

# EMERGENCY MANUAL



<https://sequoiaheightscamp.org/>

May 2018

45334 Poso Park Drive  
Posey, Ca 93260  
(661) 536-8747

Camp and Conference Grounds operated by the  
Pentecostal Church of God District Office  
610 Pico, Clovis, Ca 93612  
(559) 292-1214

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## **SEQUOIA HEIGHTS PHONE DIRECTORY**

Office

(661) 536-8747

Central California District PCG Office  
Robbie Culver Office Administrator

(559) 292-1214  
(559) 816-6001

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# GENERAL EMERGENCY PROCEDURES

## FIRE PLAN: *(See Page 8)*

1. Execute Fire Plan.
2. Call: Poso Flat Fire Station (661) 536-8557 or 911
3. Report: Fire  
Location  
Services Needed (Ambulance, Helicopter, Doctor, etc.)
4. Notify: Camp Director  
Camp Caretaker

## VANDALISM OR INTRUDERS:

1. Call: 911
2. Notify: Camp Director  
Camp Caretaker

## ACCIDENTS:

1. Execute Accident/Injury Plan *(See page 7)*
2. Notify: Head Chaperone who will notify Camp Director
3. Notify: Camp Nurse who will notify parents if necessary.
4. Sequoia Staff will transport to San Joaquin Community Hospital, 2615 Chester Ave, Bakersfield, 661-395-3000, or Bakersfield Memorial Hospital, 420 24<sup>th</sup> Street, Bakersfield, 661-327-4647, with insurance forms and medical release.

## FOOD POISONING OR EPIDEMIC:

1. Execute Food Poisoning/Epidemic Plan *(See Page 12)*
2. Notify: Head Chaperone, Camp Director, and Camp Nurse.
3. Camp Director and Camp Nurse will:
  - a. Notify pastors or leaders of visiting churches and/or groups who notify parents.
  - b. Make arrangements for transportation home if necessary.

#### POWER FAILER:

1. Notify: Maintenance person.
2. Notify: Head Chaperone, who will notify Camp Director
3. Check switch boxes (*see map*)
4. Call: Southern California Edison Company, 1-800-655-4555. You will need to give the operator the meter number for the affected area without power.
  - Kitchen and Dining Hall: TP705-5574
  - Office, and other areas above the Dining Hall: TP81-2822
  - Meadow: 7-181830
  - Maintenance Shop: 8-723853
  - Hilltop: 8-439079
  - Woods: 308-289436
  - Sequoia Apartment: 208-167075
  - Ranch House: 8-903571

#### TELEPHONE FAILURE:

1. If phone is out for more than four hours, Contact Central California District, Pentecostal Church of God, (559) 292-1214.

#### ANIMAL BITES:

1. Follow Animal Bite Procedures (*See page 12*)
2. Notify: Tulare County Animal Control, 559-636-3647
3. Notify: Head Chaperone and Camp Nurse who notify the Camp Director.

#### EARTHQUAKE:

1. Execute Earthquake Plan (*See Pages 13-18*)
2. Call: Poso Flat Fire Station 661-536-8557 or 911
3. Notify: Head Chaperone, Camp Nurse, and Camp Director who notify the pastors and leaders of visiting churches and/or groups.

# **GENERAL SAFETY REGULATIONS**

At the Sequoia Heights Camps and Conference Grounds in the Sierra, there are several natural and man-made hazards. Paths, steps, and the yard area in camp are often uneven, wet, or slippery. Students are warned of these potential hazards upon their arrival and are told not to run in or around camp.

## **ON THE TRAIL, STUDENTS WILL:**

1. Throw nothing
2. Stay with the group
3. Stay behind their leaders/chaperones
4. Walk
5. Stay on the trail
6. Follow the leaders/chaperones instructions

## **STAFF RESPONSIBILITIES**

### **MAINTENANCE:**

1. Will check each sleeping cabin on Monday morning to ensure that the smoke alarms and fire extinguishers are in working order.
2. Know emergency plans, keep updated on power and water systems on campus.

### **CAMP CARETAKER AND/OR CAMP DIRECTOR:**

1. Keep staff up-to-date with emergency procedures
2. Update and/or revise this manual as necessary
3. Replace and stock first aid and emergency supplies, as needed.
4. Conduct and document monthly safety meetings with all staff.
5. Conduct annual emergency drill for all staff
6. Will read and maintain a working knowledge of the Sequoia Heights Emergency Manual.

### **CHAPERONES/ GROUP LEADERS:**

1. Be aware of any medical problems that students in your groups may have.
2. Will not attempt to carry an injured student. If a student is unable to walk, send someone (another chaperone, teacher, or two responsible students) to call camp or go to camp and get transportation or a stretcher for the student.
3. Will carry a first aid kit at all times.
4. Will record all first aid treatments, injuries, or any dispensing of medication in the medical log, located in the Nurse's Station.

5. Keep the students, chaperones, and teachers safe, healthy, and happy.
6. Notify the Head Chaperone and Camp Director of any unsafe or hazardous conditions in camp.
7. Will warn students on their particular walks of any hazardous conditions such as: wetlands (stinging nettle, yellow jackets), forest (steep trails, yellow jackets), Riparian (steep trails, yellow jackets).
8. Will not jeopardize the health, safety, or well-being of any student, leader, chaperone, or teacher.
9. Will read and maintain a working knowledge of the Sequoia Heights Emergency Manual.

HEAD KITCHEN STAFF:

1. Will maintain Health Department standards in the preparation of food and cleanliness of the kitchen, pantry, and other food service areas.
2. Will read and maintain a working knowledge of the Sequoia Heights Emergency Manual.

# LOG CROSSING PROTOCOL

In the interest of student safety and minimizing our liability, we are establishing a more specific protocol for crossing logs with students:

## WHEN IS IT SAFE TO CROSS A LOG?

When deciding whether or not to cross a log, the group leader or chaperone must always consider the possibility that a student will fall. Therefore, a safe log would be one from which a student would most likely would fall with no injuries. (Of course, it is possible that a student might step down six inches and break their ankle, but not likely.)

1. Consider the distance between the top of the log and the ground (i.e., the distance a student would fall). A log that is higher than 304 feet is probably not safe to cross.
2. Consider the terrain beneath the log that a student may fall onto. If there are jagged rocks or a rushing river, that log is probably not safe to cross even if it is only one foot off the ground.
3. Make sure there are places for the group leader or chaperone to stand and spot students as they cross if necessary.
4. Avoid crossing logs that are wet, slick (due to lack of bark), and or have loose bark that may come off in chunks as students are crossing.
5. Always remember that student shoes often have little to no tread.

## CROSSING PROCEDURE:

1. Before students cross, the group leader or chaperone should demonstrate the safest way to cross that log (i.e., walking or scooting) and point out particular hazards of that log (i.e., branches sticking up).
2. The group leader or chaperone should “spot” students as they cross logs that are resting above the ground. “Spotting” means standing below each student as they cross, such that if they fall, you would be able to help stabilize them and/or help break the fall.
3. If students are afraid to cross a log, you may encourage them. However, ultimately do not force a student to cross.



# **SAFETY INSTRUCTIONS IN THE USE OF HAND AND POWER TOOLS**

Sequoia Heights has a large quantity of tools and equipment. Students will not use any tools with the exception of a rake or shovel. Staff will not use any tools or equipment if they have not been properly trained in their safe use.

## **SHOVELS/RAKES:**

1. Will Not be used by students unless an adult is present.
2. Students will first be shown how to use, carry, and properly store the rake or shovel before using it.
3. Shovels/rakes may never be carried over the shoulder.
4. A shovel or rake must be stored in a position that will not cause injury when not in use.

## MAJOR ACCIDENTS AND INJURIES

Accidents may occur, in spite of preventative measures, on a camp ground site. Accidents can be reduced if emphasis is placed on safety precautions. All Sequoia Heights staff will continually work with the visiting students, chaperones, and teachers to enforce safety standards and demonstrate correct procedures.

### STUDENT ACCIDENT OR INJURY:

1. Provide immediate first aid and record it in the Medical Log.
2. Inform the Head Chaperone and the Camp Nurse. He/she will inform the Camp Director who will then notify the student's parents, if necessary.
3. If necessary, transport the student to San Joaquin Community Hospital, 2615 Chester Ave, Bakersfield, 661-395-3000, or Bakersfield Memorial Hospital, 420 24<sup>th</sup> Street, Bakersfield, 661-327-4647, with insurance forms and medical release.
  - a. Student Registration Form (*Page 11*).
  - b. Student Medication Form (*Page 12*).

All of these forms are not to be left at the hospital, but brought back to Sequoia Heights Camp Grounds. The "Notification of Injury"

4. All trips to the hospital will be reported to the Head Chaperone and Camp Nurse who will notify the Camp Director.

### Chaperone, Volunteer, OR CLASSROOM TEACHER ACCIDENT OR INJURY:

Follow same procedure as with a student.

**CENTRAL CALIFORNIA DISTRICT, 610 PICO, CLOVIS, CA 93612**  
**SEQUOIA HEIGHTS CAMPS AND CONFERENCE GROUNDS STUDENT REGISTRATION FORM**

Date at Grounds from \_\_\_\_\_ to \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Name of Parent or Guardian \_\_\_\_\_  
Business Address \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
School/Church and Group Leader \_\_\_\_\_  
Contact Phone: (\_\_\_\_) \_\_\_\_\_

NOTE: Registration of your child constitutes permission for the child to participate in all activities undertaken on Sequoia Heights Camps and Conference Grounds.

**HEALTH INFORMATION NECESSARY:**

1. Do you know of any health factor that would limit outdoor activity?
  - a. Recent surgery or illness? (Please Specify) \_\_\_\_\_
  - b. Recent broken bones, sprains, etc.? \_\_\_\_\_
  - c. Asthma, heart condition? \_\_\_\_\_
  - d. Other physical limitations? \_\_\_\_\_SPECIFIC LIMITATIONS ON ABOVE CONDITIONS \_\_\_\_\_

2. Name, Address of physician \_\_\_\_\_

3. Has your child been exposed to a communicable disease within the past twenty-one days? \_\_\_\_  
If yes, what disease? \_\_\_\_\_ Date exposed \_\_\_\_\_

4. In order to protect children from possible embarrassment, the following information is necessary:  
(Be specific)
- a. Does your child walk in his/her sleep? \_\_\_\_\_
  - b. Does your child wet the bed at night? \_\_\_\_\_
  - c. Are there other factors that may affect the care of your child? \_\_\_\_\_
- Comments \_\_\_\_\_

5. If you cannot be located in case of an accident, who should be called?  
Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

6. Has your child had his/her tetanus series or booster? \_\_\_\_\_ If yes, what date? \_\_\_\_\_

7. Is your child covered by Medical? If yes, card number: \_\_\_\_\_ (attach copy)  
Medical Insurance? If yes, company's name \_\_\_\_\_  
Policy Number \_\_\_\_\_ (attach copy of card)

8. Are there allergic reactions to any medicines in case of emergency? \_\_\_\_ If yes, what type? \_\_\_\_  
\_\_\_\_\_

9. Other allergies: Food \_\_\_\_\_ Insect \_\_\_\_\_ Other \_\_\_\_\_

If a serious emergency should arise, it might be necessary for a physician to attend to your child before staff could get in touch with you. Such care can be provided only if you sign the following AUTHORIZATION FOR MEDICAL TREATMENT. The statements below must be signed before your child can be accepted onto the Sequoia Heights Camp Grounds.

AUTHORIZATION FOR TETANUS SHOT OR BOOSTER. I hereby give my permission for the Sequoia Heights Staff to authorize tetanus shot or booster if seemed advisable by a physician at the appropriate medical facility.

AUTHORIZATION FOR MEDICAL TREATMENT. I hereby authorize the Sequoia Heights Staff to provide medical or surgical care, through the facilities of an appropriate medical facility for (name of student) \_\_\_\_\_

in any emergency which may occur while he/she is in attendance at the Sequoia Heights Camp Grounds and I further authorize release of such medical information pertaining to the student as the treating physician or medical facility may require.

**OFFICE OF PENTECOSTAL CHURCH OF GOD**

**CENTRAL CALIFORNIA DISTRICT, 610 PICO, CLOVIS, CA 93612**  
**STUDENT MEDICATION TO BE ADMINISTERED AT SEQUOIA HEIGHTS**

**Name of Student** \_\_\_\_\_

The health and well-being of the above named student is dependent upon the administration of medicine during the Sequoia Heights visit by its Head Nurse as follows:

**Name of Medicine** \_\_\_\_\_

**Description of Medicine** \_\_\_\_\_  
(give color and form, such as liquid, capsules, etc.)

**Strength** \_\_\_\_\_ **Dosage** \_\_\_\_\_  
(mg/per tablet, capsule, tsp., etc.) (number of tablets, capsules, tsp., etc.)

**Frequency of dosage** \_\_\_\_\_  
(time frequency, relationship to meals, etc.)

**Daily or as needed?** \_\_\_\_\_

**If as needed, under what conditions?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Additional Instructions and/or comments** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

We agree to mutual sharing of information by our doctor and the Sequoia Heights Staff about our child's needs for the medication.

We agree to hold the District Organization, the Sequoia Heights Camp Grounds, the Pentecostal Church of God, or any of its District Board or its representative faultless for any untoward reactions resulting from the administration of the medication which may occur to our child.

We also agree to immediately notify in writing our child's group leader of any change in medicine, dosage, and frequency recommended by the doctor.

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

\_\_\_\_\_  
Print name of parent or guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Print name of Physician

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

**ALARM PROCED**

After arrival, each student will be shown the fire bell located in the center of the Sierra Heights campus. Students will be instructed by staff to go to the amphitheatre if they hear the bell ring continuously. They are also told that continuous short blasts on the whistles or continuous short blasts on an air horn mean an emergency and that they must assemble at the amphitheatre. Within 24 hours of arrival, there will be a fire drill on the campus.

Smoke alarms and fire extinguishers will be checked and tested each week before the student move into the cabins by the maintenance staff. Faulty smoke alarms or fire extinguishers will be fixed or replaced before the students move into the cabins.

## **FIRE PLAN**

### **FIRE OFF CAMPUS:**

1. A staff member will continuously ring the fire bell to summon the trail groups back to camp.
2. When available, another staff member will call the local CDF station at 661-536-8557 and then call the Camp Director.
3. Group leaders/ Head Chaperones will bring their groups to the amphitheatre in camp and students will assemble with their chaperones and cabin groups.
4. If a trail group does not respond to the alarm because they are out of hearing range, a staff member will go find them.
5. A staff member will take roll by checking with each cabin counselor to make sure all students are accounted for.
6. Students and staff will wait for further instruction from CDF to determine if evacuation is necessary, and if so, use information provided to determine evacuation route and procedures.

### **FIRE IN CAMP:**

1. If safe to do so, a staff member will continuously ring the fire bell to summon all groups back to the main campus.
2. When available, another staff member will call the CDF at 661-536-8557 and then call the Camp Director.
3. If it is unsafe to assemble at the amphitheatre, chaperones and group leaders will take their groups to the dam at the lake.
4. On-site staff will turn off all valves and electrical fuse boxes, if safe to do so.  
(See map page 28-33)
5. A staff member will take roll by checking with each cabin chaperone or group leader.
6. After the students are safe, notify the Camp Director to arrange transportation home for the students.

## **SEARCH AND RESCUE PROCEDURES**

### **PERSON LOST, MISSING, OR RUNAWAY:**

When a student is thought to be missing, the staff member in charge will first check with that student's chaperone or group leader to determine if the student could be missing. If the student's whereabouts is not known, all the students will be assembled at the amphitheatre to determine if the student is truly missing. The chaperones will supervise the students while the staff conducts a complete search of all buildings and areas around the site. If the student is not found after one hour, the staff member in charge will call the sheriff at 559-733-6218 and notify the Camp Director.

### **LOST PERSON OR WALK GROUP:**

All students will be instructed in the basic safety rules and regulations regarding walks on trails. If a student becomes lost on a trail, the chaperone or group leader will make a search of the immediate area while the students stay with the other chaperones or group leaders. If the student is not located, the chaperone or group leader will notify the Head Chaperone who will notify the Camp Director and call the sheriff at 559-733-6218 for assistance.

If a walk group does not return as scheduled and there is reason to believe that something has happened, a staff member will trace the walk group's route in order to locate them. If this is unsuccessful, call the sheriff at 559-733-6218 and notify the Camp Director.

## **FOOD POISONING OR EPIDEMIC**

The food service is an essential part of the Sierra Heights program and one of the most important factors contributing to the health and well-being of students and staff. It is necessary that the Camp Caretaker and Head Cook keep informed of all health regulations established by the Tulare County Health Department and the Pentecostal Church of God Central California District Office.

In the event that an epidemic does break out in the camp, or that many students and staff become ill, the following procedures will be followed by the Sierra Heights staff:

1. Notify: Head Chaperone and Camp Director and Head Nurse
2. Head Chaperone and Camp Director will:
  - a. Notify group leaders of visiting schools or churches who will notify parents.
  - b. Make arrangements for transportation home if necessary.
3. Contact the Tulare County Health Department at (559) 624-8480.
4. Record the names and home phone numbers, symptoms, or illness, temperatures, and all food consumed by each ill person

If the food poisoning or epidemic is extremely serious, the camp will be closed and all students and staff will be sent home.



## **RATTLESNAKE, BEE, OR SPIDER BITE**

The only venomous snake that may occur at Sierra Heights Camps is the western rattlesnake. If a rattlesnake is encountered while on a trail, the chaperone or group leader will position him or herself between the snake and the students and move away from the snake.

The likelihood of being stung by yellow jackets in the fall is very high. The Head Chaperone or Camp Director will inform visiting schools or churches of this likelihood and will request that children with serious bee sting allergies not be permitted to visit Sierra Heights Camps unless they have a doctor's permission, an epinephrine kit, and "medical shadow" who will be able to administer the epinephrine if needed.

**IF SOMEONE IS BITTEN BY A RATTLESNAKE OR IS SHOWING ALLERGIC REACTIONS TO A SPIDER BIT OR BEE STING, THE CHAPERONE OR GROUP LEADERS WILL:**

1. Calm the victim down/treat for shock.
2. Send a chaperone or two students to campus to notify staff at the Sierra Heights office/ Nurses station of the situation with written location of the victim.
3. If the victim shows symptoms of anaphylactic shock, the chaperone will or group leader will use his or her "Emergency Ana Kit."

**THE ON-SITE STAFF WILL**

1. Notify CDF at 661-536-8557 and leave with the backboard to bring the student back to camp. Sierra Heights staff will meet Emergency Medical Services personnel with the student and his or her student registration, medical forms, insurance forms, and any medication the student may have.
2. Notify the student's group leader, who will notify the student's parents.
3. Notify the Camp Director.
4. If situation warrants, call 911 to request an ambulance.

# EARTHQUAKE PLAN

The Sierra Heights staff should be prepared for an earthquake and know the proper procedures to follow.

## PREPARDNESS BEFORE AN EARTHQUAKE:

1. Each staff member will have a flashlight and a first aid kit.
2. Each staff member will know the location of the breaker boxes and the valves controlling water and propane on the campus and how they operate (*see pages 28-33*)
3. Each staff member will know the Earthquake Emergency Plan.

## DURING AN EARTHQUAKE:

1. If students are on campus:
  - a. Assemble students at the amphitheatre.
  - b. Keep the students calm; don't let them panic.
2. If students are off campus:
  - a. Have groups sit down in an open area away from electrical lines, buildings, trees, or any other hazardous objects.
  - b. Keep students calm.

## AFTER AN EARTHQUAKE:

1. If students are on campus:
  - a. A staff member at the amphitheatre will take a roll call of cabins to determine if all students are accounted for. If students are missing, begin search.
  - b. Extinguish all open flames; shut off valves on propane tanks.
  - c. Determine who is injured and provide first aid. Call 911 for life threatening emergencies only.

- d. Determine site damage: water supply, structures, etc.
- e. Notify the Camp Director.

2. If students are off campus:

- a. Chaperones and group leaders will determine that all students are present and if any of the students need first aid.
- b. Return to campus.
- c. If entire group can't walk back to the campus, send a chaperone or two students to Sierra Heights campus to summon help.
- d. All on-site staff member will extinguish open flames and shut off propane tanks.
- e. After all students have been accounted for, the Camp Director will be notified and will determine the next course of action.

# **EARTHQUAKE ASSIGNMENTS**

## **HEAD CHAPERONES:**

1. Communication
2. Assign jobs
3. Student Welfare
4. Set up first aid station
5. Chaperones

## **HEAD NURSE:**

1. First aid

## **CHAPERONES/GROUP LEADERS:**

1. Stay with students
2. Help with search and rescue
3. Record keeping
4. Assist Sierra Heights staff as needed

## **MAINTENANCE:**

1. Check all power, propane, and water lines and shut off as necessary
2. Emergency repair of structures
3. Damage assessment
4. Transportation

## **KITCHEN STAFF:**

1. Prepare meals/snacks as needed
2. Assess food supplies/needs

## **EARTHQUAKE PROBLEMS IDENTIFIED**

1. Communication loss
2. Record keeping
3. Chain of command and duties
4. Injured/ deceased
5. Weather
6. Security
7. Nonfunctioning people in panic, shock (students, chaperones, teachers, and staff)
8. Locating people not all accounted for
9. Physical handicaps of students, chaperones, or group leaders
10. Survival

### **EARTHQUAKE (10-15 MINUTES):**

1. Fire (broken propane line)
2. Electricity (broken line, live wires)
3. Sewer system line broken
4. Water (broken water tank, electrical pump)
5. Time of day/evening
6. Landslides

### **AFTER EARTHQUAKE (24 HOURS):**

1. Food
2. Structural damage
3. Waste materials
4. Fatigue
5. Shelter
6. Intruders
7. Water consumption, pollution)
8. Hygiene
9. Equipment/vehicles (usable?)
10. Injured animals
11. Adequate supplies
12. Medications for students
13. Clothing (hypothermia)
14. Parents (panic, pick up child)
15. Staff morale
16. Student morale (programs, activities)

### **LONG TERM (AFTER 24 HOURS)**

1. Counseling
2. Getting people home
3. Program ideas
4. Usable/available tools/containers
5. Keeping people here over a two-week period
6. All of the items mentioned in "after earthquake" column
7. Arrange for a building inspection; call Tulare County Emergency Services Office 559-737-4660

# EARTHQUAKE ASSETS

## COMMUNICATION:

1. Telephones
2. Close proximity of California Department of Forestry
3. Radios in vehicles
4. Base radio in office and hand held radios.

## TOOLS:

1. Generator
2. Tractor
3. Hand tools
4. Rope
5. Flashlights
6. Batteries
7. Lanterns
8. Barbecue
9. Binoculars
10. Chain saw
11. Buckets
12. Master key
13. Utensils
14. Paper goods
15. Fire extinguishers
16. Hoses
17. 4 x 4 vehicles

## SURVIVAL

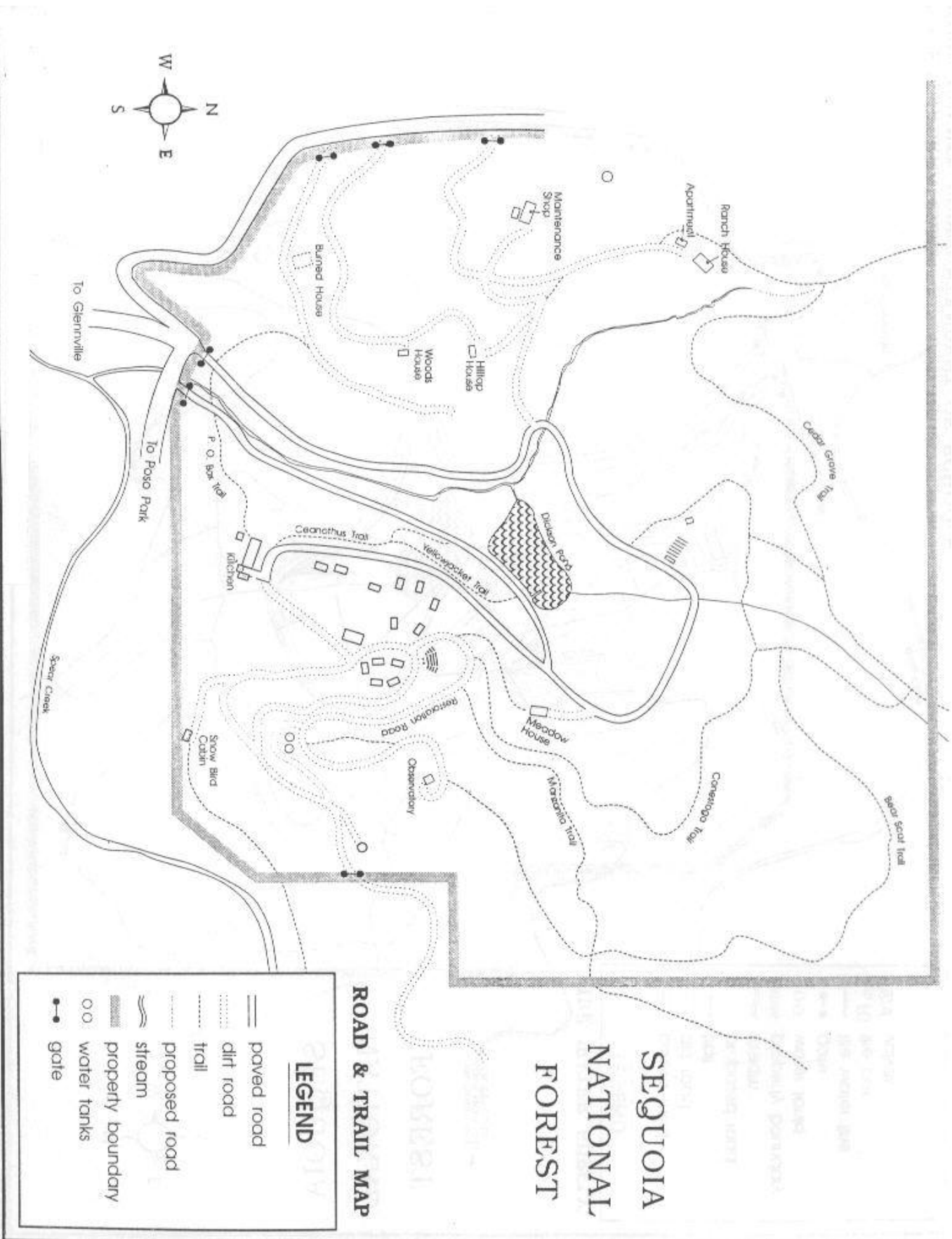
1. Cabins
2. Clothing
3. Sleeping bags
4. Medical supplies
5. Butane/firewood
6. Trash can liners
7. Matches
8. First aid kits
9. Ice
10. Heat in staff and teacher cabins
11. Dining hall

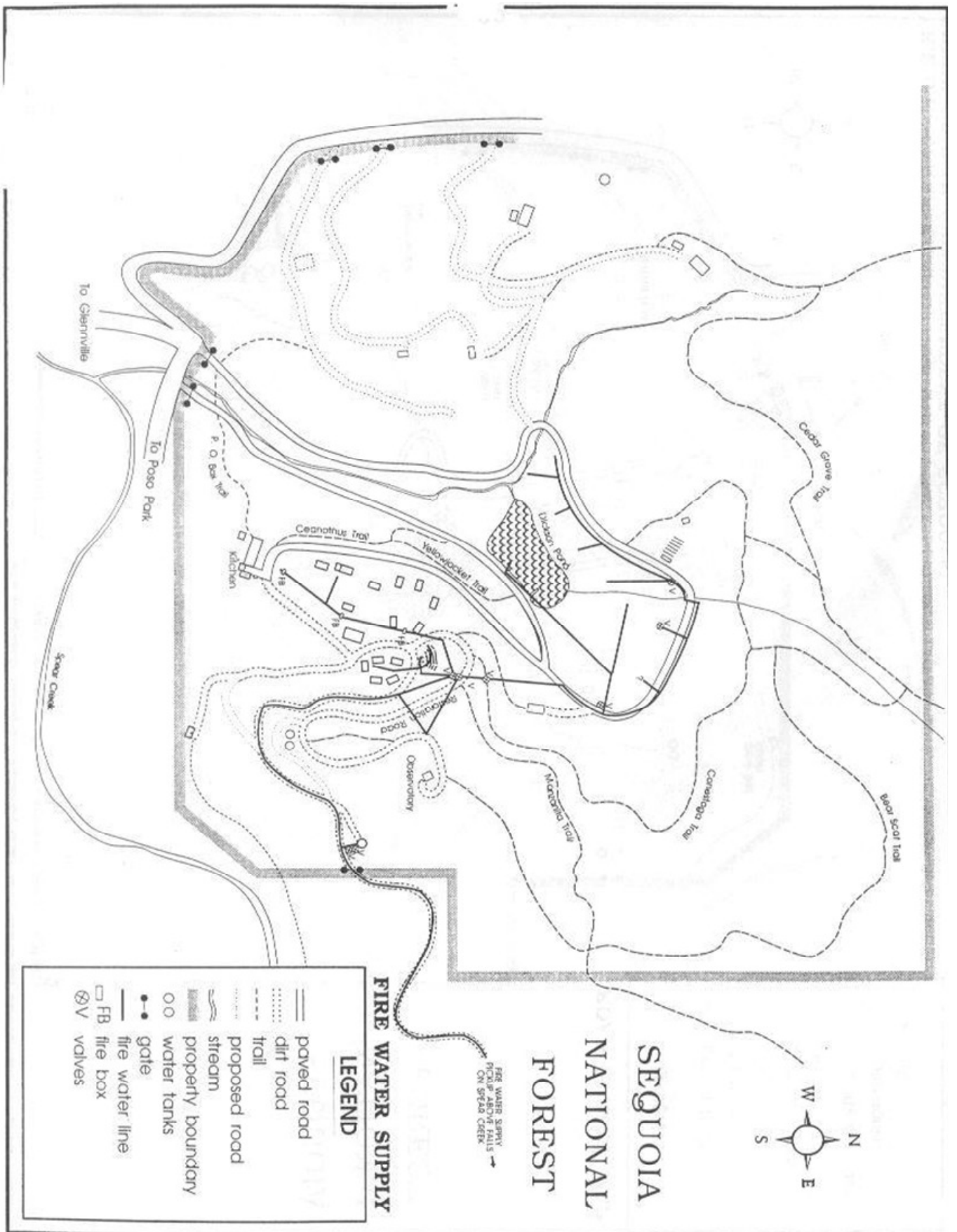
## FOOD

1. Water (Sequoia Heights site)
2. Food in pantries and freezers
3. Cooks

## PROGRAM

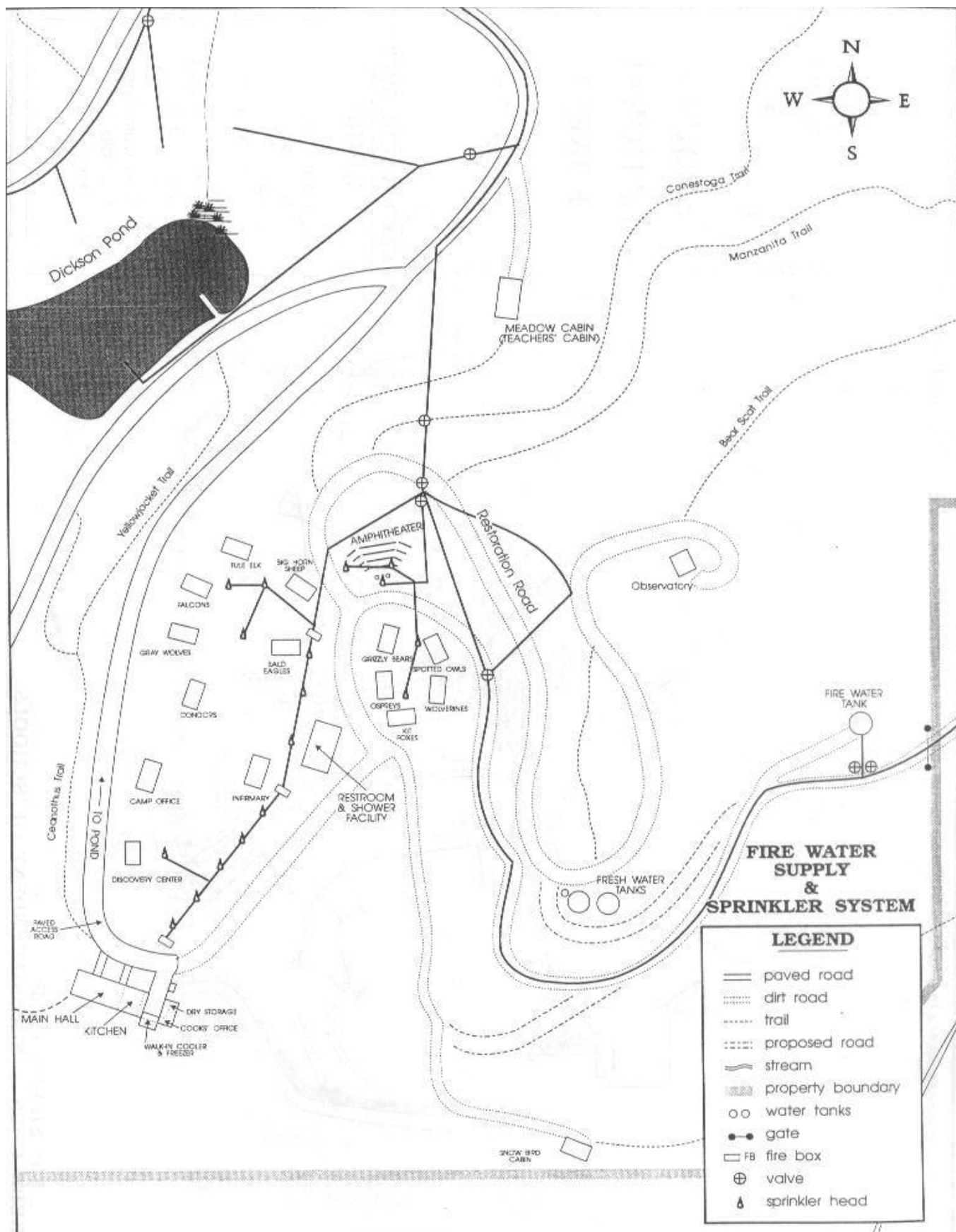
1. Staff
2. Instructional materials
3. Chaperones

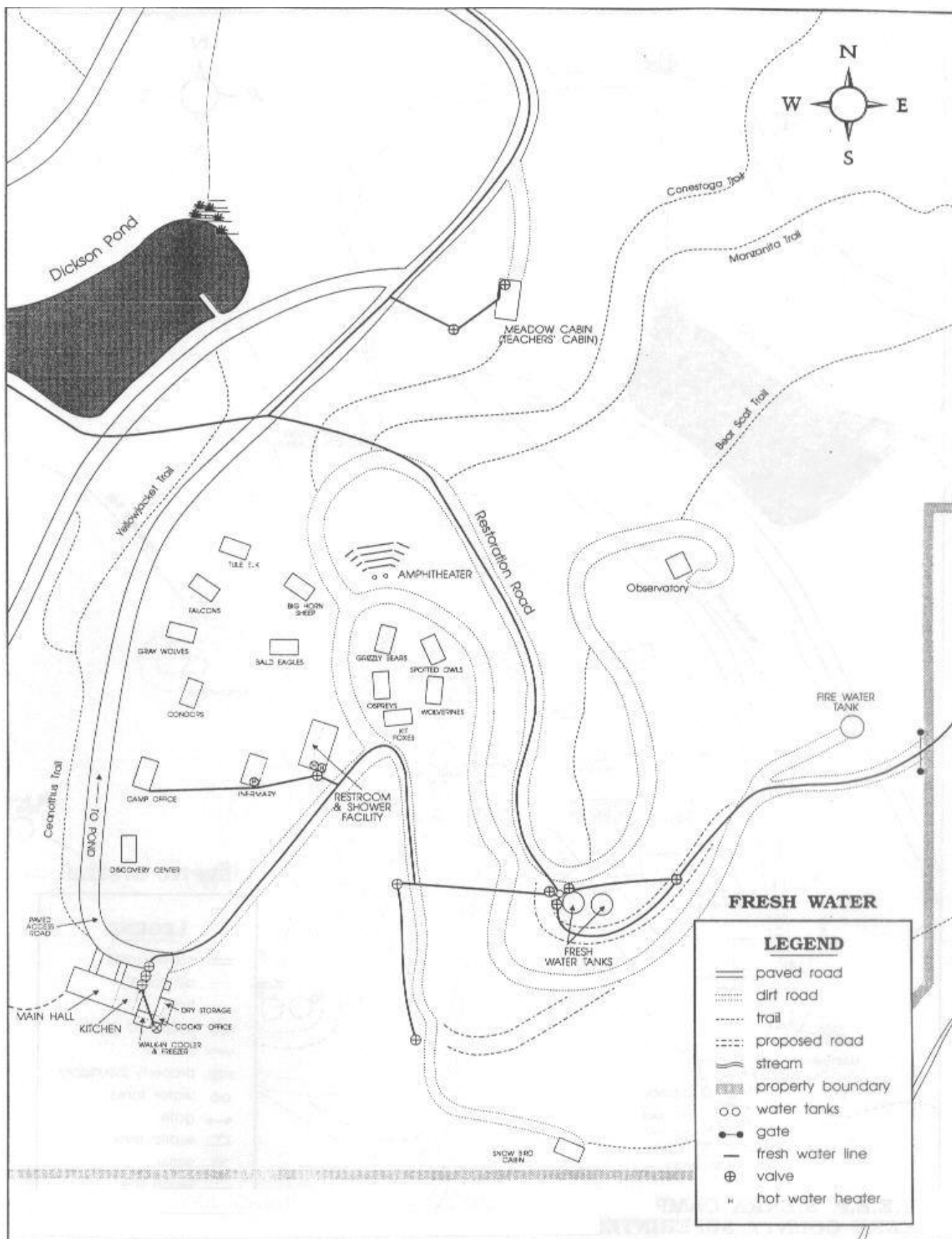


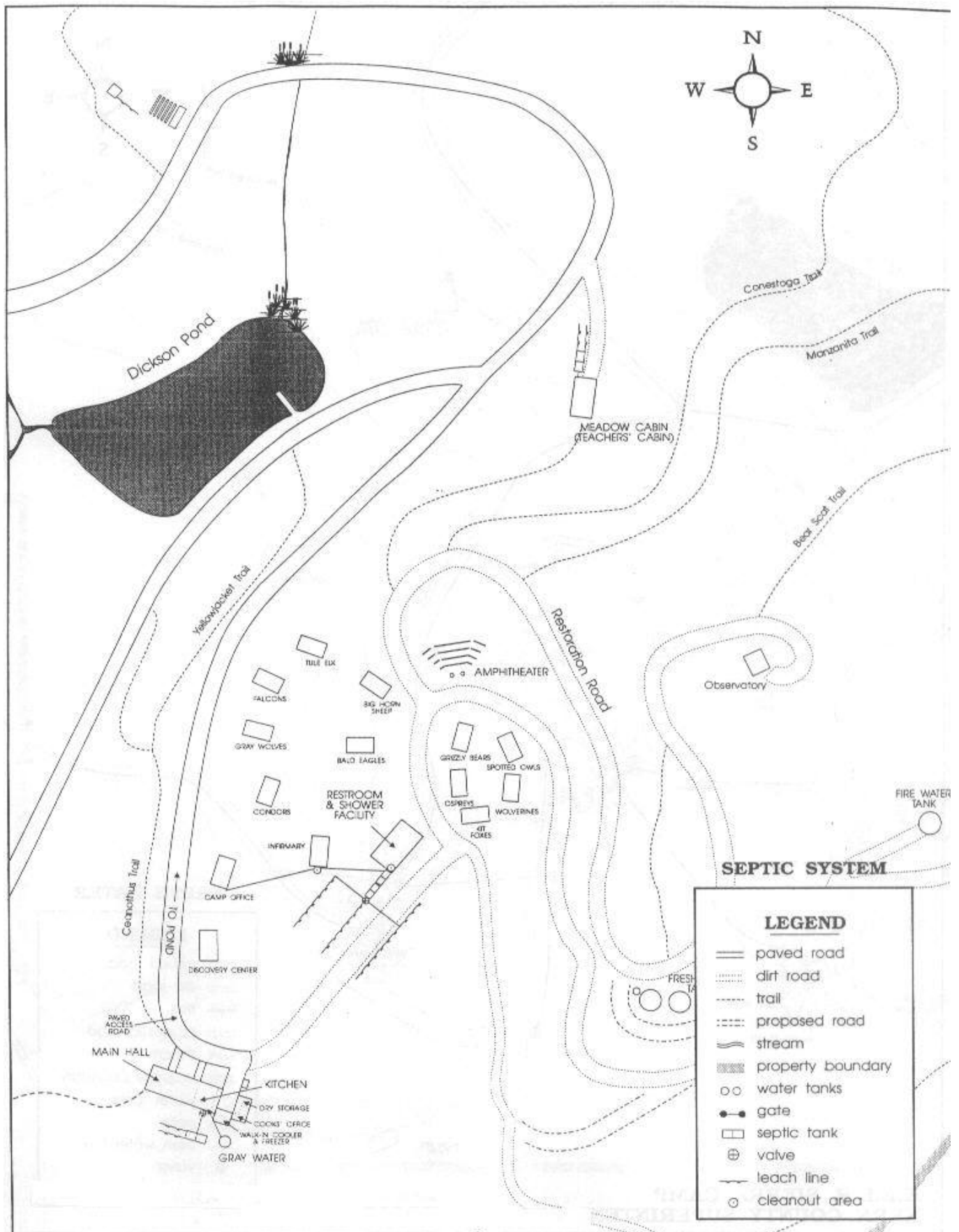


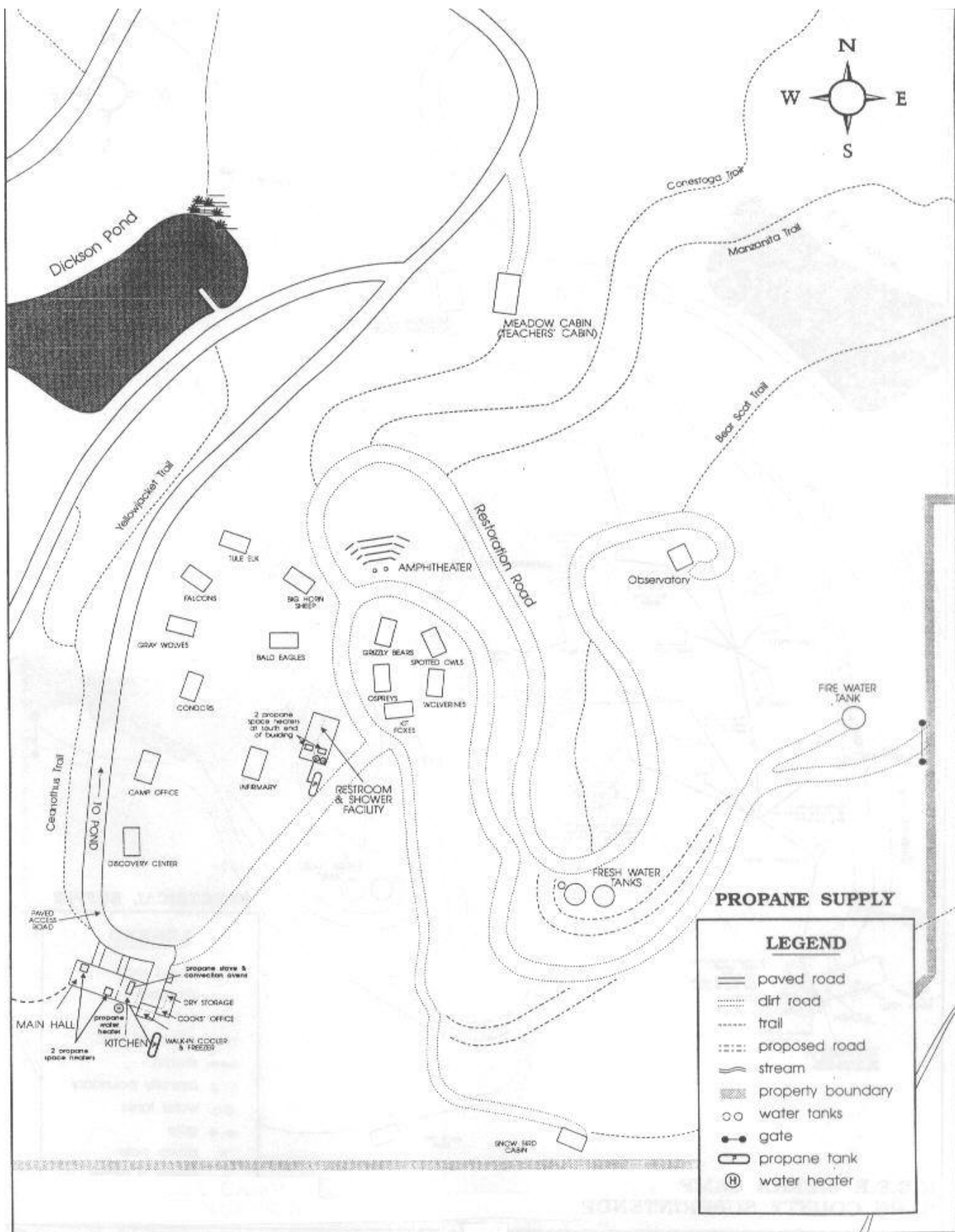


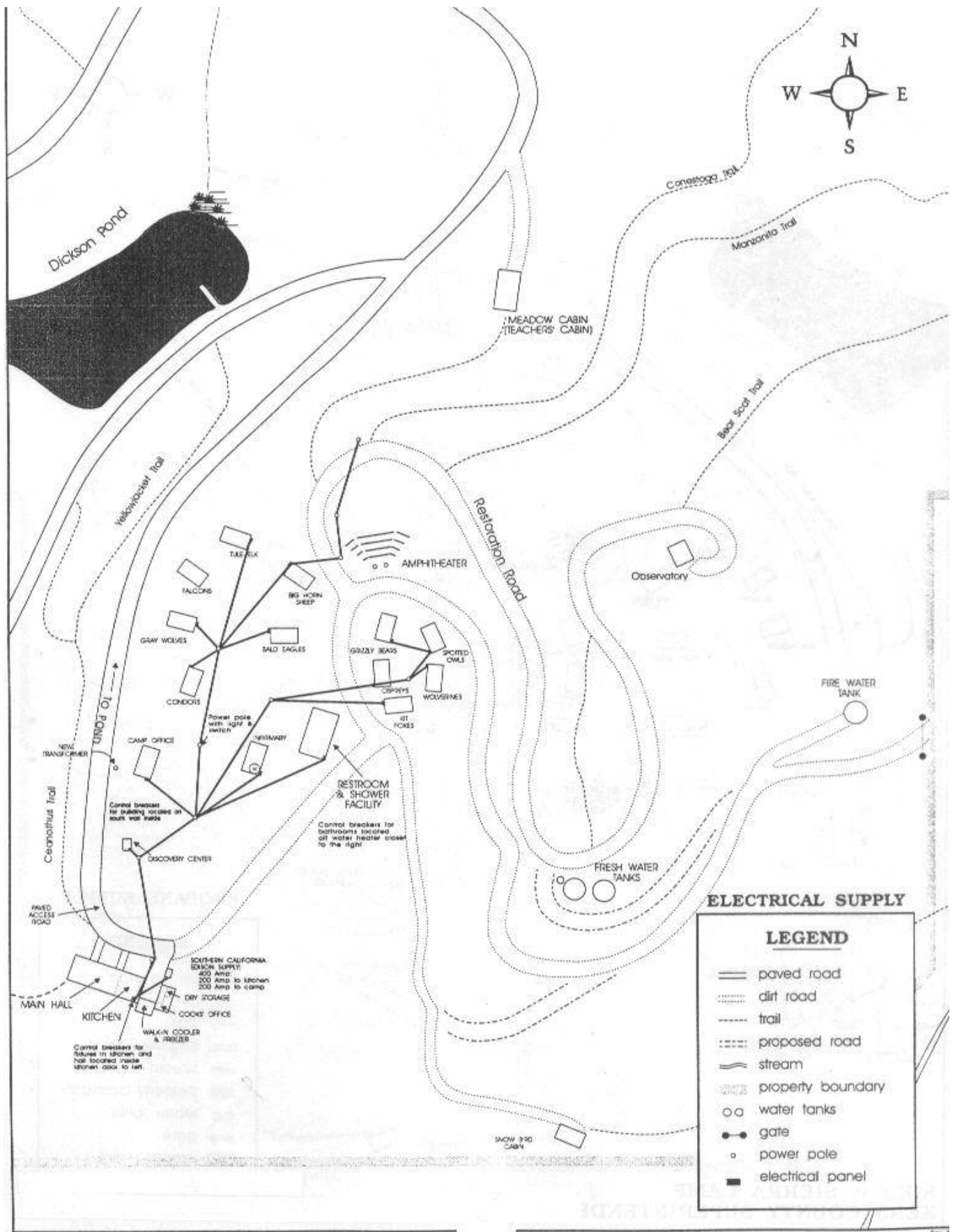












## EMERGENCY PHONE NUMBERS

Emergency	911
<u>Sequoia Heights</u> Office	(661) 536-8747
<u>County</u> Sheriff (Tulare County)	(559)-733-6218
Health Department (Tulare County)	(559) 624-8480
Emergency Services Office (Tulare County)	(559) 737-4660
Animal Control (Tulare County)	559-636-3647
Roads Department (Kern County)	661-862-8850
Roads Department (Tulare County)	559-535-4475
<u>State</u> California Department of Forestry (Poso Fire Station)	661-536-8557
Department of Fish and Game (Warden)	888-334-2258
Department of Fish and Game Fresno Dispatch	559-243-4005
Department of Fish and Game Sacramento Dispatch	(916) 445-0045
Caltrans (Glennville Maintenance Station)	(661) 536-8353
<u>Federal</u> Sequoia National Forest (Porterville/ California Hot Springs)	559-784-1500
Weather Information	661-393-2340
Posey Post Office	661-536-8336
<u>Other</u> San Joaquin Community Hospital (Bakersfield)	661-395-3000
Bakersfield Memorial Hospital (Bakersfield)	661-327-4647
Mercy Hospital (Bakersfield)	661-632-5000
Sierra View District Hospital (Porterville)	559-784-1110
Kaweah Delta Hospital (Visalia)	(800) 332-2508
Southern California Edison	800-655-4555
Poison Control Center	(800) 346-5922/ 800-222-1222
<u>Personnel</u>	

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