

2019 Family Summer Camp
Camper Packet
“Circle of Life”



Kathryn Deal, Dean
Geoff Anderla, Camping Ministries Director

July 28 – August 3, 2019
Camp de Benneville Pines
Angelus Oaks, CA



Hi Family Campers!

It's getting super close to the start of camp and I hope you're getting ready for our loving, fun and relaxing week together. Camp is whatever we, as a community, choose to make it. And, what we as individuals contribute to it. Every person at camp is valuable and helps with our common well-being.

Theme: "The Circle of Life"

During the week, we will be asking questions about what The Circle of Life might mean to us as individuals and as a collective community. The theme will be explored in morning worships with our minister, Rev. David Helfer and music director, Dan Oved. We will also have some special animal guests come to camp on Tuesday afternoon. We will focus on this theme in other workshops during the week. It is up to you to contribute your energy, skills and talents to help make this camp exciting and interesting for all our campers.

Schedule:

[Click here](https://uu.camp/2019FCSchedule) for the schedule or type <https://uu.camp/2019FCSchedule>. Geoff Anderla and I have filled it out based on last year's schedule and added in workshops that folks have said they would be interested in leading this year. A few notes:

- Our fabulous art workshops leader, Kathleen Hogue, started a new job this year and will not be able to join us. (We love you Kathleen and look forward to seeing you in years to come!) As a result, we have a few art workshops that need volunteers to lead.
- Other workshops can be added to the schedule. We need your special talents to create a dynamic camp experience for others.
- The schedule is a Google doc and you can write notes, comments and add workshops without changing the master schedule. Geoff and I will continue to morph the schedule with new workshops or activities as they develop.
- If I have assigned you to an activity or workshop that you don't want to do or in a time slot that doesn't work, please let me know this at your earliest convenience.

- Unfortunately, our masseuse is unable to come. If we find a replacement, we will let you know via email.

Needs:

- We still need emcees for our variety night and DJs for our dance party.
- DVD's for kid friendly movie night (G rated) and for family movie night (PG rated).
- Janine's ever so popular wine tasting is back. If you wish to participate, please be sure to bring a cash donation of at least \$15 with you to camp.

Please remember to bring:

- Something you would like to share with us for our variety show.
- A costume for our Animal Extravaganza banquet night. Some families REALLY get into their costumes, so give your costume(s) some thought before you come up the hill.
- Laura Fahr will be leading a bird watching workshop and suggests bringing your binoculars. We do have about 8 pairs here that can be used, if you don't have any. Binoculars are also great for star gazing in the evenings.
- White **cotton** sheets or **cotton** t-shirts for tie dye with Sharon (and re-sealable plastic bags to transport projects home safely).

A couple of last items:

- Parents, you are responsible for your own children. If you have a little one under the age of eight, you need to know where they are at all times. The buddy system is enforced for 8 to 12-year old children.
- The camp's internet has very limited bandwidth and is reserved for office use. If you must do work while you are at camp, please bring a hot spot. We do encourage "unplugging" while at camp. Tune in, instead, to make a new friend or chat with an old one.
- Personal 2-way radios are a good way to keep in touch with your children
- ***Although marijuana use is legal in California, de Benneville Pines does NOT allow the use of marijuana on camp property. Additionally, the USFS does NOT allow the use of marijuana on FEDERAL Land. Please DO NOT bring marijuana, in any form, to Family Camp.***

There is a ton of useful and important information in this Camper Packet, such as what to bring, when to arrive and how to get to camp. Please fill out your

Emergency Information and Release forms for our caring Nurse Nancy prior to arrival at camp. There are three versions of this form in this packet. Use the Family form if every member of your family is covered by the same insurance policy. Use either the Adult or Youth form (as appropriate) if members of your family have different insurance policies or providers.

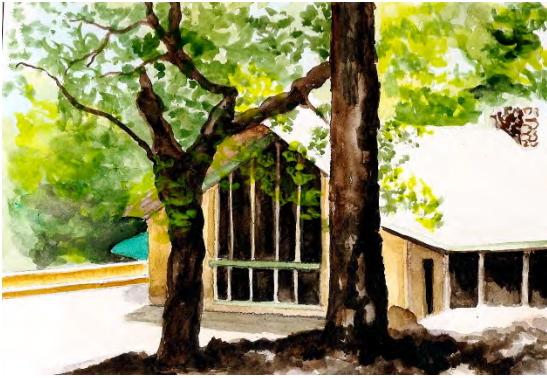
We are looking forward to seeing you up the hill!

Love,

Kathryn Deal
2019 Family Summer Camp Dean
kdeal@newroads.org
(310) 420-3273



General Information about Family Camp



Check-in will begin on Sunday, July 28, 2019 at 2 to 4:30 pm. Meet in Homet Lodge to register with our staff and get your cabin assignment. Please bring completed Emergency Information and Release forms to the check-in table.

Once your luggage is unloaded at your cabin, please park your car in the parking lot below the flag poles. Park the car facing out for a quick exit, if necessary. Keep your car keys on you at all times! Bring a clip to attach them to your belt loop. And bring 2 sets of keys! We have had lost and misplaced keys at camp, causing folks to be stuck on departure day!

Our first meal together will be Sunday dinner at 5:00 pm.

Cabins are comfortable, but rustic-enough that you feel like you're visiting the forest. Most families have their own room. All bathrooms are located down the hall from your room and have hot showers and flush toilets. Water conservation efforts are always practiced at camp. Please be flexible about shower times and mindful of water use. Report leaks and/or plumbing issues to our camp staff ASAP. Limit all showers to 5 minutes.

Meals at camp: Plenty of snacks and family-friendly meals are provided throughout the week. If you have special dietary needs, you may wish to bring food to supplement what is prepared in the camp's kitchen. Any food you bring must be kept in the Lodge, Craig's Cabin or Cabin 6, which have refrigerators. **Do not bring any food into any of the other cabins, drop food or trash on the trails or leave any food wrappers or soda cans in your car.** Food is kept in designated areas to keep the critters – including bears, raccoons and mice – out of our sleeping and playing areas. Yes, bears will look for food in your car!

Safety: At times de Benneville staff may remind us of certain safety rules. Please respect their requests, as they are assuring the safety of our entire community.

Childcare is not provided at Family Camp. Parents are responsible for their children and for knowing where they are at all times. If you need some time off during the week to attend a workshop or activity without your children, there are often opportunities to share parenting or hire youth to babysit. There will be sign-up sheets to help organize co-operative and paid babysitting arrangements. In case of an emergency, we would need you to be able to bring your children to the volleyball court in under 5 minutes.

Workshop and activity leaders are not childcare providers. During youth activities, each child between the ages of five and 12 must have an adult responsible for them at the activity. Teens may participate in activities without adult supervision provided they remain respectful of the workshop/activity leader. Teens must know where their parents are at all times and must know what to do in an emergency. No adult may be responsible for more than six children (of any age) at an activity. Please help the activity leaders by ensuring that there is at least one adult for up to every six children at the activity, not including the activity leader.





Important Information from our Camping Ministries Director

Additional bits and pieces from Camp de Benneville Pines you'll want to know – and we haven't mention yet. UU Family Summer Camp is a unique week at Camp de Benneville Pines. We are a living and breathing intentional community focused on family. As you will find, this can be both a messy and an amazing opportunity to be loving human beings together.

Staff

We have a talented all-volunteer Program Staff, and their families, creating camp with us. Our Program Staff members have worked many hours before campers arrive to thoughtfully prepare activities for families, and will continue to work throughout the week to ensure a genuine and purposeful camp experience for everyone. We are supported by the de Benneville staff led by Janet James, camp's Executive Director.

As a camp, we do our own set-up and clean up for meals and activities. The de Benneville staff prepares and serves the meals, monitors the pool, provides archery, fixes any broken-down thing, and maintains the beautiful grounds! Some of our planned programming includes yoga, day & night hikes, dancing, movie night, canoeing/kayaking, tie dye, archery, youth sleepovers, arts & crafts, and much, much more!

Technology

We observe limited use of technology at camp. This is mostly due to the Camp's extremely limited Wi-Fi access and partially due to our intention to be present with our families. Please narrow children's tech usage to your individual cabins and be mindful not to bring those electronics out into the open common areas. Many families strive to get their kids "unplugged" while at camp. Remember, there is no camp Wi-Fi access for downloading games, music or movies. You are welcome to

bring your own hot spot, but we'd prefer if everyone tried to "unplug" for the week.

Alcohol & Smoking

Some folks choose to bring beer and wine to camp. We ask you to be mindful to keep alcohol put away and to monitor the amount you imbibe. If you are a smoker, you may only smoke on the deck of your cabin. Never smoke inside any camp building, and never smoke out on the trail or in the forest. All cigarettes must be discarded in the cigarette container on your cabin deck.

Fire Drill

On Monday, there is a MANDATORY FIRE DRILL followed by our camp group photo. No camper is exempt from participating in the fire drill (even if they are napping). The alarm is loud and can be startling to young ones who don't expect it. We'll be sure to give lots of reminders and warnings ahead of time, but please talk to your children about the drill and help them anticipate what's coming.

If you have further questions or concerns, please contact me at: cmd@uucamp.org

Geoff Anderla
Camping Ministries Director



CAMP DE BENNEVILLE FAMILY CAMP BEHAVIOR POLICIES

1. All persons using the Camp facilities must comply with all federal, state and local laws.
2. Camper housing is in cabins or tents. Most families will be assigned to their own private room
3. Campers may not leave the campgrounds at any time during camp without signing out and with the supervision of adult, if appropriate.
4. The water tower, staff housing, interior kitchen, pool pump room, maintenance buildings, propane tanks, sewer plant/leach fields and any construction sites are off limits to all campers. There is no use of the First Aid Station without the supervision of the nurse.
5. No visitors are allowed during camp. This includes unannounced family members, former campers, and former staff members. Any visits must be pre-arranged and approved by the Dean and/or Camping Ministries Director. All pre-arranged visitors must check-in upon arrival and wear a VISITOR BADGE while in camp.
6. Attendance at workshops, worships and meals is expected.
7. Campers are asked to respect each other and the belongings and privacy of other campers and staff. The campgrounds and camp equipment should be used in the intended manner. NO PRANKS.
8. Dangerous or disruptive behavior of any kind will not be tolerated. This includes the use of rude and abusive language.
9. **Closed toed shoes must be worn when a camper is outdoors.** Open toed shoes are only permitted in showers and at the pool. Campers may walk to and from the pool in open toed shoes yet carry closed toe shoes with them in case of emergency evacuation, or schedule change.
10. No tree climbing or rock throwing.
11. Campers are not allowed in the kitchen.
12. No weapons or guns may be brought onto the Camp premises.
13. Camp dogs are never to leave the camp premises without permission of the Camp Director.
14. All crafts using spray paint, glitter, wax or plaster must be done outside. These projects are NOT allowed inside Camp buildings.
15. The burning of candles, lanterns or incense is NOT allowed inside any building or recreational vehicle on Camp property.
16. We DO ASSESS damage charges for graffiti and purposeful destruction of camp property.



What to Bring

Please pack the following items for each member of your family to ensure a safe and enjoyable time at camp:

- Hat with brim
- Sunglasses
- Long sturdy pants (2)
- Long-sleeved shirts (2-3)
- Shorts/skirts (3)
- Comfy pants (1)
- T-shirts/tank tops (6)
- Sweatshirt or jacket (evenings can get chilly!)
- Pajamas
- Clean underwear (8)
- Socks (6-8)
- Bathing Suit
- **Closed toed shoes suitable for hiking (2 pairs)**
- Sleeping bag or sheets and blanket
- Pillow
- Bug spray/repellant
- 2 towels—1 for swimming pool, 1 for personal use
- Dirty clothes bag
- Prescription meds (if needed) in original med bottle
- Soap, shampoo, comb and/or hairbrush
- Toothbrush and toothpaste
- **Sunscreen(at least SPF 30) and lip balm (with SPF)**
- Journal for drawing and reflections and 2-3 pens/pencils
- Flashlight/headlight and fresh batteries
- **Water bottle — refillable**
- Small-ish backpack for carrying water bottle, book, camera, journal, sunscreen, etc., around camp
- Books, jokes, skits, stories, games
- Camera and fresh batteries
- Flip flops — ONLY for use at pool!
- Variety Show items
- Costumes, silly hats, etc., Friday's banquet

Bring two (2) all white, 100% cotton items in large resealable baggie for tie-dying

Emergency Information and Release Form for Families Attending Camp de Benneville Pines

Parent (Primary Insured) at Camp _____ DOB _____

Address _____ City/State _____ Zip _____

Home Phone _____ Cell Phone _____

Email _____ Gender _____

Second Parent at Camp _____ DOB _____ Gender _____

Child Camper _____ DOB _____ Gender _____

Child Camper _____ DOB _____ Gender _____

Child Camper _____ DOB _____ Gender _____

List additional family members on reverse

Please initial each Release below and submit to camp as part of the Check-in process

Medical Release

_____(initial) I understand that if a family member or I become injured or ill while at camp, the Health Supervisor is authorized to determine if I require care outside the bounds of that available in our wilderness setting. Due to de Benneville's isolation and elevation, any camper remaining ill for more than 12 hours may be asked to leave camp, and may return only with authorization from a physician. I have been made aware that it can take 45 minutes or more for paramedics to respond to a 911 emergency call. If road conditions are icy or hazardous, it can take substantially longer. I agree to follow the safety rules of the camp.

_____(initial) I hereby give permission for the camp Health Supervisor to provide routine health care and emergency medical treatment, including ordering x-rays or routine tests for myself or family members. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes.

_____(initial) I give permission to the retreat organizers or the camp staff to arrange necessary related transportation. In the event of an emergency, I hereby give permission to the physician selected by the retreat organizers or camp staff to secure and administer treatment, including hospitalization to myself or family members.

Release of Liability

_____(initial) I waive and release all claims for damages for death, personal injury or property damage that may occur as a result of engaging in camp activities. This discharges in advance Camp de Benneville Pines, its employees and other agents from liability even though that liability may arise out of their negligence. I know that being in a forest retreat setting involves a risk of accidents, and I willingly assume the risk. This waiver, release and assumption of risk is binding on my heirs and assigns.

_____(initial) I agree to follow the safety rules of camp and assume responsibility to ensure my children also follow the rules.

Release of Contact Information

_____(initial) I understand my contact information above will be shared with Camp so they can keep me in the loop on what's happening all year long. Camp will not share any information with third-party entities, ever.

Photo Release

_____(initial) I give permission and consent for all persons associated with my registration to allow photographs/video to be taken during camp session activities. I further give permission and consent that any such photographs may be published and used by Camp de Benneville Pines and its agents to illustrate and promote the camp experience, Camp de Benneville Pines, and its camp programs. Camp will not identify Campers by name without their permission.

If family is covered by medical/hospital insurance, attach a copy of your card to this form. If you have no insurance, please provide social security numbers for each family member at camp on a separate piece of paper so care can be obtained at County Hospital.

Emergency Contact (not at camp)

Name _____ Phone #1 _____

Phone #2 _____ Email/SMS _____

Known allergies to food, medication and/or anesthetics, environmental factors. Indicate which family member and describe reactions (use other side for additional information).

Known medical problems/conditions and medical treatment that may be needed at camp (use other side for additional information).

Please list all medications (OTC & RX) that you will be taking while at camp (use other side for additional information).

Signature _____ Date _____

Camp Dates _____

Cabin _____

Family Name _____

Emergency Information and Release Form for Adults Attending Camp de Benneville Pines

Name _____ DOB _____
Address _____ City/State _____ Zip _____
Home Phone _____ Cell Phone _____
Email _____ Gender: Male _____ Female _____ Gender Neutral _____

Please initial each Release below and submit to camp as part of the Check-in process

Medical Release

_____(initial) I understand that if I become injured or ill while at camp, the Health Supervisor is authorized to determine if I require care outside the bounds of that available in our wilderness setting. Due to de Benneville's isolation and elevation, any camper remaining ill for more than 12 hours may be asked to leave camp, and may return only with authorization from a physician. I have been made aware that it can take 45 minutes or more for paramedics to respond to a 911 emergency call. If road conditions are icy or hazardous, it can take substantially longer. I agree to follow the safety rules of the camp.

_____(initial) I hereby give permission for the camp Health Supervisor to provide routine health care and emergency medical treatment, including ordering x-rays or routine tests. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes.

_____(initial) I give permission to the retreat organizers or the camp staff to arrange necessary related transportation. In the event of an emergency, I hereby give permission to the physician selected by the retreat organizers or camp staff to secure and administer treatment, including hospitalization.

Release of Liability

_____(initial) I waive and release all claims for damages for death, personal injury or property damage that may occur as a result of engaging in camp activities. This discharges in advance Camp de Benneville Pines, its employees and other agents from liability even though that liability may arise out of their negligence. I know that being in a forest retreat setting involves a risk of accidents, and I willingly assume the risk. This waiver, release and assumption of risk is binding on my heirs and assigns.

Release of Contact Information

_____(initial) I understand my contact information above will be shared with Camp so they can keep me in the loop on what's happening all year long. Camp will not share any information with third-party entities, ever.

Photo Release

_____(initial) I give permission and consent for all persons associated with my registration to allow photographs/video to be taken during camp session activities. I further give permission and consent that any such photographs may be published and used by Camp de Benneville Pines and its agents to illustrate and promote the camp experience, Camp de Benneville Pines, and its camp programs. Camp will not identify Campers by name without their permission.

Emergency Information – all information below will be shredded after camp. We do not retain medical records for adult campers.

Medical Insurance Company _____ Phone # _____

Policy # _____ Group # _____

Emergency Contact (not at camp)

Name _____ Phone #1 _____

Phone #2 _____ Email/SMS _____

My immunizations are up to date: YES NO Date of last tetanus shot _____

Known allergies to food, medication and/or anesthetics, environmental factors (use other side for additional information)

Known medical problems/conditions and medical treatment that may be needed at camp (use other side for additional information)

Please list all medications (OTC & RX) that you will be taking while at camp (use other side for additional information)

Signature _____ Date _____

Emergency Information and Release Form for Youth Attending Camp de Benneville Pines

Name _____ DOB _____ Age at camp _____

Address _____ City/State _____ Zip _____

Custodial Parent _____ Phone #1 _____

Phone #2 _____ Email/SMS _____

Gender: Male ___ Female ___ Gender Neutral ___ Will you be out of town while your child is at camp? YES / NO

Additional Parent/Guardian or Emergency Contact (required) _____

Home Phone _____ Cell Phone _____ Email _____

If not available, Notify: _____ Relationship _____

Home Phone _____ Cell Phone _____ Email _____

Please initial each Release below and submit to camp as part of the Check-in process

Medical Release

_____(initial) Parent/Guardian Authorizations: The attached health history is correct and complete as far as I know. The camper described has permission to engage in all camp activities except as noted below. I hereby give permission to the camp to provide routine health care, administer prescribed medications, and seek emergency medical treatment, including ordering x-rays or routine tests. I agree to the release of any records necessary for treatment, referral, billing or insurance purposes. I give permission to the camp to arrange necessary related transportation for my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the camp to secure and administer treatment, including hospitalization, for the child named above. This complete form may be photocopied for trips out of camp.

Release of Liability

_____(initial) I waive and release all claims for damages for death, personal injury or property damage that may occur as a result of engaging in camp activities. This discharges in advance Camp de Benneville Pines, its employees and other agents from liability even though that liability may arise out of their negligence. I know that being in a forest retreat setting involves a risk of accidents, and I willingly assume the risk. This waiver, release and assumption of risk is binding on my heirs and assigns.

Release of Contact Information

_____(initial) I understand my contact information above will be shared with Camp so they can keep me in the loop on what's happening all year long. Camp will not share any information with third-party entities, ever.

Photo Release

_____(initial) I give permission and consent for all persons associated with my registration to allow photographs/video to be taken during camp session activities. I further give permission and consent that any such photographs may be published and used by Camp de Benneville Pines and its agents to illustrate and promote the camp experience, Camp de Benneville Pines, and its camp programs. Camp will not identify Campers by name without their permission.

Emergency Information

Medical Insurance Company _____ (attach a photocopy of front and back of health insurance card to form)

Policy # _____ Group # _____

Restrictions: Red Meat Pork Dairy Products Poultry Seafood Eggs (circle all that apply) Other _____

Explain any restrictions to activity: what cannot be done, what adaptations or limitations are necessary (use other side for additional information) _____

Known allergies to food, medication and/or anesthetics, environmental factors (use other side for additional information) _____

Describe reaction and usual management of reaction (use other side for additional information) _____

Signature _____ Date _____

Camp Dates _____

Cabin _____

Camper Name _____

Medications being taken

Please list ALL medications (including over-the-counter or non-prescription drugs) taken routinely. Bring enough medication to last the entire time at camp. Keep it in the original packaging/bottle that identifies the prescribing physician (if a prescription drug), the name of the medication, the dosage and the frequency of administration.

Circle one: the camper **takes NO medications** on a routine basis the camper **takes medications** as follows:

Med #1 _____ Dosage _____ Specific times taken each day _____

Reason for taking _____

Med #2 _____ Dosage _____ Specific times taken each day _____

Reason for taking _____

Attach additional pages for more medications

General Questions (explain "yes" answers below)

Has/does the camper:

- | | |
|--|---|
| 1. Had any recent injury, illness or infectious disease? Y / N | 16. Ever had a back problem? Y / N |
| 2. Have a chronic or recurring illness/condition? Y / N | 17. Ever had problems with joints (e.g. knees, ankles)? Y / N |
| 3. Ever been hospitalized? Y / N | 18. Have an orthotic appliance being brought to camp? Y / N |
| 4. Ever had surgery? Y / N | 19. Have any skin problems (e.g. itching, rash, acne)? Y / N |
| 5. Have frequent headaches? Y / N | 20. Have diabetes? Y / N |
| 6. Ever had a head injury? Y / N | 21. Have asthma? Y / N |
| 7. Ever been knocked unconscious? Y / N | 22. Had mononucleosis in the past 12 months? Y / N |
| 8. Wear glasses, contacts or protective eyewear? Y / N | 23. Had problems with diarrhea/constipation? Y / N |
| 9. Ever had frequent ear infections? Y / N | 24. Have problems with sleepwalking? Y / N |
| 10. Ever passed out during or after exercise? Y / N | 25. If female, have an abnormal menstrual history? Y / N |
| 11. Ever been dizzy during or after exercise? Y / N | 26. Have a history of bed-wetting? Y / N |
| 12. Ever had seizures? Y / N | 27. Ever had an eating disorder? Y / N |
| 13. Ever had chest pain during or after exercise? Y / N | 28. Ever had emotional difficulties for which professional help was sought? Y / N |
| 14. Ever had high blood pressure? Y / N | 29. Waived or missed any scheduled immunizations? Y / N |
| 15. Ever been diagnosed with a heart murmur? Y / N | |

Please explain any "yes" answers, noting the number of the questions: _____

Name of family physician _____ Phone _____

Name of family dentist/orthodontist _____ Phone _____

Use this space to provide any additional information you believe the camp staff should be aware of regarding the campers behavior and physical, emotional, or mental health: _____

Authorization to Treat During Transportation/Carpooling to Camp

Permission Form:

My child/ward has permission to travel to and from Camp de Benneville Pines near Angelus Oaks, California. I understand that the camp is not responsible for the safety of my child until my child has been properly checked in at the time of registration. Furthermore, once my child checks out of camp on the final day, the camp is no longer responsible for the safety of my child. Unless otherwise contacted by me, my child has permission to carpool to and from camp with the following adults (**please include names of all adults permitted to pick your child up from camp, including parents**):

Name _____ Hm Phone _____ Cell Phone _____

Name _____ Hm Phone _____ Cell Phone _____

Name _____ Hm Phone _____ Cell Phone _____

Name _____ Hm Phone _____ Cell Phone _____

Emergency Authorization to Treat:

I hereby give permission to the medical personnel selected by my child/ward's driver to order x-rays, routine tests and treatment for my child/ward; and in the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the driver of my child/ward to hospitalize, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for my child/ward named above. This form may be photocopied. I recognize that neither de Benneville Pines, Inc., nor the Pacific Southwest District of the Unitarian Universalist Association is responsible for persons car pooling to or from camp.

Signature of parent/guardian _____ Date _____

During the times my child will be transported to and from camp, you should be able to reach me:

To Camp - Phone _____ Alternate Phone _____

From Camp - Phone _____ Alternate Phone _____



If you need to reach camp, here's some handy information:

Janet James, Executive Director:

Cell phone: (909) 435-6298 Email: director@uucamp.org

Geoff Anderla, Camping Ministries Director:

Cell phone: (623) 252-5619 Email: cmd@uucamp.org

Laura Chamberlin, Registrar:

Voice Mail: (909) 794-2928 Email: registrar@uucamp.org

Kathryn Deal, Dean

Cell phone: (310) 420-3273 Email: kdeal@newroads.org

Camp Office: (909) 794-2928

Email: director@uucamp.org

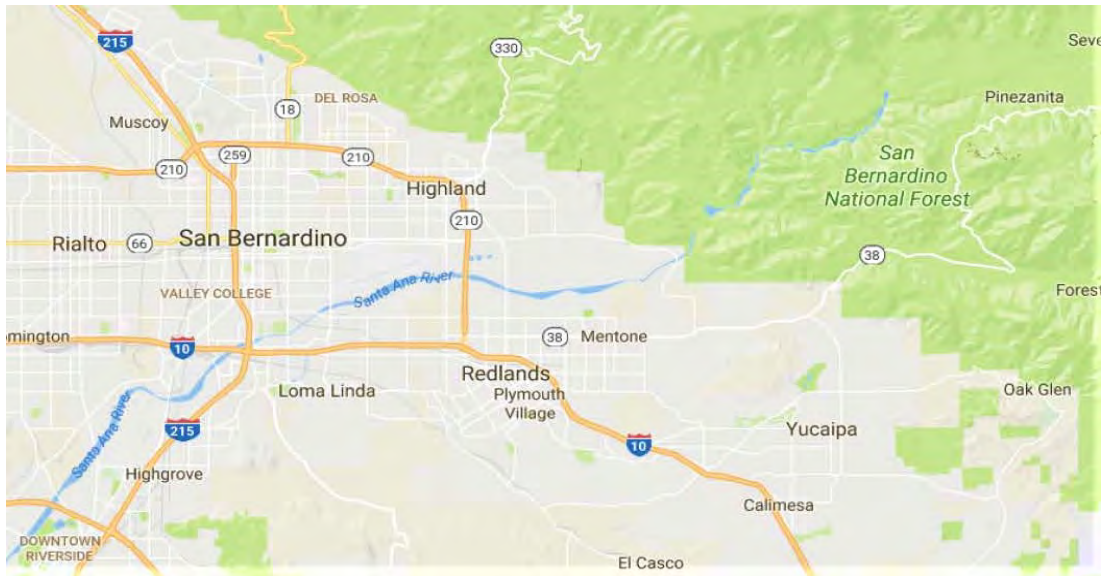
Camp Lodge: (909) 794-8712 Camp

Camp Website: www.uucamp.org

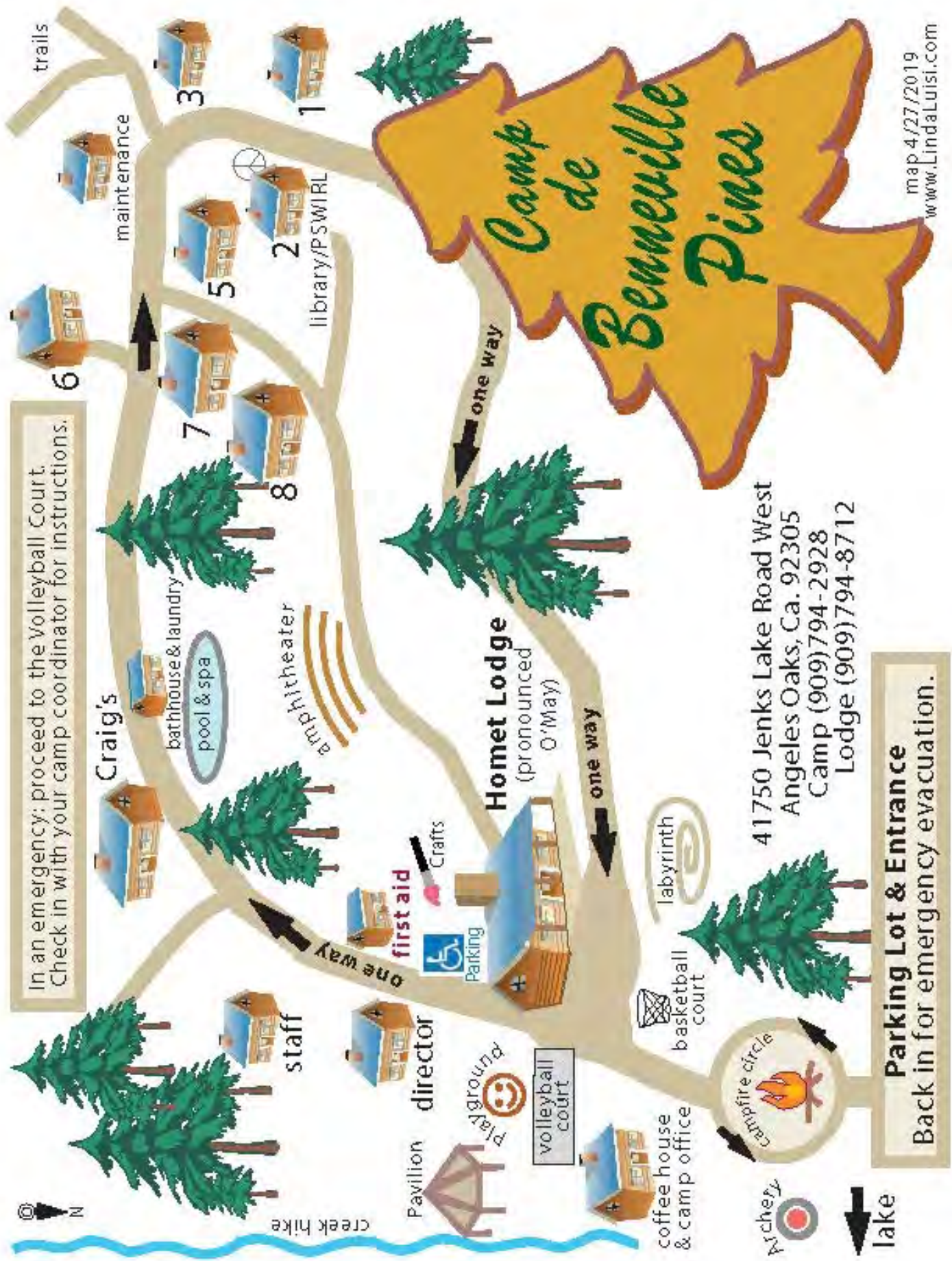
Camp Address: 41750 Jenks Lake Road West, Angelus Oaks, CA 92305

Directions on website: <http://www.uucamp.org/about-2/directions-to-camp/>

DIRECTIONS to Camp de Benneville Pines



- Arizona:** Take the I-10 West to Exit 85 - Oak Glen/Live Oak Canyon Rd. Turn right on to Oak Glen Rd. Follow the road across Yucaipa Blvd and continue to Bryant St., turn left and go to Hwy 38. Turn right. Follow the directions in **BOLD below** from Hwy 38.
- Orange Co:** Take the 91 Freeway toward Riverside until it become the I-215 East toward San Bernardino. Take the I-10 East to Redlands. Follow the directions in **BOLD below** from Redlands.
- Las Vegas:** Take the I-15 South to San Bernardino. Take the 210 East to Redlands. Exit at San Bernardino Ave. Go through the light to the next street, Lugonia/Hwy 38. Turn left and follow the directions in **BOLD below** from Hwy 38.
- San Fernando Valley:** Take the 101 East to the 134 East to the 210 East. In Redlands, exit at San Bernardino Ave. Go through the light to the next street, Lugonia/Hwy 38. Turn left and follow the directions in **BOLD below** from Hwy 38.
- San Diego:** Take the I-15 North to the I-215 East toward San Bernardino. In Moreno Valley, take the 60 East to the Redlands Blvd exit. Turn left and go North on Redlands Blvd until it dead ends at San Timoteo Canyon Rd. Turn left and continue approximately 1 mile to Live Oak Canyon Rd. Turn right and continue over the 10 Fwy, where the name changes to Oak Glen Rd. Continue through Yucaipa to Bryant St. Turn left and follow the directions in **BOLD below** from Hwy 38.
- Ventura:** Get on US-101 and exit onto I-210 East. Continue on I-210 and exit at Live Oak Canyon Road. Turn left, follow the road across Yucaipa Blvd and continue to Bryant St., turn left and go to Hwy 38. Turn right. Follow the directions in **BOLD below** from Hwy 38.
- Redlands:** From I-10, take University exit. Turn left on University. Turn right on Lugonia/Hwy 38. Follow the directions in **BOLD below** from Hwy 38.
- From Hwy 38:** Follow Hwy 38 toward Big Bear, up into the mountains. At the road to Forest Falls, bear to the left, continuing on HWY 38. At the top of the mountain, pass through the town of Angelus Oaks and continue another 5.5 miles. Turn right on to Jenks Lake Road, West. The sign for Camp de Benneville Pines will be on the right, approximately 1.5 miles up. (If you see the sign for Seven Oaks on Hwy 38, you have missed the Jenks Lake turn. Go back to Jenks Lake Road, West.



In an emergency; proceed to the volleyball Court.
Check in with your camp coordinator for instructions.

Parking Lot & Entrance
Back in for emergency evacuation.

41750 Jenks Lake Road West
Angeles Oaks, Ca. 92305
Camp (909)794-2928
Lodge (909)794-8712

map 4/27/2019
www.LindaLuigi.com