



Young Adult Interpreter's APPLICATION

To register, fill out this form and email it to lsff@lincolnlogcabin.org or mail with payment to: Lincoln Log Cabin State Historic Site, Attn: Pioneer Camp, 402 S. Lincoln Highway Road, Lerna, IL 62440

Youth Information

Youth Name: _____

Youth Address: _____

Youth Birthdate (Mo/Day/Yr) : _____ Age: _____

Youth Phone: Home: _____ Cell: _____

Preferred Email: _____

Parent/Guardian

Name: _____ Phone: H: _____ C: _____

Name: _____ Phone: H: _____ C: _____

Please list your areas of interest

For example: quilting, leatherwork, hearth cooking, basket-weaving, etc.

(To be completed by Lincoln Log Cabin Staff):

Clothing

Date Loaned: _____ Date Returned: _____

RULES FOR PARTICIPATION

1. This program is designed for youth who wish to participate in the everyday experiences on an 1845 farm. You will be an interpreter, and as such must treat all visitors courteously and politely. Remember you will be living in 1845 so do not discuss anything from this century and avoid bringing soft drinks, gum, modern toys, etc.
2. Part of being an interpreter is doing the work you are asked to do. If you have a problem or a question, talk to one of the adult volunteers or staff members. The adults will help you, but they won't do your job for you. All youth must be cooperative and helpful to participate in the program. Children who are not helpful and willing to contribute will be sent home.
3. Youth must be responsible for their actions while on the farm and for scheduling time on the farm. Inappropriate behavior will not be tolerated and will result in being sent home. The Youth Coordinator will contact your parents and you will only be allowed to return with the understanding that your behavior will be improved. If problems persist the youth will be sent home again with no option of returning.
4. The **Young Adult Interpreter's Program** runs from 9:30 am to 4:30 pm Wednesday through Friday. Children must be with their parent/guardian at all times until greeted by a summer program staff member. Youth should be picked up in the basement of the Visitor Center, as it is distracting for them to have family members talking to them when they are in character. Throughout the year the site hosts special events on weekends. Youth will be asked to participate in these as well.
5. Youth must stay in the historic area at all times unless they have permission to leave to use the restroom, take a break, etc. The hayloft, creek, and fishing pond are off limits except with permission, or when accompanied by an adult.
6. Safety precautions must be observed when handling knives, tools, fires, and cooking utensils. Be especially aware of other children, particularly younger ones, who may be nearby. Return all tools and knives to their proper place immediately after use. Remember that you may not bring knives from home, and an adult must be present whenever you use one.
7. Please let us know if you will not be attending our programs on the day(s) you are scheduled. You can call the site (217-345-1845) and leave a message.

I have read and agreed to the Rules for Participation.

Youth signature _____ Date _____

Parent Signature _____ Date _____

SAFETY ON THE FARMS

Fires

Fires will be located outside in the fire pit and inside the cabin in the kitchen. Girls must be very careful with their dresses around the fires. Watch out for gusts of wind that may blow skirts into the fire. Extreme care must be taken when digging coals out of the fire in order to cook food. Girls should ALWAYS tuck their skirts between their legs whenever near the fire to prevent their skirts from blowing into the fire. Also, place lids with hot coals on the hearth (inside) or on a rock near the fire pit (outside), NOT in the grass outside.

Kitchen Implements

Girls will be working in the kitchens with sharp knives, pokers (forks), as well as working with heavy bake ware. These may hurt if dropped on your feet and also get very hot when put next to the fire. Remember: a hot lid looks like a cool lid. Always use a pot holder to carry ovens and lids while they are being used or after being used on the farm.

Animals

Everyone may think animals are cute and nice, but remember, these “critters” are for farming, not for petting.

Hogs:

Unless asked to do so by an adult, do not get in the pen with the hogs for any reason. Do not try to pet the hogs.

Sheep:

Although sheep are generally harmless there are several things to remember around them. First, that their hooves are sharp and they weigh enough that it often hurts if they step on you. Unless asked to do so by an adult, do not get in the pasture/pen with the sheep.

Chickens:

These animals are harmless, but please be respectful of them as well. They sometimes hiss and peck if you are trying to move them to get eggs, and their beaks are sharp. They are kept for their eggs and butchering. Do not chase the chickens!

Cow:

Our cow is docile, but she is large and heavy! Unless asked to do so by an adult, do not get in the pasture with the cow.

YOU MAY BE ASKED TO HELP FEED OR CARE FOR THE ANIMALS. IF SO, LISTEN TO INSTRUCTIONS AND DO AS YOU ARE TOLD.

Tools

Boys will be working with axes, saws, sledge hammers and wedges, pitchforks, and various other dangerous tools. It is very easy to injure yourself or someone else. Be very careful and always listen for instructions. You will only be allowed to work with these tools with supervision.

The most important rule to remember when it comes to farm safety is: **LISTEN**

I have read the instructions for Safety on the Farms and promise to follow the safety rules

Participant signature

Date

MEDICAL AUTHORIZATION AND WAIVER

Dear Parent of Youth Volunteer and/or Pioneer Camper:

We take every precaution to ensure your child's safety while at Lincoln Log Cabin State Historic Site. Occasionally, people get hurt. We strongly advise that you have individual health insurance. In case of sickness or accident, you MUST fill out the following as a precaution.

Parent/Guardian _____ Phone _____

Address _____

City _____ State _____ Zip _____

Youth Birthday _____

Employer Address	Phone	E-Mail
Father's _____		
Mother's _____		

Emergency Contact Name: _____

Emergency Contact Number: _____

Insurance Information

Company _____

Address _____

Policy Number _____ Group Number _____

Doctor Name: _____

Doctor Phone Number: _____

Medical Information

Current Medication _____

Reason for taking medication _____

Circle any Allergies: Hay Fever Poison Ivy Insect Sting Penicillin

Other: _____

Does your child have seizures? YES NO Date of last occurrence _____

Other health information or conditions _____

Year of last tetanus shot _____

I give Lincoln Log Cabin State Historic Site permission to administer the following over-the-counter medications, if needed, or the child's prescription medication, if the child brings the medicine on the first day in the original bottle marked with the child's name, dosage schedule, and amount.

____Acetaminophen ____Ibuprofen ____Antacids

____Benadryl ____Other (name: _____)

Child to follow Community and Safety Guidelines

My signature below acknowledges that I understand my child will be expected to follow the Lincoln Log Cabin Rules For Participation and Safety On The Farms Guidelines. If my child repeatedly refuses to follow these guidelines, I understand my child will be dismissed from the program and I will be asked to pick him/her up. I realize any disciplined Summer Youth Volunteer or Pioneer Camper who is sent home at any time will forfeit their Summer Youth or Pioneer Camp fees.

Use of Likeness

I also give my permission for Lincoln Log Cabin State Historic Site to use any photographs or videos taken of my child for promotional purposes, and to post these photos/videos to social media and/or affiliated websites.

Emergency Medical Authorization

The medical information provided on this form regarding my child is correct to the best of my knowledge. I have read the Youth Volunteer Rules of Participation and give my permission for my child to engage in all learning and recreational activities at Lincoln Log Cabin. I certify that my child is able to participate in those activities and that all medical conditions or allergies of my child which may limit my child's participation in activities are listed above. IN THE EVENT I CANNOT BE REACHED IN CASE OF EMERGENCY, I HEREBY AUTHORIZE LINCOLN LOG CABIN STATE HISTORIC SITE; IT'S OFFICERS, DIRECTORS, EMPLOYEES OR DESIGNATED PERSONNEL TO GIVE MEDICAL ASSISTANCE TO MY CHILD. I ACCEPT FULL RESPONSIBILITY FOR PAYMENT OF EXPENSES INCURRED AS A RESULT OF ANY MEDICAL TREATMENT FOR MY CHILD.

In consideration for my child being allowed to be a Youth Volunteer or Pioneer Camper at Lincoln Log Cabin, I agree to hold harmless and release Lincoln Log Cabin, it's directors, officers, employees and volunteers from liability for any fault, mistake, negligence, or omission causing damage, loss, injury, or death to me or my child (hereinafter referred to jointly as Damage) arising from my child's attendance at Lincoln Log Cabin, including any Damage arising from the provision of emergency medical treatment.

Signed _____ Date _____
Parent or Guardian's Signature

Signed _____ Date _____
Youth Volunteer