

– Confidential –

Gender Support Plan for Camp

The purpose of this document is to create shared understandings about the ways in which the camper's authentic gender will be accounted for and supported at camp. Camp staff, parents/guardians and the camper should work together to complete this document. Ideally, each will spend time completing the various sections to the best of their ability and then come together to review sections and confirm shared agreements about using the plan. Please note that there is a separate document to plan for a camper's gender transition at camp.

Camp: _____	Date: _____
Camper's Preferred Name: _____	Legal Name (optional): _____
Camper's Gender (optional): _____	Assigned Sex at Birth (optional): _____
Parent(s)/Guardian(s): _____	
Meeting Participants: _____	

PARENT/GUARDIAN INVOLVEMENT

Are parent(s)/guardian(s) of this camper aware and supportive of their child's gender status? Yes No

If not, what considerations must be accounted for in implementing this plan? _____

CONFIDENTIALITY, PRIVACY AND DISCLOSURE

How public or private will information about this camper's gender be (check all that apply)?

Camp Leadership will be aware (Owners, Directors, Associate Directors, etc.)

Specify the adult staff members:

Site level leadership/administration will know (Head Counselor, Camp Nurse, etc.)

Specify the adult staff members:

Counselors and/or other camp staff will know

Specify the adult staff members:

Camper will not be openly "out," but some campers are aware of the camper's gender

Specify the students:

Camper is open with others (adults and peers) about their gender

____ Other – describe: _____

If the camper has asserted a degree of privacy, what steps will be taken if that privacy is compromised, or is believed to have been compromised? _____

How will a counselor/staff member respond to any questions about the camper's gender from:

Other campers? _____

Staff members? _____

Other parents/community? _____

CAMPER SAFETY

Who will be the camper's "go to adult" on site? _____

If this person is not available, what should the camper do? _____

What, if any, will be the process for periodically checking in with the camper and/or family? _____

What are expectations in the event the camper is feeling unsafe and how will camper signal their need for help:

During activities _____

During meals _____

During free time _____

In the cabin _____

Other _____

Other safety concerns/questions: _____

What should the camper's parents do if they are concerned about how others are treating their child at camp?

NAMES, PRONOUNS AND CAMP RECORDS

What name and gender are listed on the camper's identity documents? _____

Name/gender marker entered into the official camp records _____

Name to be used when referring to the camper _____ Pronouns _____

Can the camper's preferred name/gender marker be reflected on camp records? If so, how? If not, why not?

If not, what adjustments can be made to protect this camper's privacy? _____

Who will be the point person at camp for ensuring these adjustments are made and communicated as needed?

How will instances be handled in which the incorrect name or pronoun are used by staff members? _____

By campers? _____

How will the camper's privacy be accounted for and maintained in the following situations or contexts:

During registration _____

Completing enrollment _____

With temporary or visiting staff _____

Any other camp forms _____

Swim test _____

Camp photos _____

Camp records and files _____

Off-site programs _____

During meals _____

Taking attendance _____

Official camp-home communication _____

Unofficial camp-home communication _____

Outside providers and organizations _____

Yearbook or Memory Book _____

Posted lists _____

Assignment of computer/tech accounts _____

Announcements _____

If the camper's parent(s)/guardian(s) are not aware and/or supportive of the camper's gender status, how will camp-home communications be handled? _____

What are some other ways the camp needs to anticipate information about this camper's preferred name and gender marker potentially being compromised? How will these be handled?

USE OF FACILITIES

Camper will use the following restroom(s) at camp _____

Camper will change clothes in the following place(s) _____

Camper will shower in the following place(s) _____

What are the expectations regarding sleeping arrangements at camp? _____

What are the expectations regarding facility use and/or sleeping arrangements for any trips away from camp? _____

If camper has questions/concerns about facilities, who will be the contact person? _____

Are there any questions or concerns about the camper's access to facilities? _____

CAMP PROGRAMS AND ACTIVITIES

Does the camper participate in particular activities or program where there are privacy concerns? _____

What steps will be necessary for supporting the camper there? _____

In what camp programs or activities will the camper be participating (sports, theater, trips, etc)? _____

What steps will be necessary for supporting the camper there? _____

Questions/Notes: _____

OTHER CONSIDERATIONS

Are there any specific social dynamics with other campers, families or staff members that need to be discussed or accounted for? _____

Does the camper have any sibling(s) at camp?

Factors to be considered regarding sibling's needs? _____

Does the camp have a dress code? _____

How will this be handled? _____

Are there activities at camp to consider (growth and development, social justice projects, name projects, dance instruction, Pride events, dances etc.)? _____

What training(s) will the camp engage in to build capacity for working with gender-expansive youth?

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

SUPPORT PLAN REVIEW AND REVISION

How will this plan be monitored over time? _____

What will be the process should the camper, family, or camp wish to revisit any aspects of the plan (or seek additions to the plan)? _____

What are specific follow-ups or action items emerging from this meeting and who is responsible for them?

Action Item	Who?	When?

Date/Time of next meeting or check-in _____