



Dear Student,

This letter serves as a confirmation for your school's participation in the RISE Retreat with The Diversity Center of Northeast Ohio. We're excited to have you participate in this year's RISE Retreat! The RISE Retreat is an opportunity for high school leaders from all over Northeast Ohio to come together to build community, learn from each other's experiences, build and practice skills and strategies for engaging in activism and community change, and have fun!

During the retreat, you will participate in various small and whole group activities/discussions, icebreakers and community-building, activism and leadership trainings, complete an activism project (art + activism), get to engage with some local organizations creating positive change in our communities, and learn skills to bring back to your schools and communities.

## RISE Retreat

Respect • Inclusion • Social Justice • Empathy  
April 18-20<sup>th</sup>, 2024

Theme: "Activism: Student Change-Makers"

As the RISE Retreat fast approaches, there are a few things we would like to address.

- **Arrival at the Retreat:** School groups are expected to arrive at Camp Wise between 4:00-5:00 pm on Thursday, April 18<sup>th</sup>. Dinner on Thursday will be provided between the hours of 5:30-7:00 pm.
- **Departure from the Retreat:** Pick-up and departure from Camp Wise will take place between 11:30-12:00 the morning of Saturday, April 20<sup>th</sup>.
- **COVID-19 Precautions:** All registered educators/adults and student participants will be required to take a COVID test the evening before or morning of the RISE Retreat. The Diversity Center will drop off test kits for each participant (students and adults) that will be attending the RISE Retreat to one of the registered educators at your school. Educators are responsible for distributing and ensuring each participant (students and adults) that will be attending the RISE Retreat complete a COVID rapid test either the evening before or the morning of departure for the retreat. All COVID tests must be completed prior to student groups travelling to camp. If any participants test positive, or have any symptoms (feeling ill, fever, cough, etc.), they should not attend the retreat. Mask usage during the retreat is optional, and masks will be provided for participants if they would like to use them. All participants will complete a quick temperature and health check each morning before breakfast.



- **Notes on Accessibility:** All buildings in use at Camp Wise have stairs and also ramp entrances. The main pathways around camp are paved, but some are gravel and/or packed dirt. Students will be participating in a low ropes course and have an option to participate in a hike (both led by Camp Wise staff).
- **Sleeping Accommodations:** Students will be staying in cabins with our volunteer college counselors. All counselors have received training and completed background checks. Student cabins have bunk beds.
- **Cell Phones:** The goal of the retreat is to connect with others, be present in the moment, and build community. All participants, students and educators, should plan to keep their cell phones put away during the retreat. The Diversity Center staff members will have an emergency cell phone is parents/caregivers need to get ahold of their student during the retreat. As student leaders, the expectation is that staff and counselors don't have to remind or ask students to put their phones away; choose to engage and be present with the people around you!
- **Vaping & Tobacco Products:** Student usage of vaping and/or tobacco products are strictly prohibited during the retreat. Please leave these at home and do not bring them with you to the retreat.
- **Drugs & Alcohol:** Any and all drug and/or alcohol usage during the retreat is strictly prohibited. This is a leadership retreat and you are representatives of your school. If any student brings any of these with them, they will be sent home and a parent/caregiver will need to pick them up.
- **Medications:** The Diversity Center staff and educators are not able to administer medications to participants. If you have prescribed medications that you take, please make sure to bring these with you. Students and educators will be responsible for their own medications during the retreat, which are also noted on the medical forms in this packet.
- **Registration Forms:** Enclosed are the advisor and student packets, which can also be found online at [RISE High School Retreat - The Diversity Center \(diversitycenterneo.org\)](http://www.diversitycenterneo.org) **Print and complete all registration forms and return them to your educator/advisor that will be attending the retreat; they will scan and send the forms to The Diversity Center and collect your paper forms to bring to the retreat.**



Student packet includes:

- Agreement to Participate
  - Student Agreement
  - Student & Parent/Caregiver Agreement & Emergency Release
- Contact Information & Emergency Contact
- Medical Information & Medical History Form
- Cabin Assignments
- General Information
- Publicity Release
- Important Phone Numbers
- Packing List

Student Agreement:

I accept the challenge of being a participant at The Diversity Center of Northeast Ohio's RISE Retreat. As a participant, I acknowledge my responsibility to myself and other participants.

I agree to be present at the retreat from Thursday, April 18<sup>th</sup> through Saturday, April 20<sup>th</sup>, 2024, unless I have arranged an alternative schedule with The Diversity Center of Northeast Ohio and my school advisor.

I will respect the rights and responsibilities of my participation and will join in the spirit of the retreat to the best of my ability.

---

**STUDENT SIGNATURE**

**Date**

Student & Parent/Caregiver Agreement to Participate & Emergency Release:

I understand that my child will act as a participant for the RISE Retreat scheduled for Thursday, April 18th through Saturday, April 20th, 2024 sponsored by The Diversity Center of Northeast Ohio. In consideration for my child being permitted to participate in activities with The Diversity Center at Camp Wise, I (we), parent(s) and/or legal caregiver(s) of:

\_\_\_\_\_ **(Student Name)**, agree to the following provisions.



## Acknowledgement

I understand that there are numerous risks and benefits associated with participating in camping activities, including low initiatives/action challenge activities. I recognize that accidents occur and that all risks cannot be eliminated or controlled. Some, but not all, of the specific risks include:

Weather conditions which may change rapidly, causing injury directly (sunburn, hot/cold temperature extremes) or by affecting other factors (performance of equipment may be impaired). Some activities take place in a natural environment, where unexpected and unmarked objects and conditions create the risk of injury or death from falling, tripping, etc., insect or animal contact, and potentially harmful vegetations. Activities near water involve the risk of injury, illness, and drowning.

These are some, but not all of the risks inherent in camping activities. There are also some risks which cannot be anticipated. Camp directors, counselors, The Diversity Center staff, and the site staff will use their best judgment in determining how to react to circumstances including the aforementioned and other unpredictable, natural phenomena.

I acknowledge that I am aware of the possible risks, dangers and hazards associated with travel to and from location(s) to be visited during the retreat including transportation provided by commercial, private, and/or public motor vehicles.

In the event that the child needs to be sent home, for any reason, whether discipline- or health-related, it will be the responsibility of the parent/caregiver to retrieve the child. The child shall be picked up within 3 hours.

### **Each participant is expected to:**

- Respect and follow directions of The Diversity Center staff and counselors, as well as all posted rules/regulations and Community Agreements.
- Assist by informing/alerting the group leader(s) to situations which may cause injury to themselves and others.
- Participate in all discussions and activities.

### **Specific Requirements:**

Each participant should provide appropriate weather/survival clothing, including applicable footwear. The Diversity Center does not provide and assumes no responsibility for personal clothing, personal camping gear and the like and/or injury arising from the participants' lack of use, or misuse, of the same.

There are no physical, emotional, or mental problems or limitations associated with my child's participation in activities, except as disclosed by me in writing attached to the medical form.

The physical rigors involved require that each participant be of sound health, considering the activities involved and that acceptable certification of participation be provided by parents/caregivers.



**Release Provision:**

I, on behalf of myself and my child, hereby release and waive any claim of liability against The Diversity Center of Northeast Ohio, its agents, employees, officers, directors, successors, and assigns with respect to any injury, illness, damage or death occurring to my child while he/she participates in any and all activities that are related to my child’s participation. I understand that this release pertains to any negligence by The Diversity Center, its agents, employees, officers, directors, successors, and assigns, as well as the negligence of any other participants, to my child. I assume all risk of injury on behalf of my child.

I hereby agree to indemnify and hold harmless The Diversity Center of Northeast Ohio, its agents, employees, officers, directors, successors, and assigns with respect to any claim asserted by or on behalf of my child as a result of injury, illness, damage, or death.

**Consent and Signatory Acknowledgement:**

Parents or Caregivers (of Minors):

I have read and fully understand the terms of this agreement and explained its terms to my child. I give my permission for my child to participate in all camp activities, including those described.

In my absence or inability to communicate with emergency and hospital personnel, I hereby grant authority to release, for the purpose of providing medical treatment, my child to the care of medical personnel or physicians as The Diversity Center of Northeast Ohio determine reasonably appropriate.

---

**PARENT/CAREGIVER SIGNATURE**

**Date**

Note: Custodial parents or caregivers must sign this form.

**Participant (including minors) – Acknowledgment of personal responsibility:**

I have read, and my parent/caregiver has explained, the terms of this agreement. I will abide by the terms of the Agreement and recognize my personal responsibility for my conduct.

---

**STUDENT SIGNATURE**

**Date**



## Student Contact Information:

\_\_\_\_\_

High School \_\_\_\_\_ Student First & Last Name \_\_\_\_\_

Age \_\_\_\_\_ Gender \_\_\_\_\_ Pronouns \_\_\_\_\_

Student E-mail \_\_\_\_\_

Student Cell Phone \_\_\_\_\_

(Home) Street Address \_\_\_\_\_

\_\_\_\_\_

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

## Parent/Caregiver Information:

\_\_\_\_\_

Parent/Caregiver First & Last Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_



## Emergency Contact:

Name/Relationship \_\_\_\_\_

Street  
Address \_\_\_\_\_

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

Cell Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

## Medical Information & Medical History:

Physician: Name \_\_\_\_\_ Phone (day & night) \_\_\_\_\_

Medical Insurance: \_\_\_\_\_ Provider & Number \_\_\_\_\_



**Allergies:**

Seasonal Allergies (pollen, ragweed, grass, etc.)

Food (list below)

Insect Bites/Stings

Medication Allergies (list below)

Poison Ivy, Sumac, Oak

Other (list below)

Please list any important information to know about your allergies. (e.g. "I carry an epi-pen/inhaler.").

---

---

Currently taking medication for allergies? Please describe:

---

---

**Medical Conditions:**

Asthma

Heart Disease/Disorder

Other

Epilepsy/Seizures

Ear Infections

Injury

Diabetes

Please describe any medical conditions that could affect participation. Note: There will be a dance on Friday night that may/may not feature flashing lights. Please note if this will be a concern so we can plan to make arrangements to communicate this to our DJ accordingly.

---

---

---





**Medications:**

Are you taking prescribed medication? If so, please list medication & dosage schedule.

---

---

---

**Dietary Restrictions:**

Any special consideration or dietary needs? **PLEASE SPECIFY IF YOU ARE A VEGETARIAN, MAINTAIN A KOSHER DIET, LACTOSE-FREE, GLUTEN-FREE, OR HAVE FOOD ALLERGIES!**

- |                                      |   |
|--------------------------------------|---|
| <input type="checkbox"/> Vegetarian  | <input type="checkbox"/> Lactose-Free           |
| <input type="checkbox"/> Vegan       | <input type="checkbox"/> Food Allergies         |
| <input type="checkbox"/> Gluten Free | <input type="checkbox"/> Other (please explain) |

Note: All food served (meals and snacks) will be provided by contracted caterers. All foods and meals at Camp Wise are [Kosher](#).

---

---

---

**Additional Information:**

Please offer any necessary health information not included on this form:

---

---

---

---



## Cabin Assignments:

Students will be assigned to same-gender cabins with a shared restroom with another same-gender cabin. All restrooms have bathroom stalls and private shower stalls with curtains. Cabin assignments are made using information shared in the “Student Contact Information” section of the registration forms.

If you are transgender, non-binary, or genderqueer, please note which cabin you feel most comfortable being assigned to. If this doesn’t apply to you, skip this question. Note: If there are enough students that identify as transgender, non-binary, or genderqueer, there is a possibility we might be able to designate one of the cabins specifically for these students. If that is a possibility, we will reach out to individuals about these accommodations.

- Boys’ Cabin
- Girls’ Cabin

## General Information:

The RISE Retreat is an intellectually, physically, and emotionally challenging experience for young people. To assist the staff in providing a productive and supportive environment for all participants, please respond to the following question. All information will remain strictly confidential.

Do you have particular emotional, mental health, or social needs about which the staff should know? If yes, please explain briefly.

---

---

---

---

---

---

---

---



The  
**Diversity Center**  
*of northeast ohio*

3659 Green Road, Suite 220  
Cleveland, Ohio 44122  
p. (216)752-3000 f. (216)752-4974  
[www.diversitycenterneo.org](http://www.diversitycenterneo.org)

Are you currently participating in psychological counseling? If yes, please provide your counselor/therapist's name and phone number below (for emergency use only).

---

---

---

Please share any additional information you would like the staff/counselors to know about you. (optional)

---

---

---

---

---

---

---

---

---

---

Have any questions about the registration forms or the RISE Retreat?

Email us at [schoolandyouth@diversitycenterneo.org](mailto:schoolandyouth@diversitycenterneo.org)



### Student Publicity Release

Photographs, slides, quotes, and videos may be made during the retreat, and participants are likely to be included in any of these. These photos, slides, quotes, and videos may be used in press releases, news stories, various The Diversity Center of Northeast Ohio publicity pieces, social media, or in similar publications.

\*\*\*\*\*

I give my consent to use photographs, slides, or quotes, and videos in which I may appear for publicity purposes.

---

**STUDENT NAME (Print)**

---

**STUDENT HIGH SCHOOL**

---

**PARENT/CAREGIVER SIGNATURE**

**Date**

---

**STUDENT SIGNATURE**

**Date**



## Emergency Information:

**In the event of an emergency, please refer to the names and phone numbers listed below.**

### Diversity Center Program Staff:

**Samantha Speck: Chief Program Officer**

Phone: 234-348-1980

**Megan Nelius: Director of JEDI Programs, School & Youth**

**Em Richards: Senior JEDI Specialist, School & Youth**

**Calil Cage: JEDI Specialist, School & Youth**

### Important Addresses:

**Camp Wise**

**13164 Taylor Wells Road**

**Chardon, OH 44024**

**440.635.5444**

**The Diversity Center of Northeast Ohio**

**3659 Green Road, Suite 220**

**Cleveland, OH 44122**

**216.752.3000**

## Suggested Packing List:

**DRESS APPROPRIATELY FOR THE WEATHER:** Activities will be both indoors and outdoors rain or shine. Check the weather report before you pack; pack for all possible conditions. In case of rainy weather, most activities will be moved indoors, but travelling between buildings at camp will require short periods outdoors.

**DRESS IS CASUAL:** Jeans, T-shirts, shorts, etc. The emphasis is on comfort. Some of our outdoor activities will include a low-ropes course, sports (optional), and physical activity; we suggest packing clothes that you feel comfortable in for physical activity and that you don't mind getting dirty/muddy. Dress in layers so you can add or remove layers based on the changes in weather and temperature throughout the day. Closed toed shoes are a must, please wear sturdy and comfortable sneakers.

**SLEEPING ACCOMMODATIONS:** The cabin beds have mattresses, but NO pillows, linens, or towels. Students and educators/advisors should bring their own pillows, sheets, towels, and blankets or sleeping bags. Each cabin does have heat, an electrical outlet, light, and bathroom with shower stalls.

**A NOTE ON CELL PHONES:** The goal of the retreat is to connect with others, be present in the moment, and build community. All participants, students and educators, should plan to keep their cell phones put away during the retreat. While we understand there are emergencies and family needs, please model this behavior for students throughout the retreat and remind them to keep their phones away and off during the retreat. Note: The cell service is not the greatest out at camp.

## **WHAT NOT TO PACK:**

- Snacks, candy, and food items are strictly prohibited in the cabins. We want to ensure we don't attract any unwelcome critters or insects. This is a strict rule put in place by Camp Wise, please respect this and don't make the counselors confiscate snacks. If you need a specific food item for a medical condition, please specify this on your medical forms and give this to a staff member to store in a sealed container to be administered upon request.
- Gaming devices, technology, laptops. Expensive jewelry. Money.
- The Diversity Center and Camp Wise are not responsible for lost, stolen, or damaged items.

### **WHAT TO PACK:**

- Jeans/long pants
- Shorts
- T-shirts, long-sleeve shirts
- Underwear, socks (pack extra pairs of socks in case they get wet due to the weather)
- Light jacket/sweatshirt (we'll have some evening outside activities)
- Pajamas
- Sturdy and comfortable sneakers
- Shower shoes/flip flops (optional)
- Rain gear (ponchos, rain jacket with hood) – **We're outside rain or shine!**
- Twin sheets and blanket OR sleeping bag, pillows
- Toiletries: toothbrush, toothpaste, hairbrush, soap, shampoo, deodorant, etc.
- Towel and wash cloth (for shower)
- A trash bag or grocery bag for dirty clothes/towel in suitcase when repacking to leave
- Flashlight with fresh batteries
- Reusable water bottle
- Sunscreen, insect repellent – We will have these provided daily for all participants, but pack if you have your own favorite brands.
- Any medications

**LABEL EVERYTHING WITH YOUR NAME:** Label everything with your name using a piece of tape and a sharpie just in case you misplace something; this makes it a lot easier to figure out whose flashlight or water bottle is sitting on the picnic table when there's 100 people at camp! Each cabin will also have a roll of masking tape and a sharpie in case there's anything you want to label when you are unpacking.

**TALENT SHOW:** There will be a Talent Show on Friday night where participants can sign up to perform a talent, do a fun skit with their cabin/core/student groups, or perform their activism project. If there's anything you might want to bring for this, plan accordingly (e.g. Pack your guitar if you want to sing a song and play, etc.). Students will also showcase their visual art from their activism projects in a gallery for participants to view and get to talk with the artists!

**GLOW PARTY!** There will be a dance Friday night with the theme: "Glow Party!" Think glow in the dark, bright colors, appropriate attire, etc. Themed outfits optional, it's all about having fun and feeling comfortable!