

JOIN US FOR LIONS 2025 SUMMER CAMP FOR THE BLIND & VISUALLY IMPAIRED



Big Blue Lake at Pioneer Trails



Enjoy a Weekend Camp at Pioneer Trails in Northern Muskegon County on Big Blue Lake.

WHO: Adults 18 +

WHEN:

Check In - 4:00pm Friday, August 8

Check Out - 12:00pm Sunday, August 10

WHERE: Pioneer Trails camp, 1421 E Fruitvale Rd. Holton, MI 49425 - located on beautiful Big Blue Lake, about 30 minutes north of Muskegon at the southern tip of the Manistee National Forest

COST: \$35.00 - registration/payment due by Friday, August 1. Financial assistance is available. Please contact Lions member: Jack Brewer at 231-288-6271 or email at jdbrewer2@comcast.net.

This is a weekend recreation camp where you will be able to hike in the woods, take a boat ride, fish, relax by the lake, play games, or work on arts and crafts. The weekend is yours to enjoy in a beautiful lake setting.

Rustic accommodations include enclosed cabins, paved trails, a modern bathhouse, dining hall, and bountiful lake frontage.

CHECKLIST OF WHAT TO BRING:

Sleeping bag / Bedding	Pillow	Ear Plugs (Some people snore!)
Toiletries	Towel	Wash Cloth
Personal Medications	Bug Repellant	Swimsuit / Towel
Personal reading/writing supplies and/or equipment		
Warm clothes for evening activities / Comfortable shoes/sandals		
Refillable water bottle (optional) / Large brim hat (optional)		

*The Lions Club and Pioneer Trails are not responsible for lost or stolen articles, **PLEASE** leave valuables at home.*

Please return:

- The registration form completely filled out on both sides and signed
- The signed Pioneer Resources Photo Release Form, if you agree to the terms
- A check or money order for \$35.00 by Friday, August 1, 2025
Make check/money order payable to: Camp Pioneer Trails
- Return in enclosed envelope to: Denee Card

Lions Camp – Pioneer Trails

1700 S. Sheridan Dr., Muskegon, MI 49442

DIRECTIONS TO PIONEER TRAILS CAMP:

Note: Highway 31 is on the west side of the state, from the east you will go past Highway 131. They are different highways.

FROM THE EAST: Take I-96 west to US-31 north. Take US-31 north to the Russell Road Exit and stay on Russell Rd. (follow Happy Mohawk signs) approximately 10 miles, passing several other camps, until you come to Fruitvale Road (at a stop sign). **Turn right (go east)** after stopping. The camp is on the right hand side (south side of Fruitvale Rd.) about a half-mile. There is a "Pioneer Trails Camp" sign.

FROM THE NORTH: Take US-31 south to the Fruitvale Rd. exit (just north of Montague and near the Oceana / Muskegon County border). Go east on Fruitvale Rd. approximately 9 miles. At about the 8-mile mark, you will see the Happy Mohawk Canoe Livery. Keep going to the east about one more mile. Russell Rd. will come in from the right. The camp is about a half-mile from the intersection of Russell Rd. and Fruitvale Rd.

NOTE: Be aware that Fruitvale Rd. does a lot of twisting and turning and it will seem as though you are on it forever before you reach the camp.

For any last minute details about the camp, contact

Rosemarie at 231-286-4439

ROSEMARIE.FACILLA@COMCAST.NET



2025 SUMMER LIONS CAMP REGISTRATION FORM



EMERGENCY INFORMATION

If you have a health emergency during your visit to Pioneer Trails, the following information will facilitate your care.

Δ Emergency Contact 1: Name _____
Relationship: _____ Phone: _____

Δ Emergency Contact 2: Name _____
Relationship: _____ Phone: _____

Δ Physician: _____ Phone: _____

Δ Are you bringing medication(s)? Yes ___ No ___ If yes, please list below

<u>Medication Name</u>	<u>Dosage</u>	<u>Times taken each day</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you need more space, please attach a separate piece of paper

Δ Are you diabetic? Yes ___ No ___

Δ Are you subject to seizures? Yes ___ No ___

Δ Do you have any allergies? Yes ___ No ___ If yes, please list below

If you need more space, please attach a separate piece of paper

Δ Do you carry an EpiPen? Yes ___ No ___

Your signature authorizes Pioneer Trails to release the above medical information to emergency personnel if necessary.

Name _____ Date _____