

# Charter School Retreat

## Audubon Center of the North Woods

### November 21-23, 2008

## TENTATIVE AGENDA

(final details are still being worked out, so this agenda is subject to change)

### Friday, November 21

- 5-7pm: Arrive and get settled in rooms
- 6-7pm: Walking tours available (ACNW staff)
- 7:00pm: Dinner
- 7:30pm: Welcome
- 8:00pm: Round Table: Sharing Successes

### Saturday, November 22

- 7:30am: Breakfast
- 8:30-10am: Session 1: The Sponsor Perspective (Steve Dess)
- 10:30-noon: Session 2: Strategic Planning 1: process and reviewing (Mike Link)  
OR: Sharing Curriculum Resources
- 12:00pm: Lunch
- 1:30-3pm: Session 3: Strategic Planning 2: annual reports (Mike Link)  
OR: Outdoor Sampler: Wildlife tour/presentation, Low Ropes, Wetlands hike (ACNW Staff)
- 3:30-5pm: Session 4: Board Policies (Becky Meyer and Steve Dess)  
OR: Inquiry Learning (Rick Fletcher)
- 5-6pm: Walking tours available (ACNW staff)
- 6:00pm: Dinner
- 7:00pm: Round Table: Sharing Successes

### Sunday, November 23

- 7:30am: Breakfast
- 8:30-10am: Session 5: Grant opportunities with ACNW (Katie Kleese)  
OR: Outdoor Sampler: Wildlife tour/presentation, Low Ropes, Wetlands hike (ACNW Staff)
- 10:30-noon: Session 6: Looking Ahead to Next Year (Mike Link)
- 12:00pm: Lunch
- 12:30pm: Wrap-up

Group: \_\_\_\_\_

**CONFIDENTIAL MEDICAL FORM**  
This Form MUST be completed by all guests.



\_\_\_\_\_  
Last Name: First Name \_\_\_\_\_  
\_\_\_\_\_  
Mailing Address Suite/Apt. # \_\_\_\_\_  
\_\_\_\_\_  
City State Zip \_\_\_\_\_  
\_\_\_\_\_  
Phone E-mail Address Date of Birth \_\_\_\_\_

**Emergency Contact**  
\_\_\_\_\_  
Name \_\_\_\_\_  
\_\_\_\_\_  
Relationship \_\_\_\_\_  
\_\_\_\_\_  
Daytime Phone \_\_\_\_\_  
\_\_\_\_\_  
Evening Phone \_\_\_\_\_

**Primary Physician (s)**  
\_\_\_\_\_  
Name \_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_  
\_\_\_\_\_  
Name \_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_

**Insurance Information**  
\_\_\_\_\_  
Carrier \_\_\_\_\_  
\_\_\_\_\_  
Policy # \_\_\_\_\_  
\_\_\_\_\_  
Group # \_\_\_\_\_  
\_\_\_\_\_  
Phone \_\_\_\_\_

1. Do you have any of the following conditions?  
Epilepsy/seizures      bleeding/clotting disorder      heart disease  
Asthma/emphysema      high blood pressure      diabetes  
OTHER: \_\_\_\_\_
2. Allergies (food, environmental, medication): \_\_\_\_\_  
No known allergies
3. List any medications taken on a daily basis (or attach separate sheet):  
\_\_\_\_\_  
Do not currently take medications
4. Do any medications require refrigeration?  
Yes      No medications require refrigeration
5. Do you have any other Medical Condition of which the Center should be aware? (describe below)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Will you have any special Medical requirements during this event?  
Yes      No  
\_\_\_\_\_  
\_\_\_\_\_

I hereby release the above information for use of the Audubon Center of the North Woods and/or any other Medical personnel who might need to provide care to me during this event.  
In the event of an emergency, I authorize treatment by emergency medical personnel.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**ASSUMPTION OF RISK and LIABILITY RELEASE**

I will be participating in a program, conference or retreat at the Audubon Center of the North Woods. I acknowledge and am aware that this event involves certain inherent risks which I am prepared to accept. These risks may include (but are not limited to) inclement weather; walking on uneven trails; canoeing; cross country skiing; snowshoeing; rock climbing and belaying on an indoor climbing wall; a high ropes course activity; field trips to non-Audubon Center sites; and other peoples' actions.

Accordingly, I hereby release the Audubon Center of the North Woods, including all of their personnel, agents, affiliates, staff and directors, from any and all liabilities to me with respect to injury, sickness, disease, loss or damage. This release applies to any and all liabilities to me or my estate of any description, whether arising from ordinary negligence or otherwise, and whether involving fees and expenses of any kind. In the event that some other person or entity seeks compensation for these released liabilities, I or my estate will indemnify and hold harmless the Audubon Center of the North Woods for all sums reasonably incurred in response to that claim. This release is to be interpreted and enforced under Minnesota law.

Participant Name \_\_\_\_\_

Participant Signature \_\_\_\_\_

Address \_\_\_\_\_

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

Date \_\_\_\_\_

**Photo Release Permission**

The undersigned hereby allows the Audubon Center of the North Woods to use photographs of the participants taken during the Audubon programs for use in promotional materials.

Participant Signature : \_\_\_\_\_ Date \_\_\_\_\_

## **Audubon Center of the North Woods**

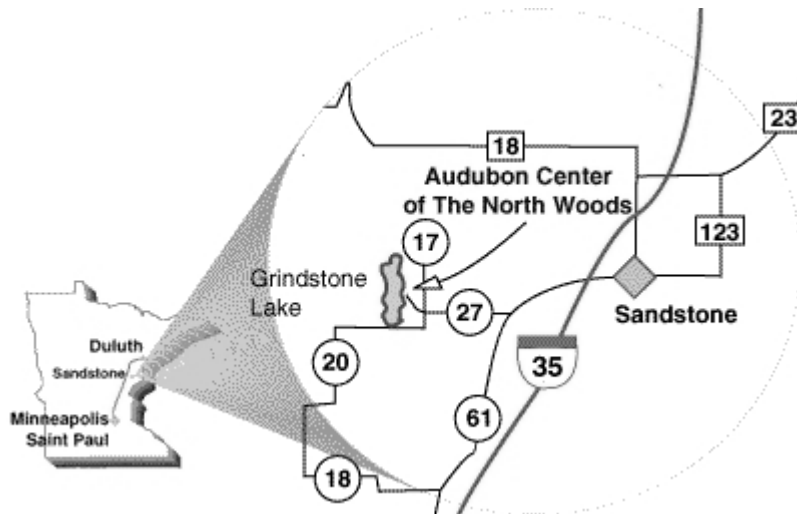
Ph. 320.245.2648

Toll Free 888.404.7743

### **“Suggestions on what to Bring to the Audubon Center” For Groups/Conferences**

- \_\_\_\_\_ \*Towels & Washcloths
- \_\_\_\_\_ Soap
- \_\_\_\_\_ Shampoo
- \_\_\_\_\_ Toothbrush & toothpaste
- \_\_\_\_\_ Personal Toiletries & Medications
- \_\_\_\_\_ Alarm clock
- \_\_\_\_\_ Reading lamp
- \_\_\_\_\_ Calling Card (For long distance calls. Cell phones are not reliable at our location)
- \_\_\_\_\_ Appropriate outerwear for exploring the great outdoors
- \_\_\_\_\_ Comfortable walking shoes or boots (we have over 7 miles of trails)
- \_\_\_\_\_ Camera, binoculars
- \_\_\_\_\_ \*\*Water bottle

\*\* Please be aware that our water comes from a well and has a lot of iron and minerals in it. Although the water in the dorms may smell and taste different from the water you are used to, it is not harmful to use or consume. We have two drinking fountains in the dining hall that are double filtered to take out much of the natural metallic taste of the water. You may fill water bottles from these fountains any time the dining hall is open.



### **Directions to the Audubon Center From the Twin Cities and Duluth:**

From Interstate 35, exit on the Sandstone Exit 191. Go southwest on County road 61 just over two miles. Take a right on County Road 27, cross the Munger bike trail, turn left (Grindstone Lake Road) and go just over three miles. Take a right on County Road 17 (Fox Road). Turn left between the stone pillars (Audubon Road). Follow this road to the office - one mile. (There will be signs the whole way) NOTE: during 2007, Fox Rd. is undergoing construction, so signs may be missing.