate.  
**CHECK IS PLACED NEXT TO NAME**
3. Third Offense-Phone call to inform parents that student exhibited inappropriate behavior(s) and no improvement has resulted.  
**SECOND CHECK IS PLACED NEXT TO NAME AND PHONE CALL HOME**
4. Fourth Offense- Parents will be called to drive to FVL and immediately transport their student home.  
**CHILD LOSES TRIP PRIVILEGE. PARENT PICKS UP STUDENT AT FAIRVIEW LAKE**

- **UNDER EXTREME CIRCUMSTANCES, YOUR CHILD MAY HAVE TO LEAVE FVL**

Please sign the following agreement:

I understand and agree to follow the rules while I am on the Fairview Lake field trip.

-----  
(Student Signature)

I am aware of the rules and consequences for the Fairview Lake field trip and have discussed them with my child.

-----  
(Parent Signature)

# WHAT SHOULD I PACK?

- ★ Winter Coat
- ★ Jeans or warm pants
- ★ Waterproof pants or snow pants
- ★ Sweatshirts (2 hooded)
- ★ Hats (2 or more)
- ★ Scarves (2 or more)
- ★ Gloves (2 or more pairs, 1 waterproof)
- ★ Pajamas
- ★ Underclothes (4 sets)
- ★ Thermal Wear/Base layers (3 pairs)
- ★ Socks (8 pairs, including at least 4 pairs of wool or warm socks)
- ★ Shirts (4 turtlenecks or flannel)
- ★ Sturdy, waterproof boots
- ★ Poncho/ Raincoat
- ★ Sleeping Bag or Bedroll
- ★ Pillow and Pillowcase
- ★ Body Soap/ Bodywash
- ★ Shampoo and Conditioner
- ★ Deodorant
- ★ Comb/ Brush
- ★ Toothbrush
- ★ Toothpaste
- ★ Towels (2)
- ★ Washcloth (1)
- ★ Chapstick (2)
- ★ Laundry bag
- ★ **OPTIONAL ITEMS**
- ★ *Hand and Toe Warmers*
- ★ *Shower Cap*
- ★ *Disposable Camera-NO DIGITAL*
- ★ *Paperback Book (s)*
- ★ *Shower Shoes*

# WHAT *NOT* TO PACK:

## **Please Remember:**

Students are **not** permitted to bring the following:

- ★ Cell Phones
- ★ Other Electronics (iPods, games, etc.)
- ★ Food\*

*\*Students with special dietary needs or allergies can leave food with the Dining Hall Manager. Let your teacher know if this applies to you.*

# MONDAY NIGHT CHECK-IN

**FEBRUARY 3, 2020**

**4:00 - 5:00 p.m. in the  
Music Room**

- ★ Place pillow & sleeping bag in labeled, heavy-duty trash bag.
- ★ Boots need to be in bag. Sneakers on bus.
- ★ Clothing should be in a duffle bag or suitcase.
- ★ Bring medication in original prescription container with child's name on it.
- ★ Trading post money in sealed envelope with your child's name as well as the amount.
- ★ Students need to be able to carry all of their belongings while at Fairview Lake.

Welcome  
Natalie Knickerbocker from  
Fairview Lake!

