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Gender Support Plan

This Gender Support Plan (Plan) was created with assistance from Gender Spectrum, a local organization that assists organizations with creating gender sensitive and inclusive environments for all children and teens. This plan is intended to create shared understandings and agreement with the ways in which [CAMPER NAME]'s gender identity will be supported at [YOUR CAMP NAME]. The goal of [YOUR ORG NAME] is to partner with [CAMPER NAME]'s family to agree upon and create this Gender Support Plan, to then work together to implement the agreed upon Plan, and to ultimately work together to create a supportive environment at [YOUR CAMP NAME] for [CAMPER NAME] and for all campers and staff.

This Gender Support Plan will serve as a shared agreement for handling anticipated or possible situations and events at [YOUR CAMP NAME]. [YOUR ORG NAME] and the [YOUR CAMP NAME] staff and volunteers will diligently attempt to follow this Plan. However, with over [NUMBER] children and approximately [NUMBER] volunteers and staff, it is not possible to guarantee that a misstep will not occur or that an accidental comment will be made. [YOUR ORG NAME], [YOUR CAMP NAME] and Camp Arroyo are committed to avoiding an incident by accomplishing the goals outlined in this Plan.

The following Gender Support Plan was prepared after a telephone conference on [DATE, 2015 attended by [NAME OF CAMP DIRECTOR] (camp director), [NAME OF CAMP FOUNDER] (camp founder), [parent's name] and [parent's name] ([CAMPER NAME]'s parents). [CAMPER NAME] is in # grade. Siblings that will also attend [YOUR CAMP NAME] are brothers [NAMES] and/or sisters [NAMES].

SECTION 1: CONFIDENTIALITY, PRIVACY AND DISCLOSURE

How public or private will [YOUR ORG NAME] be regarding information about this [CAMPER NAME]'s gender identity?

Permission was given by [parent's name] to disclose [CAMPER NAME]'s gender transition to the following people. Additionally, although [YOUR ORG NAME] intends to limit disclosure of [CAMPER NAME]'s gender transition to the following, [parent's name] acknowledge that circumstances may arise that require disclosure to individuals in addition to the following:

[YOUR CAMP NAME] Administrative Staff : [NAMES OF ALL CAMP ADMINISTRATIVE STAFF].

Medical Staff Members: [NAMES OF ALL CAMP MEDICAL STAFF], doctor assigned to her cabin, nursing staff and other medical staff that may provide care to her.

Counselors in Camper's Current Cabin: Names TBD.

Counselors in Camper's Cabin Last Year: Names TBD.

Counselors in Camper's Siblings Cabin: Names TBD.

Check-In Staff: [NAMES]

Art Yurt Staff: [NAMES]

Other Activity Staff: [NAMES]

SECTION 2: ORIENTATION

What training will [YOUR CAMP NAME] provide to build understanding for working with gender-expressed Campers?

[YOUR ORG NAME] will not specifically discuss [CAMPER NAME]'s gender transition during our camp-wide, general orientation. [YOUR ORG NAME] will generally discuss and reinforce that [YOUR CAMP NAME] is a place of acceptance and tolerance for all attendees regardless of race, ethnicity, religion, sexual orientation, gender identity and [MEDICAL CONDITION]. [YOUR ORG NAME] will remind everyone of the [YOUR CAMP NAME] Rules, policies and expectations. The specific discussion is not yet finalized and [YOUR ORG NAME] will work with Gender Spectrum to prepare what and how the discussion will occur.

The people listed in Section 1 will receive a separate, additional orientation about welcoming [CAMPER NAME] and the processes of handling any issues that may arise. Based on our meeting, the following specific considerations will be addressed:

- Explain [CAMPER NAME]'s transition and needs (see Section 3)
- Explain the impact of incorrect pronoun use: "Talking to [CAMPER NAME] is easy. Talking about [CAMPER NAME] is harder", as explained by [parent's name]. Meaning, speaking to [CAMPER NAME] as a female is easier than speaking about [CAMPER NAME] to others using the proper pronouns. During the orientation, [YOUR ORG NAME] will ask all individuals to remember to use "her/his", "she/he" when referring to [CAMPER NAME].
- Review changing protocol and bathrooms usage (see Section 6)
- Explain how an issue at camp will be handled (see Section 3)
- Explain protocol for contacting "Go-To Adult" (see Section 4)

SECTION 3: ANTICIPATED ISSUES AND HOW TO HANDLE

How will [YOUR ORG NAME] protect [CAMPER NAME]'s privacy at [YOUR CAMP NAME] and how will [YOUR ORG NAME] respond if [CAMPER NAME]'s privacy is compromised?

[CAMPER NAME] has not expressed a degree of privacy about discussing her/his gender transition to staff. However, [YOUR ORG NAME] will respect her/his privacy by only disclosing her gender transition to the people listed in Section 1. [YOUR ORG NAME] understands that [CAMPER NAME] has always been a sensitive child and [YOUR ORG NAME] will strive to prevent or minimize any hurtful event or comment.

How will administrative staff at [YOUR CAMP NAME] respond to questions about [CAMPER NAME]'s gender from people not listed in Section 1? The following will be the reply to the various possible

Campers: As we get older, we discover more about ourselves. [CAMPER] has discovered that she/he is a girl/boy and wishes to be called by her/his new name and treated as you would treat anyone else at camp. We all have differences in appearance, culture, dress, language, and opinion that make us unique, but we all deserve to be treated with respect and kindness. [CAMPER] needs your support and kindness, too.

Counselor Staff: A majority of the Counselor Staff are adults. Any Counselor Staff not listed in Section 1 will receive the same response as Parents below.

Medical Staff: Everyone in the Medical Staff is an adult and is aware of requirement for doctor-patient confidentiality and HIPPA. Any Medical Staff not listed Section 1 will receive the same response as Parents below.

Parents: [YOUR ORG NAME] recognizes that some parents might have an issue with having a transgender child in their child's group, cabin or at camp. If they question [YOUR ORG NAME]'s acceptance of [CAMPER NAME] at camp we will explain the following:

"[YOUR CAMP NAME] is a non-discrimination camp. [YOUR ORG NAME] accepts all children regardless of race, ethnicity, religion, sexual orientation, gender identity and [MEDICAL CONDITION]. [YOUR CAMP NAME] is a place where children are taught to respect each other, work together and support each other because we are all part of the same community of those with [MEDICAL CONDITION]. No one spoke to your child about sexuality, reproduction or gender. Gender is not about sexuality but about self-expression. [YOUR ORG NAME] took precautions so your child was not exposed to the opposite gender anatomy in the cabin. [YOUR ORG NAME] worked hard to not conflict with or challenge any values that you are instilling in your child at home. [YOUR ORG NAME] helps any child with [MEDICAL CONDITION] and strives to promote acceptance and tolerance."

How will [YOUR CAMP NAME] handle [CAMPER NAME]'s siblings alerting others?

[YOUR ORG NAME] will address the person based on their age and position at [YOUR CAMP NAME] in the manner described above.

SECTION 4: [CAMPER NAME]'S SAFETY

Who will be [CAMPER NAME]'s "go to adult" at [YOUR CAMP NAME]?

Immediate Need: If an issue arises that requires immediate attention [CAMPER NAME] should and will be taken by a counselor to [CAMP DIRECTOR & OTHER RESPONSIBLE PERSON] or they will go to [CAMPER NAME]'s location. Counselors will be instructed to immediately contact [CAMP DIRECTOR & OTHER RESPONSIBLE PERSON] via a confidential code over the camp radios.

Daily: Every night before/during dinner, [CAMPER NAME], her/his counselor and either [CAMP DIRECTOR & OTHER RESPONSIBLE PERSON] will meet with [CAMPER NAME] to discuss any issues that have come up that day or to assure that no issues have occurred. We ask the family to explain this to [CAMPER NAME] prior to arriving at camp and we will remind [CAMPER NAME] at camp.

Unanticipated Errors: [CAMPER NAME]'s tendency to get upset at social situations (including use of improper pronouns, bathrooms use and social situations) will be taken into consideration. Since we anticipate a level of upset when one of these instances occurs, we will address the specific issue consistent with this Plan. This concern is heightened by the fact that [CAMPER NAME]'s anxiety is currently too high to attend school.

What will be the process for periodically checking in with the family?

If no issues arise or the issue is minor, [RESPONSIBLE PERSON] will email or text message [parent's name] during the week to keep them informed of [CAMPER NAME]'s progress at camp. If any non-minor situation occurs, [RESPONSIBLE PERSON] will email or text message [parent's name] as soon as possible and possibly telephone them to discuss the situation and seek assistance from them. [CAMPER NAME] may at any time ask to phone home and a phone and private area will be provided.

What are expectations in the event [CAMPER NAME] is feeling unsafe and how will [CAMPER NAME] signal need for help?

[CAMP DIRECTOR] will be the first contact point. If [CAMP DIRECTOR] is unavailable then [OTHER RESPONSIBLE PERSON] will be contacted. Counselors in [CAMPER NAME]'s cabin will be notified to contact [CAMP DIRECTOR & OTHER RESPONSIBLE PERSON] immediately if an issue arises.

SECTION 5: NAMES, PRONOUNS AND [YOUR ORG NAME] AND [YOUR CAMP NAME] RECORDS

We understand the use of incorrect pronoun is stressful and hurtful to [CAMPER NAME]. We will do our best to inform our staff to use proper pronouns. We will not tolerate anyone who intentionally or maliciously uses the wrong pronoun or name.

However, we anticipate mistakes may be made accidentally and will handle these mistakes in the following manner to be consistent with the message at [CAMPER NAME]'s home.

With [CAMPER NAME]	"[person's name] did not mean to hurt your feelings. Even though you are upset, it was a mistake. We have spoken with [person's name] and he/she is going to make an effort to not use the wrong words again."
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With person who used incorrect pronoun	"When you use the incorrect pronoun or name, it hurts [CAMPER NAME]'s feelings. [YOUR CAMP NAME] is a place of acceptance and we don't want anyone's feelings to be hurt. Please make an effort to use "her", "she" when referring to [CAMPER NAME]."
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In the [YOUR CAMP NAME] records, [CAMPER NAME] will be listed as a female/male and will be checked in as a female/male.

A recognized problem is that [CAMPER NAME]'s identification for her/his air transportation to and from [YOUR CAMP NAME] identifies her/him as a male/female. [RESPONSIBLE PERSON] books the tickets and was concerned about a potential issue at the airport and contacted [parent's name] who authorized [YOUR ORG NAME] to book [CAMPER NAME]'s ticket to and from [YOUR

CAMP NAME] as a [PREVIOUS NAME]. However, [AIRLINE NAME] has allowed us to book the ticket under [CAMPER NAME] as away to begin camp on a positive note and avoid any upset to [CAMPER NAME]. [AIRLINE NAME] was notified and promised to place an entry in the [AIRLINE NAME] computer with the hope no issue will arise. [YOUR ORG NAME] cannot assure that the wrong pronoun or other hurtful statements will not be spoken by a [AIRLINE NAME] employee or other individual at the airport or on the flight. [YOUR ORG NAME] and [AIRLINE NAME] cannot guarantee that a TSA agent or airport security will not question [CAMPER NAME].

SECTION 6: USE OF FACILITIES

A concern of [YOUR ORG NAME] is that [CAMPER NAME] and the other campers in her/his cabin will feel uncomfortable changing in front of each other due to differences in anatomy. This could result in questions or comments from the campers that [YOUR ORG NAME] will have difficulty preventing. We want [CAMPER NAME] protected from this scenario.

To assure [CAMPER NAME]'s privacy, [CAMPER NAME] will change clothes in the following places:
In the cabin, [CAMPER NAME] will change privately in the restroom/shower area in the cabin with a staff member posted at the door to assure that no other camper will enter.
Alternatively, a counselor will take [CAMPER NAME] and possibly several campers to the pool change room where there are individual stalls that will provide privacy. Use of the pool change room and showers instead of the cabin bathroom, occurs frequently at [YOUR CAMP NAME].

If [CAMPER NAME] has questions or concerns about other camp facilities, who will be the contact person?

[CAMP DIRECTOR & OTHER RESPONSIBLE PERSON]. [CAMPER NAME] will be free to use all public female/male bathrooms located in the dining hall, the swimming pool, and the meadow.

What are the expectations regarding rooming for overnight accommodations?

[CAMPER NAME] will be housed in the [gender] cabin of her age group. Other campers age from ages [AMOUNT] years old.

SECTION 7: OTHER CONSIDERATIONS

Are there any specific issues with siblings that need to be discussed or accounted for?

[Siblings] are supportive of [CAMPER NAME]. We don't anticipate any conflicts between siblings about [CAMPER NAME]'s gender. If, for any reason a situation occurs, it will be handled in the same manner as other campers (See Section 5)

Factors to be considered regarding sibling's needs in terms of [CAMPER NAME]'s transition?

None. Verify with [parent's name].

Are there any additional other questions, concerns or issues to discuss?

SECTION 8: SUPPORT PLAN REVIEW AND REVISION

[CAMPER NAME]'s parents must review this Plan and return a copy of this Plan with their approval or suggested changes? If the changes are substantial, [parent's name] and/or [parent's name] and [NAMES] to schedule a conference call or the changes could be resolved via e-mail, texting

or telephone. [YOUR ORG NAME] views this Plan as a collaborative effort of [YOUR ORG NAME] and the family and appreciate any assistance and feedback before, during and especially after [YOUR CAMP NAME] 2015.

Date/Time of next meeting/telephone conference: TBD.

[parent's name] _____ [parent's name] _____

[YOUR CAMP NAME] and [YOUR ORG NAME] by [AUTHORIZED SIGNER]