



## Drill Weekend Youth Program-October 18 & 19 2014

Free Day Camp for Guard and Reserve ages 5-18

4-H Programs "Rockets to the Rescue" and "Health Rocks" plus 2015 State Fair Projects!

**8am to 4:00pm program time each day**  
**Sgt William Lloyd Nelson VFW Post 3792**  
**5695 Summit Bridge Road Townsend**



**Registration due 10/15/14 to Rhonda Martell, OMK Program Director Email registration (see 4-H forms):**

**delawaremilitary4h@gmail.com or Fax (302)735-8130**

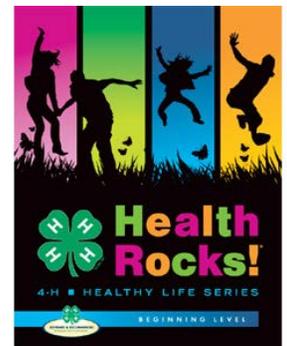
**Registration Required! It is preferred, but not mandatory to attend both days.**

Healthy snacks are included! The two days will include lessons on developing healthy habits, cooking lessons, crafts and state fair entry projects as well as outdoor activities.

**What to bring: Lunch (include a drink) dress to be active outside & crafty**

Health Rocks!® is curricula for a healthy living program targeted at young people ages 8 to 14. Teen and adult facilitators share hands-on activities that educate youth on the consequences of tobacco, alcohol and drug use. The program aims to:

- Reduce youth smoking and tobacco use.
- Help youth build life skills that lead to healthy lifestyle choices with special emphasis on youth smoking and tobacco use prevention.
- Help youth understand influences and health consequences of tobacco, drug, and alcohol use to make healthy choices.
- Engage youth and adults in partnership to develop and implement community strategies that promote healthy lifestyle choices.
- Build positive, enduring relationships with youth involved as full partners through widely varying "communities of interest" to address youth risk behaviors.



**Details: Patricia Crilley, DNG Child/Youth Program:**  
**Email: patricia.a.crilley.ctr@mail.mil Office: 302-326-7518**

**State Fair Project**





4-H  
NATIONAL  
YOUTH  
SCIENCE DAY



## Free Rocket Program for Military Youth October 7th Dover AFB

Call to register!



The **2014 National Science Experiment, *Rockets to the Rescue***, provides young scientists the opportunity to explore how aerospace engineering can be used to solve real world challenges—such as food distribution in emergency situations—to make a positive impact in our world.



HughesNet



4-H NATIONAL YOUTH SCIENCE DAY

# ROCKETS TO THE RESCUE

**Learn more and buy your kit today at [www.4-H.org/NYSD](http://www.4-H.org/NYSD).**

No need to buy a kit for OMK Oct 7th



[facebook.com/4-H](https://facebook.com/4-H)



#4H



[National4H.org](https://National4H.org)

#4HNYSD

Rhonda Martell: [delawaremilitary4h@gmail.com](mailto:delawaremilitary4h@gmail.com) or #302-730-4000

# DNG Family Program Ornament Challenge



National Guard 2014 Ornament theme is: "Communities of Resilience".



## Guidelines for entry:

The White House has provided the NG-J1 Family Program Office with an exciting opportunity again this year! They are interested in receiving one Christmas ornament from each Joint Force HQ, which represents the National Guard Families within the State. This is a wonderful project that gets the Soldiers, Airmen & Families involved. Only ONE ornament will be accepted from each state to be displayed on the National Guard tree at the White House.

In Delaware, the selected ornament will be submitted by the State Family Program office to the Joint Staff Family Program Office. Entries will be voted on by the Guard Family community as well as a local voting panel. All ornament entries will be on display at a DNG facility and online for community voting. Information on voting to follow. Voting dates Oct 21-Nov 4 2014

- Ornaments should not exceed normal Christmas ornament size (no larger than 5" X 5")
- It can be any shape you can imagine, but keep it within the size specs provided and include a HOOK or LOOP for hanging
- Don't make it so heavy that it cannot hang properly on a tree
- The ornament should represent Delaware and Delaware National Guard and Families
- Include name of your state or state abbreviation National Guard on the ornament
- This is a joint project so both DE Army and Air National Guard should be represented
- 2014 theme is: "Communities of Resilience" and must be incorporated in the ornament
- Include the name of the people which developed the ornament attached to the ornament on a tag and included in the packaging
- Submit the form, tag and ornament (packaged well) to DNG Family Program Office no later than 19 October 2014
- Take photo of ornament for your records

**Point of Contact: Patricia Crilley, Child and Youth Program Coordinator, CTR**

Submit entry to: Family Program Office, AFRC 250 Airport Road New Castle, DE 19270

Office: 302-326-7518 Cell: 302-943-0752 Email: [patricia.a.crilley.ctr@mail.mil](mailto:patricia.a.crilley.ctr@mail.mil)

**Operation: Military Kids** is the U.S. Army's collaborative effort with America's communities to support children and youth impacted by deployment. Regardless of whether Families are experiencing deployment for the first time, the second time or another in a series of multiple deployments, OMK's goal is to connect military children and youth with local resources in order to achieve a sense of community support and enhance their well-being.



**OMK Program Delivery System includes four components:**

- Academic Support, Mentoring, and Intervention Services
- Arts, Recreation, and Leisure Activities
- Life Skills, Citizenship, and Leadership Opportunities
- Sports, Fitness, and Health Options

Through OMK, Military Youth:

- Meet other youth who are also experiencing deployment
- Participate in a range of recreational, social & educational program
- Gain leadership, organizational, and technical skills by participating in the Speak Out for Military Kids program or Mobile Technology Lab program
- Attend single day, weekend or even longer residential camps

Through a network of National, State and Local Partners, **Operation: Military Kids** provides access to youth programs and support services where military children live. OMK Partners organize special events, provide transportation to military kids to sporting events or other extracurricular activities, and participate in the Hero Pack initiative.



- Army Child, Youth & School Services programs are offered through Army Garrisons, National Guard Family State Program offices or Reserve Regional commands
- 4-H National Headquarters provides information to connect military youth to 4-H programs in their hometowns
- Find the Boys & Girls Club nearest to you and participate in wide array of program opportunities such as Keystone Clubs
- Schools can help create academic, social and emotional support networks for students
- Military Child Education Coalition provides professional development opportunities on working with military populations for school personnel and community members making them aware of the stressors that can be associated with a military deployment
- The American Legion has a variety of youth program options such as the "High School Oratorical Scholarship Program" for youth of all ages
- ChildCare Aware® can assist military families with child care issues

In addition, **Operation: Military Kids**, as part of the 4-H/Army Youth Development Project, is a vital part of supporting the Army Family Covenant, the Army Community Covenant and the Army Soldier Family Action Plan.

Operation Military Kids Program Director: Rhonda Martell

For OMK programs register with Rhonda Martell and use the OMK/Delaware 4-H forms. Military Youth register as a 4-H Military Youth.

Email: [delawaremilitary4h@gmail.com](mailto:delawaremilitary4h@gmail.com) Office phone: (302) 730-4000.

## **Operation Military Kids Mallard Lodge Outdoor Adventure Overnighter for youth 8-12 years**

**From:** 10/3/2014 6:00 PM

**To:** 10/4/2014 4:00 PM

**Location:** Mallard Lodge 4876 Haypoint Landing Road Smyrna DE 19977

Join us for a pre-teen (ages 8-12) overnighter. Campers will canoe, fish, geocache, night owl watch and various other wetland activities.



## **Operation Military Kids Youth Day**

**From:** 10/19/2014 2:00 PM

**To:** 10/19/2014 4:00 PM

**Location:** UDel Paradee Center 69 Transportation Circle Dover, De

Come join us for our monthly Youth Day for ages 5-18. Enjoy Archery, Robotics (Lego and Junk Drawer), Arts & Crafts and Healthy Cooking.

## **OMK Partner DAFB Youth Center Event Harvest Festival**

**From:** 10/31/2014 6:00 PM

**To:** 10/31/2014 8:00 PM

**Location:** DAFB Youth Center 864 Center Street Dover, DE

Come join us for free food and fun. Costumes are encouraged. For all ages and branches of the military. For more information contact Roxanne Lee 302-677-6376.

## **OMK Partner DAFB Youth Center Passport to Manhood Lock In (Boys and Girls Club Curriculum)**

**From:** 11/21/2014 9:00 PM

**To:** 11/22/2014 6:00 AM

**Location:** DAFB Youth Center 864 Center Street Dover, DE

Passport to Manhood Lock In. For boys ages 9-16. Registration required and space is limited. Open to all branches of the military. For more information contact Roxanne Lee at 302-677-6376.

# **2014-2015 Military Teen Adventure Camps**

Over 1,000 military teens will have an opportunity to participate (at little to no cost) in adventure camps scheduled May 2014 through April 2015.

[https://www.extension.purdue.edu/Adventure\\_camps/campshome.html](https://www.extension.purdue.edu/Adventure_camps/campshome.html)

## **Description**

These high energy, high adventure, and high experience camps are planned across the United States from Washington to New Hampshire and from Colorado to South Carolina as well as states in between.

Each camp offers a unique outdoor experience that will allow a teen to build leadership, self-confidence, and teamwork skills while participating in activities like backpacking, river rafting, canoeing..., wilderness survival, rock climbing, GPS use, mountain biking, first aid, winter camping, dog sledding, ropes courses, camp cooking, archery, and other camp activities.

Camps for youth with special needs (mental, physical, and emotional) are also planned in New Hampshire. Opportunities to camp as a whole family are available in Kentucky and Washington.

Funding has been made available through a partnership between the Department of Defense, Office of Military Community & Family Policy and the United States Department of Agriculture/National Institute of Food & Agriculture

# DNG Family Program Ornament Challenge



## Registration Form for DNG Family Program Ornament Challenge

Service Member Name (include rank) \_\_\_\_\_

\_\_\_\_ Army Guard \_\_\_\_ Air Guard \_\_\_\_\_ Unit

Family Member Name \_\_\_\_\_

Name of person who created the ornament \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell \_\_\_\_\_ Email: \_\_\_\_\_

### Agreement of Understanding and Originality:

DNG Members and Families (including youth) are responsible for entering only original works of ornament entirely produced by the above named person that have been submitted with this form. (Please see challenge guidelines what to include.)

I, \_\_\_\_\_, the above named DNG Member and/or Family Member, hereby acknowledge and attest the following:

- The ornament for the 2014 Joint Staff Family Program Office and Delaware National Guard Family Program Office Ornament Challenge submitted with this form is my sole, original creation.
- The J1 FP Staff, DNG and DNG FP and Cognitive Professional Services are not responsible for lost and or damaged ornaments. Please package them carefully as they will be mailed to J1 FP Office.
- Ornaments submitted to and used by DNG FPO may be returned to the Service Member via the unit
- Ornaments chosen and used by NG-J1 or the White House may or may not be returned
- **Photo Release I**, \_\_\_\_\_, the participant or the parent (or legal guardian) of (Service Member Name) \_\_\_\_\_ hereby authorize the National Guard Bureau Family Program (NGB-FP) and the Delaware National Guard Family Program and the contracting agencies that provide contractors to the DNG Family and Youth Program the irrevocable and unrestricted right to use, reproduce and publish their image on the NGB-FP web site and in official printed publications, and to alter the same without restriction. I hereby release NGB-FP, DNG FP and Cognitive Professional Services (Youth Program Contract Manager) from any and all claims, actions and liability relating to its use of said photographs for an unlimited point of time unless otherwise notified in writing.

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

Participant's signature: \_\_\_\_\_

If youth is under 18 years old: Parent/guardian signature \_\_\_\_\_

Relation to student: \_\_\_\_\_

<p align="center"><b>DELAWARE NATIONAL GUARD</b> <b>"COMMUNITIES OF RESILIENCE 2014"</b> <b>SERVICE MEMBER NAME AND RANK</b> ○</p> <hr/> <p><b>PARTICIPANTS NAME</b> _____</p>
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**Point of Contact: Patricia Crilley, Child and Youth Program Coordinator, CTR**

Submit entry by 10/19/14 to: Family Program Office, AFRC 250 Airport Road New Castle, DE 19270

Office: 302-326-7518 Cell: 302-943-0752 Email: patricia.a.crilley.ctr@mail.mil

# 2014-2015 4-H Youth Development Health - Code of Conduct - Photo Form (Kent County)

**IMPORTANT – The following information must be completed for attendance!**

**SECTION I – HEALTH FORM** *Please print*

Participant's Name \_\_\_\_\_

Birth date \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_

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

Home phone \_\_\_\_\_

Parent or guardian \_\_\_\_\_

Work phone \_\_\_\_\_

Second parent or guardian \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

If not available in an emergency, notify: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Home phone \_\_\_\_\_ Work phone \_\_\_\_\_

**HEALTH INSURANCE INFORMATION**

Policyholder's name and relationship to participant: \_\_\_\_\_

Policyholder's address: \_\_\_\_\_

Insurance company's name and address: \_\_\_\_\_

If you have HMO insurance, please list emergency treatment authorization phone number: \_\_\_\_\_

Employer's name and address \_\_\_\_\_

All policy numbers (please identify): \_\_\_\_\_



**MEDICAL TREATMENT AUTHORIZATION**

Primary care physician \_\_\_\_\_

Physician's phone \_\_\_\_\_

Dentist or Ortho phone \_\_\_\_\_

Please tell us anything about your child that you feel might be helpful or necessary for us to know in order to improve his/her camping experience. (For example: stomachaches when nervous, bedwetting, sleepwalking, Tylenol works best for headaches, etc.) This will be shared confidentially with the counselor of your child.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**RECENT MEDICAL HISTORY**

Please check yes or no. If yes, explain (include another sheet if needed.)

**YES NO**

\_\_\_\_\_ Has the participant had any recent surgeries or fractures?  
\_\_\_\_\_

\_\_\_\_\_ Does the participant have any chronic health problems or illness, such as seizures, asthma, other?  
\_\_\_\_\_

\_\_\_\_\_ Does the participant presently have an acute illness?  
\_\_\_\_\_

\_\_\_\_\_ Has the participant been treated recently for any kind of medical problem?  
\_\_\_\_\_

\_\_\_\_\_ Does the participant have any allergies to medication or local anesthetics?  
\_\_\_\_\_

\_\_\_\_\_ Does the participant have contacts, glasses, orthodontic appliances?  
\_\_\_\_\_

\_\_\_\_\_ Are the immunizations up-to-date?

Date of last tetanus: \_\_\_\_\_

**List any allergies to medications and/or foods**

\_\_\_\_\_

\_\_\_\_\_

List any medications he/she is now taking for treatment of any medical problem:.

\_\_\_\_\_

\_\_\_\_\_

Activities encouraged or limited by physician: \_\_\_\_\_

Dietary restrictions: \_\_\_\_\_

**For Females:**  
 Has this person menstruated? \_\_\_\_\_ If not, has she been told about it? \_\_\_\_\_ If so, is her menstrual history normal? \_\_\_\_\_  
 Special consideration \_\_\_\_\_

*This health history is correct, to the best of my knowledge, and the person herein described has my permission to engage in all activities, except as noted.*

**Signature of parent, guardian or adult camper/staff member:** \_\_\_\_\_  
 \_\_\_\_\_ Date \_\_\_\_\_

**Authorization for Treatment:** I hereby give permission to the medical personnel, selected by the activity director, to order X-rays, routine tests, treatment, permission to release any record necessary for insurance purposes, and to provide and arrange necessary related transportation for me/my child. If I cannot be reached in the event of an emergency, I hereby give my permission to the physician selected by the camp director to secure and administer treatment, including hospitalization for the person named above. This complete form may be photocopied in the event the participant will need to leave camp.

**Signature of parent, guardian or adult camper/staff member:** \_\_\_\_\_  
 \_\_\_\_\_ Date: \_\_\_\_\_

I, as the participant, understand and agree to abide by the restrictions placed on my camp activities.

**Signature of minor or adult camper/staff member:** \_\_\_\_\_  
 \_\_\_\_\_ Date: \_\_\_\_\_

\*If for religious purposes you cannot sign this, the camp should be contacted for a legal waiver, which must be signed for attendance.

# Health — Code of Conduct — Photo Form

## SECTION I – HEALTH FORM ...continued



### PERMISSION TO MEDICATE

I understand that my child may require medication for minor medical conditions. Such conditions may include headaches, sunburn, poison ivy, bug bites, upset stomach, scrapes, cuts, and/or bee bites. I understand there will be a camp nurse to handle minor health problems and medication administration, but the camp nurse will not be able to medicate my child without permission from the parent or guardian. The following over-the-counter medications may be administered to my child, as needed, following the suggested dosage guidelines (**initial all that you give permission for the camp nurse to administer.**) Medication and/or conditions not covered by your advance permission will require a phone call to you before any medication can be given, and may cause a delay in treatment.)

- \_\_\_\_\_ Tylenol for headaches, muscle aches and pains, cramps
- \_\_\_\_\_ Advil for headaches, muscle aches and pains, cramps
- \_\_\_\_\_ Maalox, Mylanta for upset stomach, stomachache, gas, nausea
- \_\_\_\_\_ Tums for stomachache, upset stomach, nausea
- \_\_\_\_\_ Imodium for diarrhea
- \_\_\_\_\_ Pepto-Bismol for nausea, diarrhea
- \_\_\_\_\_ Milk of Magnesia for constipation
- \_\_\_\_\_ Calamine, Caladryl, Insect Bite Pen for insect bites, stings, jelly fish stings
- \_\_\_\_\_ Benadryl Lotion (topical) for insect bites, stings, poison ivy
- \_\_\_\_\_ "Green Clay" (from health food store) for poison ivy, insect bites, stings, jelly fish stings
- \_\_\_\_\_ Adolf's Meat Tenderizer (enzyme deactivates the poison) for jelly fish stings
- \_\_\_\_\_ Neosporin, Hydrogen Peroxide for scrapes and cuts
- \_\_\_\_\_ Solarcaine for sunburn
- \_\_\_\_\_ Benadryl (oral) for sinus, allergies, hay fever, rashes
- \_\_\_\_\_ Sore throat spray or lozenges
- \_\_\_\_\_ Robitussin DM

I understand any prescription medications taken by my child and/or to be dispensed to my child MUST be in the original container from the pharmacy with the original label and directions attached, or I must have a copy of the prescription from the doctor, in order to be dispensed by the camp nurse. (Failure to follow these rules will result in the parent or guardian being required to deliver these before any medications can be given.)

Signature of parent or guardian: \_\_\_\_\_

Date \_\_\_\_\_



## SECTION II—PHOTO IMAGE RELEASE

I authorize the University of Delaware to record and photograph my image and/or voice, or that of my child, for use by the University of Delaware or its assignees in research, educational, and promotional programs. I understand and agree that these audio, video, film and/or print images may be edited, duplicated, distributed, reproduced, broadcast and/or reformatted in any form and manner without payment of fees, in perpetuity.

Subject's name (adult or youth) \_\_\_\_\_

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



## SECTION III—DELAWARE 4-H CODE OF CONDUCT

1. Attend all sessions in the planned program. If you are not feeling well or have a schedule conflict that will keep you from attending, please tell the adult in charge.
2. Follow hours and room rules established before the event begins. You are responsible to know the rules for each event.
3. Use language and manners that will bring respect to you and Delaware 4-H. You are responsible to know which language and behavior is appropriate.
4. Be in the assigned program area (dorms, cabins, hotel room, etc.) at all times.
5. Know the use of tobacco, alcohol and non-prescription drugs is prohibited at all times and at all 4-H events.
6. Model respect for other persons in public areas. The adults in charge will help you know rules of courtesy that you will want to follow.
7. Treat program areas, lodging areas and transportation vehicles with respect and care. You will be responsible for any damage, theft, or misconduct in which you participate.
8. Help other members in your group have a pleasant experience by making every attempt to include all participants in activities.
9. Live up to your highest expectations of yourself, so you can return home proud of who you are and what you have accomplished.

**Those who are unable to conduct themselves within the guidelines listed above will be expected to:**

1. Explain their actions to the adults in charge;
2. Accept the consequences of their actions;
3. Know that the adults in charge will work closely with parents/guardians, Extension personnel, and others to see that action is taken, and that appropriate and logical consequences for all concerned will follow.

**I have read the Delaware 4-H Code of Conduct and agree to live up to the expectations. I realize my failure to do so could result in the loss of privileges during this event and/or in the future.**

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

As parents/guardians of \_\_\_\_\_

I have read the Delaware 4-H Code of Conduct and will support the adults in charge in the performance of their responsibilities to see that appropriate behavior is maintained.

Parent/Guardian Signature: \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

# \$250 SAT and ACT Test Prep Programs for Under \$20

eKnowledge believes every Military student should have access to higher education.



This donation was created by the founders of eKnowledge to promote and prepare young adults for higher education. eKnowledge's mission is to create opportunities for the college bound by offering access to SAT and ACT test preparation for a small set up fee of \$20 that covers online materials, shipping and access to online streaming. eKnowledge waives 100% of the retail costs for the standard version and 93% of the cost for all other programs. These programs retail for \$200 to \$600. eKnowledge sells these same materials in the open market for full retail price.

Through eKnowledge and the National Guard, these products are available to you for only the cost of materials and shipping – less than \$20.00.

Order Online Today: [www.eKnowledge.com/NationalGuard](http://www.eKnowledge.com/NationalGuard)

## 90% Discount on SAT and ACT Test Prep

The eKnowledge Military Donation Project has donated more than 206,000 SAT and ACT programs valued at over \$47 million at no profit to the company. The Donation Project is in alliance with the Department of Defense and supported by professional athletes from the NFL and MLB as well as 150 Affiliate Partners. eKnowledge has been investing in students and improving test scores while always keeping up with the changing landscape of college test preparation, including new SAT changes effective Spring 2016.

### **eKnowledge has received thousands of thank you notes from families just like yours:**

"This is an awesome opportunity that these professionals are offering my daughter. We are so thankful for their generosity and their selfless service. It makes me feel proud to serve this great country as a Soldier because professionals like these understand the meaning of sacrifice and selfless service, which make this country great. I salute every one of them and express my deepest gratitude for this opportunity. Thank you." Respectfully, Sergeant Major Nedlic US ARMY 3/17/2014

The SAT and ACT PowerPrep™ Programs are available online or on a single DVD. Programs include more than 11 hours of video instruction and 3000 files of supplemental test prep material, thousands of interactive diagnostic tools, sample questions, and practice tests Students select the training they need and study at their own pace.

SAT/ACT Test Dates 2014

<b>SAT</b>	May 3	June 7	October 11	November 8	December 6
	June 14	September 13	October 25	December 13	

Or request your program online:

[www.eKnowledge.comNationalGuard](http://www.eKnowledge.comNationalGuard)

For further information contact Lori Caputo, 951-256-4076 [LoriCaputo@eknowledge.com](mailto:LoriCaputo@eknowledge.com)

ATTN: ARMY KIDS\*

Study Strong...

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English

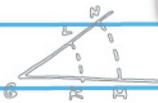
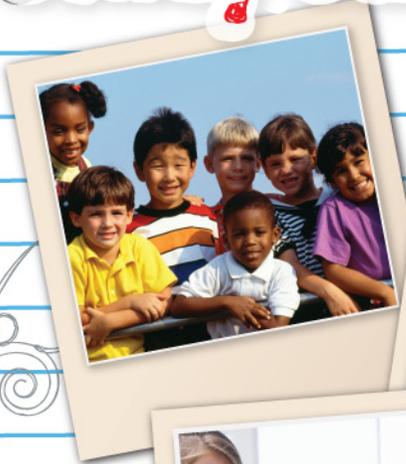
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