

## El Molino

El Molino is run by Peter Smith, an American teacher married to a Mexican anthropologist. Peter is the founder and director of the camp. He worked many years in Montessori schools both in Mexico City and the U.S. There are about 35-40 staff members at El Molino at any given time. There are 15-20 teachers and guides who are in charge of the Kids. Most staff members live in Erongarícuaro and are natives of the area.

The object of the camp is language immersion and intercultural exchange. The location is in a small village in Michoacan called Erongarícuaro, in an enormous hacienda overlooking Lake Patzcuaro, surrounded by flowering jacaranda, bamboo, and cala lilies. Each morning and again each afternoon our students and others from Mexican schools attend their choice of two out of sixteen different workshops run by local craftspeople in their homes. The language experience by day is expanded by sharing meals, exploring the village, and by playing soccer and basketball. By night, hikes into countryside, song-filled bonfires, theater games, and farewell dances will keep everyone's language monitor on full-tilt.

The camp is run by a group of Montessori trained teachers who, 15 years ago, made their vision of a hands-on learning experience come to life. The regular staff are young adults who are from the village or may be ex-campers. The workshop teachers are craft people whose livelihood is their craft.

## Contact at El Molino

Peter Smith  
El Molino  
Prof Urueta Carrillo S/N  
61630 Erongarícuaro, Michoacan  
Mexico  
Phone/Fax: 011-52-434-34-40237  
web page: <http://elmolinomich.com>

## Typical Schedule

Monday through Thursday:

A basic schedule based on the workshops the students choose: Some crafts, animal care, biology, perfumery, bacteriology, exploration, cheese and sausage making, ecology and more.

7:30-8:00 Rise and Shine

8:00-9:00 Physical Activity

9:00-10:00 Breakfast

10:00-12:00 Workshops

12:00-2:30 free time (personal Hygiene, games etc.)

2:30-3:00 Lunch

3:00-4:00 Free time

4:00-6:00 Workshop

6:00-7:15 Games

7:30-8:30 Dinner

8:30 –10:30 walks, campfires, theater activities and/or bedtime.

Friday

We travel to nearby cities

## Sleeping arrangements

There are rooms that hold 10 or 20-25 same sex students. There is always a counselor in the room with the students even for the night. The students are never permitted to “hang out” in the rooms. They are, either to sleep, rest, or take care of personal hygiene. The bathrooms are in the rooms so students do not have to leave the room to bathe or use the facilities.

### Clothing list

- Sleeping bag, Insulite pad (**sleeping on a thin straw mat can be uncomfortable**)
- 3-5 pairs of pants
- 2 pairs of shorts
- 2 long-sleeved shirts
- 5 tee-shirts (or more, if they will wear them only once)
- 8-9 changes of undergarments (kids will probably use 2 undergarments per day)
- 8-9 pairs of socks (kids will probably use 2 pairs of socks per day)
- 1 sweater, 1 coat, 1 rain poncho or rain gear
- 2 pairs of comfortable shoes
- 1 pair of flip-flops for showering
- 1 or 2 pairs of pajamas
- 1 bag for dirty clothes
- 1 towel
- 1 water bottle
- 1 notebook and pen
- 1 small flashlight and extra batteries
- insect repellent, sunscreen
- personal articles(toothbrush, hairbrush, deodorant, etc.)

### OPTIONAL

- camera and film
- Kleenex, moist towelettes
- Reading book

### DETAILS

- Please label everything
- Comfortable hiking boots, but sturdy tennis shoes are fine and are required for sports
- Dark colors are a good choice
- Luggage should be lightweight. Each student must be able to carry, in one trip, all his or her own possessions.
- Students will probably return with souvenirs, so some space should be left for these.
- Wrap any liquids in sealed baggies
- Each Student needs a passport or birth certificate to travel to Mexico. (a passport would be preferable)
- A recent Tetanus shot is required.
- Consult your doctor for any other immunizations.



Parental Permission Form for International Travel  
(Notary seal must appear on this form)

To whom it may concern:

My/our child \_\_\_\_\_, has my permission to leave the USA accompanied by a chaperone from The San Francisco School, in April 2004. The destination of the school is Erongaricuarro, Mexico.

Please check one:

\_\_\_\_ One parent with full custody

\_\_\_\_ Two parents with joint or dual custody [Both parents must sign]

\_\_\_\_ Other- please explain

Signed: \_\_\_\_\_ Parent

on \_\_\_\_\_.

Signed: \_\_\_\_\_ Parent

on \_\_\_\_\_.

State of \_\_\_\_\_

County of \_\_\_\_\_

On \_\_\_\_\_ before me, \_\_\_\_\_  
(Date) (Name, Title of Officer –eg. Jane Doe, Notary Public)

\_\_\_\_\_ personally known to me-OR- \_\_\_\_\_ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity (ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

\_\_\_\_\_  
(Signature of Notary)

DESCRIPTION OF ATTACHED DOCUMENT

\_\_\_\_\_  
(Description of Document (optional))

Medical Form

Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

Parent name \_\_\_\_\_ Home phone \_\_\_\_\_

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

Parent name \_\_\_\_\_

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

Cell phone \_\_\_\_\_

IN CASE OF AN EMERGENCY PLEASE CALL \_\_\_\_\_

Phone \_\_\_\_\_

Doctor's name \_\_\_\_\_ Phone \_\_\_\_\_

24 hours \_\_\_\_\_

Allergies (Medicine) \_\_\_\_\_

Allergies (other than to Medicine) \_\_\_\_\_

Date of last Tetanus shot \_\_\_\_\_

Is your son or daughter currently under Medical supervision? \_\_\_\_\_ If she or he is, please clearly label his or her medicines and include legible instructions.

Comments \_\_\_\_\_

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

## Medical Authorization Form for Mexico Trip

Tentative Schedule for April 2004. \_\_\_\_\_

Child's name \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent name \_\_\_\_\_ USA phone (home) \_\_\_\_\_

(work) \_\_\_\_\_ (cell) \_\_\_\_\_.

Parent name \_\_\_\_\_ USA phone (home) \_\_\_\_\_

(work) \_\_\_\_\_ (cell) \_\_\_\_\_.

Special Health Considerations (Allergies, medications, etc.):

USA Physician: \_\_\_\_\_ USA phone: \_\_\_\_\_

USA Health Insurance Carrier:

\_\_\_\_\_

Group name/number:

\_\_\_\_\_

(Emergency medical treatment costs not included in the cost of the trip and are the responsibility of the parent signed below.)

### EMERGENCY RELEASE:

In case of an accident or emergency, I authorize a chaperone from The San Francisco School or Peter Smith, director of El Molino, to obtain emergency treatment as necessary for the safety and protection of my child, at my expense.

En el caso de una emergencia, autorizo a una carabina de la Escuela de San Francisco o Peter Smith, el director del campamento El Molino, conseguir el tratamiento necesario para la seguridad y protección de mi hijo/a, corriendo yo con los gastos.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

## RELEASE FOR MEXICO

I/We hereby authorize our child \_\_\_\_\_ to travel to Mexico on The San Francisco School Mexico trip.

I/We understand that Mexico is a third world country, and that travel will not be to international tourist areas nor to international hotels. Our child will be staying in a camp and eating camp food.

I/We understand that in addition to the normal risks of travel to a foreign country there are particular risks of hepatitis, typhoid, malaria, and amoebas, among other things. We have consulted our own doctor with regard to the health risks of traveling in Mexico and have taken the medical precautions that we feel advisable. We are not relying on The San Francisco School to advise us as to what health risks are involved or what sort of preventative measures should be taken.

I/We also understand that The San Francisco School is not responsible for any injury, medical condition, illness, or the costs for treatment of any condition that may result directly or indirectly from participation in this trip. We hereby release The San Francisco School from all liability for any such injury or illness, and for the costs of medical treatment, or other damages which may be the result of participation in this trip.

I/We have read this release and understand, and agree to its terms.

(Signature of parent(s) or legal guardian(s):)

Date: \_\_\_\_\_  
Name of Parent                      Signature

Date: \_\_\_\_\_  
Name of Parent                      Signature

## Mexico Trip Student Expectations and Behavior Contract

1. I understand that I will be visiting a culture very different than my own and that this may require compromise on my part. I will be a respectful, courteous, and open-minded guest at all times.
2. I understand that there will be interpersonal demands on this trip. I agree to be understanding, patient, inclusive, respectful to all, and a positive member of the group.
3. I understand that there will be very specific expectations for my behavior. I will comply with the following:
  - a. I will immediately follow all directions given by SFS chaperones and by camp staff members at all times—when traveling, at the camp, in all settings. I understand that I am not to question directions when they are given.
  - b. I will not bring Walkmans, electronic games, or pocketknives.
  - c. I understand that use of alcohol, illegal drugs, or tobacco during this trip is not permitted. Use or possession of any of these items will result in my being sent home immediately and will result in further disciplinary action upon my return to school.
  - d. I will remain in all areas designated by SFS chaperones and camp staff members. I understand that for safety, chaperones and staff members must know my whereabouts at all times.
  - e. I understand the importance of protecting both the outdoor environments that we will visit as well as the indoor spaces that we will use. I will not litter and will clean up after myself at all times.
4. I understand that I will only be allowed to use the telephone in cases of emergency or extenuating circumstances during the course of the trip. In these cases, I will still need staff and chaperones' permission in order to use the telephone.
5. I understand that this trip is an educational program and not a vacation. I understand that this trip will call for seriousness and effort on my part and that I am accountable for my own learning.
6. I understand that the consequences for breaking this contract could include suspension from parts of the daily program, phone calls home, disciplinary action upon my return to school, and/or immediate dismissal from the program and return to the US at my family's expense.

Student Name: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_