

YOUTH CULTURE CAMP

Application Checklist and General Information

Dear Youth Applicant and Parents/Guardians:

Pōsōh! Thank you for your interest in Youth Culture Camp. Please use this checklist to keep track of your application requirements and to ensure a completed application is submitted.

- Read overview
- Youth Culture Camp Application - Answer all of the questions
- Youth Camp Essay
- Consent for Medical Administration and Medical Treatment form
- Parent/Guardian Signature on Photograph Release Agreement
- Read Camp Rules and Sign
- **Return all completed applications to Historic Preservation**



Menominee Historic Preservation

W3426 County VV West

Keshena, WI 54135

Phone: (715) 799-5258

Fax: (715) 799-5295

YOUTH CULTURE CAMP

**Pōsōh āneq nāp?
(Hello, how are you today?)**

Culture Camp is designed for young adults to provide an opportunity for spiritual growth and strengthening of our cultural identity.

Youth chosen to participate in Culture Camp will gain experience through hands-on learning discussion groups, and field trips. A number of cultural activities will be offered throughout the camp period. Menominee Culture and Language are beneficial to the growth of our young people, strengthening their knowledge, respect and developing a unique bond with our tribal people and with our land.

This week-long program focuses on students between the ages of 12 and 17. There is no cost to attend the camp. The first **30** completed applications with youth who are within the age requirements for camp will be accepted to ensure applicable room and the adequate attention needed for learning and safety.

During camp, if there is severe weather, the culture camp staff will be notified immediately and if warranted, other means of shelter will be provided for the youth and staff. When conditions subside, they will then be returned back to the campsite.

Please note that pick up is Friday at 4:30pm at the Logging Museum. If your child is not picked up within 30 mins (by 5pm) we are required to call Menominee Tribal Police.

CAMP DATES

July 20-25, 2025

Application Deadline July 11, 2025 4:30 to Historic Preservation Office

Applications are available at the Historic Preservation and Omaeqnomenewak Wetohatikamek (FACE Center).

We hope you have a great summer and we look forward to meeting you!
If you have any question please call the Historic Preservation Office at (715) 799-5258.

**Parents/guardians keep pages 1-3 and return
application pages 4-9 to Historic Preservation by July
11, 2025 @ 4:30**

YOUTH CULTURE CAMP

RECOMMENDED PACKING LIST

~Please, let us know if there are any items that you may need, supplies will be provided if needed~

If your child has a tent please bring it as well.

Hygiene Bag will be provided with the following items:

- Toothbrush & toothpaste, shampoo, deodorant, brush/comb, sanitizer, socks, soap, q-tips, sunblock, flashlight, women personal items, camp dish bag (if you have one PLEASE bring it to camp! If you do not, one will be provided!)

CLOTHING

- ☐ Enough clothes for 5 days (Shirts, pants/shorts, underwear, socks)
- ☐ Long pants to wear during hikes
- ☐ Raincoat - umbrella
- ☐ Light Jacket or sweatshirts
- ☐ Swimwear
- ☐ Old shoes - sneakers to wear on hikes
- ☐ Flip-flops or sandals

PERSONAL GEAR

- ☐ Tent (if you have one)
- ☐ Medications must be in original container with patient's name (if prescription) labeled and given to the Camp Health Supervisor
- ☐ Towel
- ☐ Sleeping bag or Blankets and pillow

DO NOT BRING TO CAMP

- ★ Radios, CDs, iPads, iPods or Cell Phones (one will be available at camp if needed)
- ★ Alcohol, Tobacco, or other drugs
- ★ Firearms, knives, or explosives/fireworks
- ★ Candy, chewing gum or other snacks
- ★ Electronic Games
- ★ Flashlights with radios

Please do not let your children store personal money or valuables during camp time, as it may have a way of getting lost or stolen. We thank you for your understanding and cooperation.

YOUTH CULTURE CAMP
Omāēnomenēwak Ahkanom Kes-siqteyah
(The Menominee, how we lived in the past)

Name: _____ Date: _____

Menominee Name (if applicable): _____

Clan (if known): _____

Address: _____

Age: _____ (12-17) DOB: _____ Male or Female (Circle one)

Parent/Guardian's Name: _____

Phone: _____ Work Phone: _____

Does your child have any food allergies? _____

****Emergency Contact Name:** _____

Phone: _____ Relationship: _____

****Emergency Contact Name:** _____

Phone: _____ Relationship: _____

****Emergency Contact Name:** _____

Phone: _____ Relationship: _____

If for any reason a child must be taken home during the course of the camp, please
give a location if different from address: _____

Phone: _____

Has participant attended this camp before? _____

Please describe your child's temperament: (Circle one)

Shy Quiet Aggressive Sensitive Outgoing Nervous Happy Moody Hyperactive

What cultural skills does he/she know? _____

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What are his/her hobbies? _____

Does he/she know how to swim? Yes No

Shirt Size: S M L XL XXL

Please list any fears we need to know about: _____

What do you think he/she will be able to gain by attending culture camp? _____

Will your child need additional assistance during the camp?: _____

Are there physical limitations?

Explain: _____

If necessary, are we able to give your child over the counter medications (ex. Aspirin, ibuprofen, pepto, etc.):

Who will be picking your child up on **Friday at 4:30 at the Museum?**

Please note that pick up is Friday at 4:30pm at the Logging Museum. If your child is not picked up within 30 mins (by 5pm) we are required to call Menominee Tribal Police.

The screening committee of the culture camp reserves the right to refuse admittance to the camp if the information asked on this form is not fully completed and the essay is not attached. We will only be accepting the first 30 completed applications and youth within the age limits for each camp.

Māēhnow-pemātesenon Yohpeh

(Live well this day)

YOUTH CULTURE CAMP

CAMP RULES:

1. NO TECHNOLOGY ALLOWED!
2. Be respectful to other campers, counselors, and visitors (i.e. no bullying, swearing, name calling, horse playing, hitting, punching).
3. Respect each other's property and the campsite (i.e. no stealing, vandalizing, littering).
4. No questioning the authority of the camp counselors.
5. Gang insignia will be prohibited.
6. No Clothing with Alcohol or Drug Paraphernalia.
7. No leaving designated campgrounds without permission.
8. Must commit to learning about my language, history and culture at one's own pace.

Failure to abide by these rules may result in removal from camp

I have read and understand and agree to comply with the above rules and regulations.

I hereby give permission for _____ to attend the Youth Culture Camp 2025 located at Wayka Falls.

Participant's Signature: _____

Parent's Signature: _____

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CONSENT FOR MEDICATION ADMINISTRATION and MEDICAL TREATMENT

To the Parent(s) or Legal Guardian:

If your son, daughter or ward will be under the age of 18 while at camp, it is camp policy to secure your consent for medication distribution and for the use of medical devices. The medication or medical device can be self-administered or be administered by the Camp Health Supervisor.

All medications must be in a medicine bottle and labeled with the camper's name, doctor's name and phone number, medication name, and dosage. You must also complete the form below:

___ No medication has been brought to camp.

___ I want the medication or medical devices self-administered (age 14 and above only).

___ I want the medication or medical device administered by the Camp Health Supervisor. However, a limited amount of medication for life threatening conditions may be carried by my son/daughter/ward (i.e. bee sting kits, inhalers).

___ I am giving permission for camp counselors to administer my child over the counter medications like Tylenol, Aspirin, Ibuprofen, Pepto etc. if needed.

Name of Medication(s)	Prescribing Doctor	Doctor's Phone Number
Amount to be Taken	How is it taken?	When to be administered
Day(s) to be taken	Special Instructions	

- ★ If your son, daughter or ward will be under the age of 18 while at camp, it is camp policy to secure your consent for medical treatment.
- ★ By signing below you are giving your consent in advance for medical treatment at an appropriate medical facility in case of illness or injury.
- ★ By signing below you are stating that you are aware of and accept the risk inherent in the program activity.

Participant's Name

Signature of Onēkehekomaw (Parent or Guardian)

Date

YOUTH CULTURE CAMP
PHOTOGRAPH RELEASE AGREEMENT

I _____, as a parent of a participant in the Omāēqnomenēwak Youth Day Culture Camp at Wayka Falls, I give the Menominee Historic Preservation Office all rights, title and interest of video recording and photographs taken during the Omāēqnomenēwak Youth Culture Camp and that said productions shall be used in the public domain.

Signature of Adult Representative

CULTURE CAMP ESSAY

I would like to attend culture camp because.....

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Preservation (715-799-5258)**