

Clover Patch Camp Rental Agreement

This Agreement made and entered into by and between Center for Disability Services, Inc., d/b/a Clover Patch Camp (hereinafter referred to as "CFDS") maintaining a principal place of business at 314 South Manning Boulevard, Albany, New York 12208, and _____, maintaining a principal place of business at _____, (hereinafter referred to as "Rental Group").

W I T N E S S E T H

WHEREAS, CFDS is the owner and operator of a licensed camp facility known and identified as Clover Patch Camp situated at 55 Helping Hand Lane, Glenville, New York (hereinafter referred to as the "Camp"); and

WHEREAS, the Rental Group wishes to rent the Camp on the terms and conditions set forth herein;

NOW THEREFORE, the parties agree each with the other as follows:

- I. CFDS agrees to provide to the Rental Group at the Camp site the following:
 - A. Those basic facilities and equipment identified in **Attachment A**, as well as additional services at the rates indicated in **Attachment A. Attachment B, Rental Agreement Expense Summary**, is made a part of this agreement and lists the fees payable in connection with the services to be provided to the Rental Group. All fees will be payable in full thirty (30) days prior to the beginning of the camp session dates listed in **Attachment A**.
 - B. CFDS represents that it is authorized to operate a camp premises by the New York State Department of Health, and that all other licenses or permits required for conducting such a facility have been obtained from all authorities, local, state, or federal, having jurisdiction. Such licenses are and will be in full force and effect during the camping sessions and will be available for inspection by the organization with notification and scheduling with the camp administration.
 - C. Special ramps where necessary in buildings to be used by campers.
 - D. Safe drinking water, normal property maintenance and garbage disposal in the entire camp as well as adequate housing and sanitary facilities in all of its buildings including necessary disinfectant, brushes, mops, etc. to keep facilities in excellent sanitary condition. It is understood, however, the each person accommodated at the camp is responsible for keeping his or her own sleeping quarters, toilet and bath areas clean, and disposing of each facility's waste in the main waste disposal site on the camp grounds.
 - E. General recreation activities and equipment owned and available at the time of camp session scheduled.
 - F. A fire drill orientation information form will be given to the rental groups contact person at least one week prior to the rental dates.

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- G. The on-call camp administrator will be responsible for logistics and all other matters concerning the technical operation of camp, including housing, supplies, facility maintenance, main campsite waste removal and safe drinking water supply. Additionally, the on-call camp administrator will:
1. Participate in the arrival and departure of each Rental Group. Complete a pre- and post-walkthrough of the camp facility using a camp checklist.
 2. Oversee and ensure all general camp operations.
 3. Provide the Rental Group with information sheets regarding site safety and policies and procedures.
 4. Supply available recreation equipment upon request.
 5. Ensure that all sleeping cabins have ten (10) beds for overnight rental groups.

II. The Rental Group agrees to the following:

- A. Will screen all campers, coordinate the required application process for all campers and obtain written physician authorizations and parent/guardian consents where needed.
- B. Will ensure that no campers arrive at Camp with a known communicable disease.
- C. Will provide appropriately trained staff and personnel to care for and oversee the campers attending the Camp, including, if necessary, lifeguards for the use of the pool and appropriate medical/healthcare personnel.
- D. Will provide at least one on-call staff person to be available twenty-four (24) hours per day, by phone during the entire program to act as a consultant regarding the needs of the campers.
- E. Will comply or cause compliance with the policies and procedures set forth in **Attachment C** and will provide all support personnel with a copy of **Attachment C**.
- F. Will participate in the arrival and departure of each Rental Group and complete a pre- and post-walkthrough of the Camp utilizing a camp checklist.
- G. Will supervise and implement daily camp programs.
- H. Will participate in the training with respect to, and assure that all Rental Group staff adhere to posted camp policies and procedures.
- I. Will cause all equipment to be returned in proper working condition and in good repair. All facilities will be left clean and in good repair upon departure. The Rental Group will be fully responsible for and shall pay for any and all damages the Rental Group or the campers cause to the Camp, facilities and/or the equipment.
- J. Will maintain proper sanitation conditions in the kitchen and toilet facilities and remove all refuse in those areas to main facility disposal site located near the main entrance to the camp at the end of each evening.

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- K. Will ensure that each cabin sleeps a maximum of ten (10) people, if overnight rental.
- L. Unless the following space is blank, CFDS will require the Rental Group to pay a deposit of \$ 20% at the time this agreement is signed. If the Rental Group fails to fulfill its obligations under the Agreement, then the deposit may be retained by CFDS. If the Rental Group fulfills its obligations under this Agreement, then the deposits will be used to offset charges payable by the Rental Group to CFDS under the Agreement.
- M. Will coordinate the storage and provide for the maintenance, set-up and repair of all orthopedic equipment needed by the campers. If storage space for orthopedic equipment is needed, such should be identified to the camp program manager by the Rental Group five (5) days before the commencement of the camp session.
- N. Will provide bedding and toiletries including but not limited to pillows, linens, towels, blankets, hard soap, laundry detergent, toothpaste, shampoo, etc. for each camper.
- O. Will notify the Camp program manager twenty-four (24) hours in advance of the number, date and time media and/or visitors will be visiting the camp. Visits will occur at the pre-determined and mutually convenient times acceptable to the camp program manager and the Deputy Executive Director of Foundations.
- P. Will arrange for a medical staff person with CPR certification from a nationally recognized provider to care for all medical/safety needs of camper(s). The Rental Group will notify the camp administration as to the name, address and phone number of this person prior to arrival at Camp.
- Q. Will supervise the campers for the duration of their stay up to twenty-four (24) hours a day and see to it that the campers medical, safety and personal hygiene needs are met at all times, as required by applicable law, rule and regulation. CFDS shall not be responsible for the supervision of campers.
- R. Will ensure that no alcohol, illegal drugs, firearms or weapons of any type are brought to or used at the camp by campers or any employee, representative or agent of the Rental Group. Smoking is only permitted at those areas designated by the camp administration. Cigarette butts and ashes will be disposed of in appropriate containers.
- S. Will arrive at and depart from the camp at the times and on the dates listed in **Attachment A**. The failure of the Rental Group to arrive at or depart from the camp when required, to make payment to Clover Patch when due of all fees payable hereunder and to, within three (3) days written notice from CFDS, to comply with all of the other terms and provisions to be complied with by the Rental Group hereunder shall constitute an event of default. Upon an event of default, CFDS may immediately terminate this Agreement, if it so elects, and/or pursue all rights and remedies available to it at law and in equity, including using the provisions of *Article 7 of the New York Real Property and Proceedings Law* to have the Rental Group evicted from the Camp.

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T. Will produce evidence of acceptable insurance coverage as follows:

1. Insurance Requirements

- a. Comprehensive liability insurance, or in the case of professional services, errors and omissions insurance and/or professional liability insurance, or medical malpractice insurance, with primary liability limits of \$1,000,000.00 for each occurrence and \$3,000,000.00 in aggregate. For larger contracts CFDS may require higher limits that may be satisfied through umbrella or excess coverage.
- b. Automobile liability insurance, including hired and non-hired automobile coverage, with a limit of not less than \$1,000,000.00 per occurrence for each vehicle used in connection with this Agreement.
- c. Workers' Compensation Insurance covering all employees of the Rental Group. For sole proprietors or other forms of business organizations that do not require Workers' Compensation, *Form C-105.21* of the *Workers' Compensation Board* should be submitted.

The above insurances, where appropriate, shall name CFDS or one of its subsidiaries, as an additional insured. Each insurance certificate evidencing the above insurance shall contain a provision that the insurance company will give CFDS ten (10) days prior written notice in the case of any material change or cancellation or termination for any reason other than non-payment. The above insurance coverage must be written by an insurance carrier with an *A.M. Best Key* rating of *A-Class 6* or better and the insurance carrier must be licensed to do business in the State of New York. Certificated evidencing that the aforesaid insurances are in full force and effect must be provided to CFDS prior to the commencement of this agreement. Such certificates are to be mailed or delivered to Operations Division, Center for Disability Services, 314 South Manning Boulevard, Albany, New York 12208. With respect to Comprehensive Liability Insurance and Automobile Liability Insurance, the Rental Group will be required to name CFDS and/or one of its subsidiaries, as the case may be, as certificate holder.

- d. Rental Group will purchase camper Accident Insurance for each camper through CFDS for Five Dollars (\$5.00) per camper per week, **Attachment B-1**.

2. Indemnification

The Rental Group hereby agrees to indemnify and hold CFDS and its affiliates and their respective directors, officers, agents and employees harmless of and from all claims, damages, suits, judgments and demands of any nature or kind, arising, or alleged to have arisen, from the Rental Group's use of the Camp and/or its facilities arising out of or in conjunction with the use of the Camp, including any damage caused to the Camp, equipment and facilities provided hereunder; except for any damages and/or claims arising out of or attributable to the negligence of CFDS.

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CFDS and the Rental Group shall give to each other immediate written notice of any claim, suit, judgment or demand that may be subject to this provision. This provision shall survive the termination or cancellation of the Agreement.

- III. Both parties agree that by close cooperation and periodic meetings between the respective directors and staff, smooth operation of the camp can be assured and they agree that:
- A. Final authority affecting property, equipment and facilities rests with the Camp administration.
 - B. Final authority affecting health, safety and welfare of the campers and Camp personnel rests with the Camp administration.
 - C. If a Rental Group departs camp early due to desire, illness or behavioral reasons, as determined by the camp program manager, no refund will be given.
 - D. The Rental Group will accurately represent its affiliation with Clover Patch Camp and CFDS at all times. CFDS reserves the right of final approval on the use of the Clover Patch Camp name in all awareness, public relations and fund raising materials including, but not limited to all literature, audio-visual presentations and media events, thus ensuring clear and accurate communication regarding the Rental Group relationship with Clover Patch Camp and CFDS.
 - E. CFDS reserves the right to rent/schedule camp facilities to multiple parties in order to maximize full camp capacity where possible. All parties will be notified of such scheduling prior to camp rental commencement.
 - F. The relationship between CFDS and the Rental Group is one of vendor and vendee and nothing herein contained shall be deemed to create any other relationship between the parties.
 - G. It is further understood and agreed that there is nothing implied or expressed by CFDS, Clover Patch Camp or the Rental Group that binds either for future operation in subsequent years. This contract will be in effect on _____ and terminate on _____.
 - H. Final authority of Rental Group rests with:
Daytime phone number: _____
Evening phone number: _____
 - I. This Agreement constitutes the entire understanding of the parties hereto relating to the subject matter hereof and shall be binding upon and inure to the benefit of the parties hereto and their respective successors and assigns. It shall be governed by and enforced in accordance with the laws of the State of New York.
 - J. All notices to be effective hereunder shall be in writing and shall be delivered in person or sent by regular mail to the party to whom notice is to be sent at the address set forth at the beginning of the Agreement or such other address as a party may, in accordance with the provisions hereof, indicate to the other. Any

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notice hereunder shall be deemed given upon mailing or delivery as the case may be.

- K. This Agreement may not be amended, changed or modified, except by a written agreement signed by all of the parties hereto. If any provisions of this Agreement shall for any reason be deemed to be invalid, inoperative or unenforceable, this Agreement shall otherwise remain in full force and effect and shall be reformed and constructed as if such invalid, inoperative or unenforceable provision had never been contained herein.
- L. A waiver by either party to this Agreement of any one or more defaults, if any, on the part of the other shall not be constructed to operate as a waiver of any other future default under this Agreement.
- M. In the event of a labor dispute, major disaster or epidemic or other cause beyond the control of CFDS which would interfere with its ability to provide the services and the facilities to be provided hereunder, CFDS shall be obligated to provide only such services and facilities as may be practical according to its best judgment and based on the limitation of the facilities and personnel which are then available.
- N. The Attachments referred to herein are incorporated herein and made a part of this Agreement.
- O. The Rental Group may not assign or transfer this Agreement or any of its rights or obligations hereunder except upon the prior written consent of CFDS.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the _____ day of _____, 20_____.

Center for Disability Services, Inc.

Date: _____ By: _____

Rental Group

Date: _____ By: _____

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ATTACHMENT A

Day Rental

Rental Fees:

1 hour: \$100.00	5 hours: \$250.00
2 hours: \$150.00	6 hours: \$280.00
3 hours: \$180.00	7 hours: \$315.00
4 hours: \$215.00	8 hours: \$350.00

Camper Insurance: \$5.50 per camper

Rental Fee Includes the Following Facilities and Equipment:

- * Full Kitchen
- * Dining Hall
- * Camp Fire Pits
- * Pool (unheated)
- * Recreation Equipment
- * Nature Trails
- * Outdoor Play Area
- * Bath & Toilet
- * Portable Gas Grills
- * Wheelchair Accessible Dock

Additional Fees and Services:

- * Heated Pool \$110.00 per day
- * Arts/Crafts Supplies \$8.00 per camper per craft project

Rental Group: _____
Contact Person: _____ Phone #: _____
Address: _____

Check all that apply:

- _____ A. Facilities-Basic Rental
- _____ B. Camper Insurance (required)
- _____ C. Heated Pool
- _____ D. Arts & Crafts Supplies

Above services will be provided at Clover Patch Camp, located at 55 Helping Hand Lane, Glenville, New York 12302.

The camping session shall be as follows:

Rental Date: _____ Total Number of Hours _____
Beginning Time: _____ Ending Time: _____
Number of Campers: _____ Number of Rental Group Personnel: _____

**Arrival time shall be no earlier than 8:00 am.

**Departure time shall be no later than 8:00 pm.

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ATTACHMENT A

Overnight Rental

Rental Fees per day:

1 Cabin: \$170.00	4 Cabins: \$460.00
2 Cabins: \$265.00	5 Cabins: \$545.00
3 Cabins: \$365.00	

Camper Insurance: \$5.50 per camper

Rental Fee Includes the Following Facilities and Equipment:

- * Full Kitchen
- * Dining Hall
- * Camp Fire Pits
- * Pool (unheated)
- * Recreation Equipment
- * Nature Trails
- * Outdoor Play Area
- * Bath & Toilet
- * Portable Gas Grills
- * Wheelchair Accessible Dock

Additional Fees and Services:

- * Pool (heated) \$110.00 per day
- * Arts/Crafts Supplies \$8.00 per camper per craft project

Rental Group: _____
Contact Person: _____ Phone #: _____
Address: _____

Check all that apply:

- _____ A. Facilities-Basic Rental
- _____ B. Camper Insurance (required)
- _____ C. Pool (heated)
- _____ D. Arts & Crafts Supplies

Above services will be provided at Clover Patch Camp, located at 55 Helping Hand Lane, Glenville, NY 12302.

The camping session shall be as follows:

Rental Date: _____ Beginning Time: _____ Ending Time: _____
Number of Campers: _____ Number of Rental Group Personnel: _____

**Arrival time shall be between 12:00pm and 6:00pm on the first day of the camping session for campers.

**Departure time shall be between 8:30am and 12:00pm on the last day of the camping session for all camp personnel and campers.

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ATTACHMENT B

Clover Patch Camp Rental Agreement Expense Summary

Day Rental

Name of Rental Organization: _____ Phone Number: _____

Authorized Agency Contact: _____ Phone Number: _____

Dates of Rental: _____

Insurance Carrier Name/Number: _____

Number of Campers Attending: _____ Number of Rental Group Personnel: _____

Camp Rental:

Number of Hours: _____

Total Rental Fee: _____

Additional Services:

Heated Pool (# of Days): _____ x \$110.00 _____

Arts and Crafts Projects/Supplies (# of Campers): _____ x \$8.00 _____

Total Additional Services: _____

Camper Insurance:

Number of Campers: _____ x \$5.50 _____

Camp Rental: _____

Additional Services: _____

Camper Insurance: _____

Total Rental Fee: _____

**A 20% non-refundable deposit is due at time of application.

**Remaining balance is due thirty (30) days prior to rental period.

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**ATTACHMENT B
Clover Patch Camp Rental Agreement Expense Summary**

Overnight Rental

Name of Rental Organization: _____ Phone Number: _____

Authorized Agency Contact: _____ Phone Number: _____

Dates of Rental: _____

Insurance Carrier Name/Number: _____

Number of Campers Attending: _____ Number of Rental Group Personnel: _____

Camp Rental:

Number of Cabins Renting: _____

Number of Days Renting: _____

Total Rental Fee: _____

Additional Services:

Heated Pool (# of Days): _____ x \$110.00 _____

Arts and Crafts Projects/Supplies (# of Campers): _____ x \$8.00 _____

Total Additional Services: _____

Camper Insurance:

Number of Campers: _____ x \$5.50 _____

Camp Rental: _____

Additional Services: _____

Camper Insurance: _____

Total Rental Fee: _____

**A 20% non-refundable deposit is due at time of application.

**Remaining balance is due thirty (30) days prior to rental period.

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ATTACHMENT B-1

Clover Patch Camp Camper Accident Insurance

Insurance Fee (\$5.50 per camper per week): _____

Insurance Information

Aggregate Limit:	\$100,000.00
Accidental Death:	\$ 15,000.00
Accidental Dismemberment (various sums):	\$ 15,000.00
Accidental Medical Expense Benefit:	\$ 5,000.00

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Clover Patch Camp Swimming Permission Form

Camper's Name: _____

What level swimmer is he or she? Please check the appropriate box.

- NO EXPERIENCE (HAS NEVER SWAM BEFORE)
 BEGINNER (HAS SWAM BEFORE)
 EXPERIENCED (SWIMS APPROXIMATELY TWICE A MONTH)

What type of adaptive equipment does he or she wear in the pool? _____

Are there any swimming restrictions? Yes No

I give permission for _____ to swim at Clover Patch Camp.

Parent/Guardian/Advocate Signature

Date

*Please Note. All Swimmers Wear A Personal Flotation Device In The Pool.
Socks or swim shoes are required for all swimmers*

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Clover Patch Camp Medical Release Form

Camper's Name: _____

Family Physician: _____

Address: _____

Phone Number: _____

Surgeon: _____

Address: _____

Phone Number: _____

As Legal Guardian of _____, in the event of an emergency wherein any of the above named physicians are not available, I give my consent to provide treatment and to conduct any tests by appropriate St. Clare's Hospital staff on duty that are required to render necessary medical care.

Parent/Guardian/Advocate Signature

Date

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ATTACHMENT C

I. Introduction

We are pleased that you have chosen Clover Patch Camp as the site for your camp rental experience. It is our intention to provide your staff and your campers with a positive outdoor experience that presents opportunities for adventure, challenge and individual growth. In order to accomplish this mission we ask that you review the following program information with your staff. This manual will provide important information in regards to camp policies, health and safety requirements, and general program information.

II. Clover Patch Camp Mission

We as a team are committed to meeting each camper's needs through continuous improvement and growth. We believe that through our commitment we possess the innovation, integrity and momentum to strengthen our services and provide each camper with the experience of a lifetime. We strive to create an atmosphere where our campers and staff can develop life skills, self-confidence and personal freedom by creating new friends, new memories and new experiences.

III. Session Dates

Your group is scheduled to attend camp from _____ to _____.
Your will be arriving on _____ at _____ am/pm.
Your will be departing on _____ at _____ am/pm.

IV. What You Need to Know

Clover Patch Camp is monitored by the New York State Department of Health and accredited by the American Camping Association. These two regulatory bodies require that we provide you with specific requirements for each Rental Group using our facility. Although this may seem tedious it is important for us to maintain a safe and healthy environment for all who utilize our facility.

A. Camper Requirements

1. Health Assessment completed within the last one-year period.
2. Immunization Record including:
 - a. DPT
 - b. Tetanus (within the past 10 years)
 - c. Polio
 - d. MMR
 - e. PPD (within one year)
 - f. Hepatitis B Profile
3. Medication Record and Doctor's Orders for any medication to be administered at camp.

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4. Signed medical release form (included).
5. Signed swimming permission form (included), if applicable.
6. Names and addresses of all participants.
7. Emergency contact names and numbers.
8. A listing of any persons with known allergies or health conditions requiring treatment, restrictions or accommodations while on site.
9. For minors without a parent on site, signed permission to seek emergency treatment or a signed religious waiver is needed.

B. Staff Requirements

1. Health Assessment completed within the last one-year period.
2. Complete immunization records.
3. User group is to provide staff with First Aid and CPR certifications from a nationally recognized provider.
4. User group is to provide qualified trained personnel to offer and supervise daily camp programs, not including pool usage.

V. General Camp Policies

A. In the Event of an Emergency

1. Call 911.
2. Call on-call administrator pager (518) 484-0987 or site assistant manager pager (518) 484-0927.
3. Follow your agency's procedures for emergency/incident reporting.

B. Pool Regulations

1. Camp Administrator will review all pool regulations with Rental Groups during their first visit to the pool.
2. A qualified lifeguard must be on duty at the pool for ALL swimming.
3. Anyone with a history of seizures must wear a life jacket and receive 1:1 supervision in the pool.
4. No diving.
5. If there is thunder and lightening, the pool will be closed.
6. Anyone with open sores cannot go in the pool.
7. The lifeguard and on-call administrator shall have the final authority over all operations and programs involving the pool.
8. All campers require a 1:1 ratio until the camp lifeguard and the Rental Group staff can determine swimming ability.

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C. Camp Sanitation and Safety

1. The Rental Group will empty garbage as needed throughout the day.
2. Food can only be stored in the designated areas within the camp kitchen.
3. Rental Groups are expected to keep the camp clean and tidy. The on-call administrator will walk through camp with the designated Rental Group staff to inspect the cleanliness of camp on the day of departure. Cleaning supplies are available by asking the on-call administrator.
4. The kitchen must be sanitary at all times. Due to the sharp and potentially dangerous equipment in the kitchen, all campers allowed in the kitchen must be closely supervised.
5. The sanitation of dishes and storage of food supplies must meet the New York State Department of Health's regulations. The on-call administrator will review all policies upon arrival at camp.
6. Program equipment in the dining hall is for Rental Group use. Rental Group shall supervise campers while using such equipment and return such equipment neatly in the condition it was received.
7. Report any unsafe conditions or acts to the on-call administrator immediately.
8. Graffiti is not permitted on the campgrounds.
9. Rental Groups are not permitted to bring or use in programming any animal that has not been cleared by Camp Management. If the rental group would like to bring/use animals for any reason, copies of proper insurance must be presented and approved prior to attendance at camp.
10. The parking lot at the end of the driveway at Helping Hand Lane is available for rental group parking. At no time should any rental group participant drive into Camp. Vehicles must follow all posted traffic signs.

D. Provisions

1. What does Clover Patch provide?
 - a. Paper products, hand soap, garbage bags
 - b. Playground, sporting, miniature golf equipment
 - c. Grill with propane
 - d. Dishes, cookware, flatware
2. What does the rental group provide?
 - a. Food
 - b. Staff
 - c. Linens, bedding
 - d. Personal care, hygiene products
 - e. Adaptive equipment (lifts, etc.)

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- f. Laundry detergent
- g. Firewood - If the Camp's firewood is used a fee of \$150 will be charged to the rental group.

E. Departure from Camp

1. The Rental Group's administrator and the on-call camp administrator will complete a final walk-through of the camp to report any damage or departure cleaning needs.
2. The Rental Group will leave the campgrounds and buildings clean and undamaged.
3. A housekeeping fee will be charged to groups who have a function requiring excessive housekeeping/cleanup. This includes returning furniture and picnic tables to their original location, removing garbage/rubbish from buildings as well as garbage cans, and cleaning the bathhouse, dining hall/kitchen and cabins.

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VI. Emergency and Safety Procedures

The following procedures must be reviewed with all staff attending Clover Patch Camp prior to arrival. Please have each staff person sign-off on the training form and return the form together with camper information by no later than _____ days prior to the start of the camp session. It is important that Rental Groups follow all camp policies and procedures during their stay. Upon arrival each Rental Group will receive a verbal orientation to Camp. The Camp Program Manager or designee will provide the orientation.

A. Storage of Hazardous Materials

1. All Hazardous Materials including, but not limited to, cleaning supplies, gasoline, aurora, oils and chlorine are to be kept locked when not in use in either the Maintenance room or the Swimming Pool room.
2. Both the Maintenance room and Swimming Pool room will be locked at all times.

B. Lightning Risk Assessment

1. During an electrical storm, all outdoor activities (especially swimming) will be suspended until the Rental Group administration states it is all right to resume with those activities.
2. At the moment activities are cancelled, the Rental Group administration will advise each cabin where to meet for indoor activities.

C. Heat Exhaustion/Stroke Emergencies

1. Campers are encouraged to drink fluids while at camp.
2. Campers will be kept out of the sun as much as possible.
3. Each cabin is equipped with a fan.
4. Water activities will be encouraged.
5. The Rental Group on-call administrator will monitor campers and staff members for dehydration and heat exhaustion.
6. If a camper needs to be seen by a doctor they will be sent to St. Claire's Hospital via ambulance.

D. Rabies

1. Avoid wild animals at all times.
2. If a wild animal that is usually nocturnal is out in the daytime and acting strange, the Rental Group on-call administrator will notify the proper health authorities.

E. Ticks

1. Staff members will be oriented on the potential dangers of the deer tick and Lyme Disease.

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2. While walking through the nature trails, campers and staff members are encouraged to wear long sleeves, hats, long pants, and socks to help to prevent possible exposure to a deer tick.

F. Insects

1. Black flies and mosquitoes are abundant at Clover Patch Camp due to its moist and shaded environment.
2. Staff members need to ensure that campers wear appropriate clothing and bug repellent to help prevent insect bites.
3. If a camper receives several insect bites, or any insect bite looks reddened or swollen, they should be taken to the nurse for observation and possible treatment.

G. Tick and Insect Repellents

1. When used properly, chemical repellents can provide protection against ticks and insects the can transmit diseases. However, people need to remember that repellents can be potentially harmful when certain precautions are not taken.
2. The following precautions are advised when using any insect repellent.
 - a. Apply only to exposed skin or clothing.
 - b. Never use repellents over cuts, wounds or irritated skin.
 - c. Do not apply to eyes or mouth and with young children do not apply to their hands.
 - d. Avoid breathing the spray.
 - e. Heavy application is not necessary.
 - f. Wash repellents off after returning indoors.
3. While repellents are helpful, whenever appropriate, consider using non-chemical ways to deter insects.
 - a. Wear light-colored clothes.
 - b. Wear long-sleeved shirts and long pants.
 - c. Tuck pant legs into boots or socks.
 - d. Use screens or netting.

H. Avoiding Ticks and Lyme Disease

1. Lyme Disease has become the leading tick-borne illness in the United States. The deer tick is the species that most often transmits Lyme Disease.
2. With proper precautions Lyme Disease is preventable.
 - a. Deer ticks are most active from April to October, so exercise additional caution when venturing into tick country.

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- b. Stay to the center of the hiking paths and avoid grassy and marshy woodland areas.
 - c. Frequently check yourself and your campers for ticks. Deer ticks are hard to see; nymphs are dot-sized; adults are the size of a sesame seed.
 - d. When checking for ticks, look especially in areas of body creases, folds and belt lines.
 - e. If you suspect Lyme Disease or its symptoms, contact your doctor immediately.
3. Two tick repellents have been approved.
- a. DEET repellents
 - b. Permethrin repellents
4. When used improperly DEET and Permethrin repellents can cause:
- a. Eye irritation
 - b. Skin irritation
 - c. Slurred speech
 - d. Confusion
 - e. Seizures
 - f. Coma
5. If you suspect you or your camper is reacting to these repellents you should:
- a. Wash treated skin
 - b. Call a physician
 - c. Bring repellent can to the physician
6. For additional information please call:
- a. Albany County Department of Health at 477-4620
 - b. New York State Department of Health at 800-458-1158
 - c. National pesticide Telecommunications Network at 800-858-7378

I. Sun Exposure

1. Sunscreen should be available for all campers and staff members.
2. Staff members need to ensure that campers are not exposed to the sun for long periods, and that ample sunscreen or lightweight clothing that will cover a camper, is applied to prevent sunburn and unwanted exposure.

J. Fire Safety Plan

1. In the Event of a Fire:
 - a. Campers first, fire second.

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- b. Blow nearest air horn to alert camp of a fire.
 - c. Move campers to the pavilion or shuffleboard court; whichever is furthest away from the fire.
 - d. The first staff person to the meeting spot will take an attendance.
 - e. Await further instruction from Rental Group administration.
 - f. Fire exits out of camp are the camp road by dining hall, or out private property in the back of Cabin 5.
 - g. A runner (support staff designated by the Rental Group administrator) will be sent to the top of the camp road to direct emergency vehicles. The runner will advise Fire Department of people evacuating out the camp road to prevent further injuries.
 - h. At the end of the emergency an attendance of the camp will be taken again.
 - i. The on-call camp administrator will be notified as soon as possible.
2. Preventative Measures
- a. Water buckets at all fires.
 - b. Campfires are restricted to designated fire pits.
 - c. All matches are stored in closed containers and out of reach of campers.
 - d. No fires will be left unattended.
 - e. Screens will be in front of fireplace in dining hall.
 - f. Extra care with grease cooking and wax melting.
 - g. Smoking is only permitted on the porch behind Brigadoon. All other grounds and facilities are restricted.
 - h. Fire drills will be conducted on a regular basis.
 - i. All flammable materials will be labeled as such and locked in the camp's flammable cabinet.
 - j. Every sleeping quarter is equipped with a smoke detector and fire extinguisher.

K. Natural Emergencies

1. When the camp is in potential harm of receiving damaging weather, all campers will be evacuated.
2. The on-call camp administrator and the on-call Rental Group administrator will be notified.

L. Loss of Electricity and or Water

1. In the event of a power outage or no water in camp, the on-call emergency facilities manager will be called.

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2. The Glenville Fire Department and Niagara Mohawk will be called to provide us with a generator. If power and water is not available for an extended period of time, campers will be sent home.

M. Lost Camper Plan

1. This search and rescue plan is designed to take the many workers at this camp, and put them into a team of organized searchers to seek out lost campers.
2. The Rental Group administrator, or designee, leads all searches.
3. At the time a camper is reported missing, the following steps will be taken:
 - a. Staff member reports missing camper to Rental Group administrator.
 - b. Rental Group administrator blows air horn and announces the nature of the emergency.
 - c. Everyone goes to the closest emergency meeting location (pavilion, shuffleboard court).
 - d. The first staff person to the meeting spot will take an attendance.
 - e. Search teams will look throughout camp in the cabins and nearby woods.
 - f. 911 will be called to report a missing camper to outside emergency services if a camper is not found within twenty (20) minutes of the air horn blast.
4. Preventative Measures
 - a. All persons walking on the nature trail must bring a first aid kit and walkie-talkie with them.
 - b. No campers are to be left unattended by staff members at camp at any time.
 - c. Two staff members will be on duty in each cabin from 9pm to 7am.
 - d. Staff members will report to the Rental Group administrator any potential camper behaviors that may prevent an incident of a lost camper (wandering, sleepwalking, run-away threats, etc.)

N. Waterfront Emergency Plan

1. In the event of an emergency at the pool:
 - a. Lifeguard or staff member identifies the emergency.
 - b. Lifeguard blows the whistle 2 times.
 - c. Lifeguard tends to the emergency situation, while campers and staff members exit the pool area.
 - d. Runner is sent to get the nurse or Rental Group on-call administrator on scene of emergency.
 - e. Outside emergency services are called (if necessary – 911).

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- f. Incident report and notification of Rental Group administrator and camper family will be completed according to Rental Group policy.
2. Preventative Measures
- a. Waterfront staff will consist of American Red Cross certified staff:
 - i. Waterfront Director (lifeguard training, responding to emergencies, CPRFPR)
 - ii. Lifeguards (certified lifeguard training, CPRFPR)
 - b. Equipment will include:
 - i. First aid kit
 - ii. Backboard with straps and neck collar
 - iii. Shepard crook
 - iv. One ring buoy with rope attached
 - v. Two airway masks
 - vi. Two rescue tubes
 - c. A camper and staff member count will be taken every ten minutes of everyone in the pool.
 - d. Waterfront staff members will practice emergency waterfront drills within the first 24 hours of each session.
 - e. No one can swim on camp property without a certified, designated lifeguard.
 - f. All campers are considered beginners, needing 1:1 assistance and the use of a personal flotation device, unless the aquatics supervisor designates otherwise.
 - g. All campers must have signed swimming permission slips to participate in swimming at camp.
3. Alplaus Creek
- a. No campers shall enter the Alplaus Creek for any activity.
 - b. The surface of the creek and the flow of the water are unpredictable.
 - c. No campers are allowed onto the dock or near the creek's edge without a camp staff person present for supervision.
 - d. No campers are allowed beyond Cabin 5 without staff supervision.

VII. Incident/Injury Reporting

- A. A primary concern of Clover Patch Camp is the health and safety of all campers and staff.

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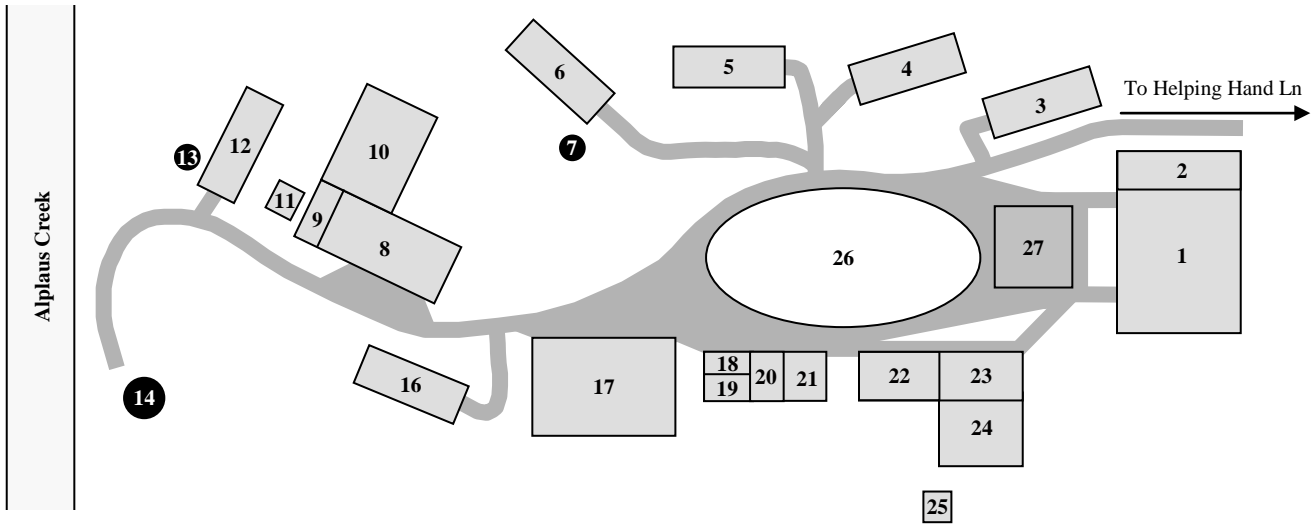
- B. Rental Groups will be expected to bring to camp a first aid kit and appropriate medication supplies, and be familiar with their agency's incident reporting protocol.
- C. All incidents that involve the Rental Group and staff will be handled by the Rental Group staff.
- D. Rental Groups are expected to report incidents involving their members to their on-call administration and to OMRDD and other government agency hot lines when appropriate. Clover Patch Camp administration will be responsible for monitoring appropriate follow-up by Rental Groups and for reporting incidents to the Department of Health when necessary.
- E. Steps for camp staff members:
 - 1. Make injured comfortable
 - 2. Bring camp nurse to the site if possible.
 - 3. Notify the on-site supervisor.
 - 4. Nurse will decide the next course of action:
 - a. Call for ambulance (911)
 - b. Transport to infirmary
 - c. Treat at site and continue activity

VIII. Rental Group Responsibilities in the Kitchen

- A. Use only clean and sanitized utensils and equipment during food preparation.
- B. Rental Groups must clean and sanitize food contact surfaces after each use.
- C. Minimize the time that potentially hazardous foods remain in the temperature danger zone of 40 to 140 degrees Fahrenheit.
- D. All dishes and food service utensils must be air-dried.
- E. All dishes and food service utensils must be protected from dust and contamination between uses.
- F. All dishes and food service utensils must be washed using the dishwasher, NOT by hand washing.

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IX. Map of Camp



- | | |
|--------------------------------------|-----------------------------------|
| 1. Dining Hall | 15. Music & Drama Cabin |
| 2. Kitchen | 16. Bathhouse |
| 3. Art & Crafts Cabin | 17. Camp Store |
| 4. Camper Cabin #1 | 18. Laundry |
| 5. Camper Cabin #2 | 19. Maintenance Closet |
| 6. Camper Cabin #3 | 20. Camp Office |
| 7. Fire Pit | 21. Nurse's Station |
| 8. Hugh Farley Pavilion | 22. Brigadoon Staff Lounge |
| 9. Pool Room | 23. Brigadoon Male Staff Quarters |
| 10. Pool | 24. Linen Shed |
| 11. Tool Shed | 25. Playground |
| 12. Female Staff Quarters (Cabin #5) | 26. Basketball Court |
| 13. Fire Pit | |
| 14. Fire Pit | |

Clover Patch Camp Rental Agreement

Rental Group Staff Training Form

The following _____ (agency name) staff have reviewed the Clover Patch Camp Rental Program Information. The undersigned are familiar with the Clover Patch Camp policies and procedures and agree to abide by them during their rental stay.

Printed Name

Signature

Staff Supervisor Signature

Date