



# Camp Saint Andrews

Episcopal Diocese of California  
Camps & Conferences

Dear Camp Member,

I would personally like to welcome you to Camp Saint Andrews and thank you for taking the opportunity to register for our camp season.

Included you will find:

1. **WELCOME LETTER:** this parent/camper/staff general welcome & information letter (4 pages).
2. **INFORMATION PAGE:** dates & times. Please post in your home for easy reference (1 page).
3. **MEDICAL HISTORY RECORD:** this form is to be filled out by self or, if under the age of 18, by a parent or legal guardian (1 page).
4. **HOSPITAL CONSENT AND INSURANCE INFORMATION FORM:** for Sonora Community Hospital (2 pages).
5. **CAMP ACTIVITY & MISC. CONSENT/RELEASE FORM:** authorizations for activities & pickup, and releases for transportation & photographs (1 page).
6. **MEDICATION FORM & MEDICAL UPDATE:** list all medications being taken and any last minute health changes (1 page). Note: bring this form with your medications on the 1<sup>st</sup> day of camp.
7. **CLOTHING & EQUIPMENT LIST:** things to bring (3 pages).

ADDITIONAL FORMS:

**FOR PARENTS OF CAMPERS ONLY:**

1. **CAMPER QUESTIONNAIRE FORM:** Parents/Guardians please be frank. All the information on the form is confidential (2 pages).

**FOR STAFF ONLY:**

1. **Job Descriptions** (2 pages)
2. **Rules & Policies** (1 page)
3. **Child Abuse Prevention Policy** (1 page)

OPTIONAL FORMS:

**FINANCIAL AID FORMS:**

1. **Camp Saint Andrews & Diocesan forms** (3 pages)

We urge your care in completing these forms and returning them to the Camp Saint Andrew's Registrar **AT LEAST 3 WEEKS BEFORE CAMP.** These forms must be filled out in their entirety and turned in before you or your child boards the bus.

**FINANCIAL INFORMATION:** The balance of your camp fee is payable at least 4 weeks before camp.

**CANCELLATION:** If you cannot go to camp as planned due to illness, please let us know as soon as possible. We have a waiting list of other campers desiring to go. The registration / application fee is **NOT REFUNDABLE**. The balance of the fee will be refunded as outlined in our Registration Terms & Conditions. These Terms & Conditions can be viewed on the camp website, [www.campsaintandrews.org](http://www.campsaintandrews.org), or you may request a copy be sent to you by contacting the Camp Registrar.

**CAMPER TRANSPORTATION:** Buses will be provided for transportation. Directions to the pick-up site are available online or by sending an email to [registrar@campsaintandrews.org](mailto:registrar@campsaintandrews.org) or contacting the Registrar. Campers must arrive at their pick up site on the day of departure for loading and roster check. **We will do head-checks for lice, so please arrive with ample time for staff to check.**

**HEAD LICE POLICY:** Head lice are a highly contagious and irritating fact of life for children. Please check your children on a regular basis and make sure they are nit-free when camp time arrives. We now do head checks before your child boards the bus. A child with any nits or lice **MAY NOT** get on the bus. You may take your child home, treat them, wash laundry and bring them up to camp within 24 hours. They will be rechecked upon arrival at camp.

**CABIN MATES:** Cabin assignments will be based on sex, grade in school / age, maturity level and friendship. We do our best to honor requests for friends to be in the same cabin, however all requests for cabin movement are reviewed by the Camp Board. Requests to be moved out of one's age group into another will only be approved just prior to camp, and only if there is room in the requested age group.

**MEDICATIONS:** ALL MEDICATION MUST BE GIVEN TO THE BUS CHECK-IN PERSON PRIOR TO DEPARTURE. PLEASE, CLEARLY INDICATE WHO THE MEDICATION IS FOR, PROPER DOSAGE, AND WHEN IT SHOULD BE TAKEN. FOR LIABILITY REASONS, ALL MEDICATIONS YOU BRING MUST BE ADMINISTERED BY AND KEPT WITH THE CAMP MEDIC. If your child takes any medication for any kind of hyperactivity or Attention Deficit Disorder it is extremely important that you send it so they can take it at camp. Camp is not the appropriate time to determine whether or not your child needs their meds. As there is medical knowledge that the use of aspirin may cause 'Reye Syndrome', unless you state otherwise, we will be substituting Tylenol. If your camper has trouble with carsickness, travel sickness medication should be given prior to leaving for the buses. An extra pill should be included for the trip home. (Any leftover medications will be returned to the bus chaperone or check-out person. Please obtain these as your camper gets off the bus.)

**LETTERS FROM HOME:** All mail should be addressed to campers as stated on the Information Page. Mail is encouraged and appreciated. In order for mail to arrive at camp, we suggest you start mailing the Thursday prior to camp and continue through the following Tuesday. Mail time is a big event at camp, and if friends receive letters and your child doesn't, spirits sometimes go down. Remember that if he or she reads how much everyone misses them (including the pets), and how lonesome it is, the mind immediately centers on home and that may be the beginning of some unhappy hours. **Please try to concentrate on how much fun they must be having at camp, and how excited you are to hear all their stories when they return.**

## **GROUND RULES:**

- No radios, MP3 Players, I-Pods, I-Pads, game-boys, or other valuables should be brought to camp unless approved by both the Program and Camp Directors. Items of this nature provide for a distraction and are often the source of jealousy. These items will be confiscated and returned upon arrival home. As there are no secure areas for storage of such items, Camp Saint Andrews cannot be responsible for the safety of such items whether in camper or staff possession, therefore they are not allowed camp.
- Pocketknives and other potential weapons are not permitted and should not be brought to camp. If knives, scissors, etc., are needed at any time, the program staff will provide them. Any such unauthorized items found in camp will be confiscated and will not be returned unless requested by the parent in writing upon arrival home.
- By law, smoking is illegal under the age of 18. Any participant who is 18 or older must read and abide by the Smoking Policy for Camp Saint Andrews as well as follow any smoking rules and / or policy established by the facility.
- No one is permitted to leave the camp at any time unless it is for a scheduled activity and is authorized by the Camp Director.
- The camp's telephone is for **emergencies only** and the campers are not permitted to use it. Emergency calls will be taken and the camper notified by the Director.
- Except for the first day's lunch, **NO food should** be brought to camp. We request parents, families and friends plan not to visit the campgrounds at arrival, departure, or anytime during our stay at camp. This is primarily to avoid disruptions while building our camp community.

Camp Saint Andrews has a long standing dedication to changing children's lives for the better. As happens occasionally, there are circumstances such that some children do not belong at camp. In order to best serve our kids, we must occasionally send children home before the end of a session. If this happens, it is the parent's responsibility to provide transportation in a timely manner. The camp fee is non-refundable in these circumstances.

**VISITORS:** Because camp only lasts for 7 days, it is important that each day be used for our regular camp schedule. No visitor's day is scheduled.

**GOODIES FROM HOME:** Camp serves well-balanced meals, so please DO NOT send with your camper cookies, candy, gum or other food items. Storage of such items in the cabins not only attracts rodents and ants, but also can be a dangerous temptation for bears. Also, please don't send care packages to your child at camp. Aside from the problems with animals that food can cause in the cabins, large packages from home can create jealousy between the campers and make the other campers feel sad and homesick.

**CLOTHING:** Please do not buy new clothing for camp. This is a good place to wear out the "old stuff." PLEASE MARK ALL CLOTHING AND EQUIPMENT WITH THE CAMPER'S NAME. The clothing should be packed in one duffel bag, plainly marked. Enclosed is a suggested list of things to take to camp. Please be sure to bring a FLASHLIGHT with extra batteries. A watch is also very helpful. As the nights can be very cold, please be sure to bring a heavy jacket, warm pajamas/nightgown and a blanket. Also, as socks are to be worn at all times, except at the pool, please bring at least eight pair. It will be helpful if your camper helps to pack since he/she will have to do this for the trip home. Also, include the clothes/packing list in the duffel to assist your camper with his/her clothing check prior to leaving for home. Luggage tags will be distributed when you check your camper in on Sunday.

**SLEEPING BAG:** Nighttime temperatures at higher elevations can drop very low. It is recommended that you use a sleeping bag with a MINIMUM comfort rating of 40 degrees. If your sleeping bag is rated higher than this, please be sure to send along a heavy blanket for added warmth.

**Senior Overnight:** If weather and Department of Forestry regulations permit the “Senior Unit” *may* go on a “Senior Overnight”. If your child is going to be in the Senior Unit please be advised that this activity is not optional, ALL members of the unit will need to participate due to staffing / supervision. Please be sure to send your camper with a backpack (school size will work,) as each person packs in their own bedding, clothes and personal items. It is also recommended that they have a couple pairs of heavy duty socks, two pairs of shoes or boots (there are streams to cross) and a blanket as it can get colder at night in the open vs. in a cabin. The hike in to the camp site is about 2 miles and the hike out is about 3 ½ miles, with a majority of the trail either being flat or on a down grade.

**LIP AND SKIN CARE:** The dry mountain air causes lips and skin to become chapped. Each camper needs to have some type of chapstick and body lotion. Also, sunburn is common at higher altitudes so a good sunscreen is important.

**SPECIAL DIET INSTRUCTIONS:** If there are special dietary concerns or needs, you should note them on your Medical History Form and the Camper information form.

**SPENDING MONEY:** There will be no additional costs this year, therefore, NO MONEY should be brought to camp

**MEALS:** You will need a bag lunch for your first day of camp, either Saturday (for Staff) or Sunday. The rest of the meals will be provided.

**ATTENTION: to parents of campers/staff under 18 years old:** On the day camp ends (or the day after) there is often an “after camp overnight” or “camp party” that some or all the campers/staff are invited to attend. Although, to our knowledge, there have not been any problems at these functions, we want you to be aware that they are not officially part of camp and may not have appropriate supervision. It is up to you to investigate the situation, and decide if you want your child to attend.

**CHAPEL & CAMP SUNDAY:** All campers will attend a daily non-denominational service in the outdoor chapel. We will also hold our traditional Scarf Sunday service on the day after camp. Details as to the time and location will be sent to you in the upcoming months. Everyone is invited and we encourage you/your child to wear the Camp Saint Andrew’s Scarf.

This is going to be a wonderful year for Camp Saint Andrews and we’re glad that you have chosen to enjoy it with us.

See you at camp,

John Swan  
Camp Registrar

P.S. We know that some forms have similar information. Most forms are distributed and needed by different staff members therefore we really need your cooperation in filling out each one completely. Thanks for the extra time and effort this takes. Please send all completed FORMS, and any money **due by the dates noted on the INFORMATION PAGE.** *Please remember that the Medication & Medical Update Form and a Bag Lunch and drink are to be brought with you on your first day of camp.*



## INFORMATION PAGE 2012

### Important Dates:

Forms and Moneys due by	July 1st, 2012
Training Session #1 (All Staff including PA's)	July 14 <sup>th</sup> , 2012
Camp Set-Up (All Staff including PA's)	July 21 <sup>st</sup> , 2012 10:00 AM
Training Session #2 (All Staff including PA's)	July 21 <sup>st</sup> , 2012 2:00 PM
Bus Pickup (Peninsula)	July 22 <sup>nd</sup> , 2012 8:00 AM
Week of Camp	July 22 <sup>nd</sup> – 28 <sup>th</sup> , 2012
Bus Drop-off	July 28 <sup>th</sup> , 2012 5:00 PM (approximately)
Scarf Sunday Church Service (At St. Andrews)	July 29 <sup>th</sup> , 2012 10:00AM

### Important Locations:

Bus Pickup / Drop-off  
St. Andrew's Episcopal Church  
1600 Santa Lucia  
San Bruno, CA. 94066  
(650) 583-6678

Staff Training (All Staff & PA's)  
Session #1 – Location TBD  
July 14<sup>th</sup>, 8:00am – 5:00pm, 2012  
Session #2 – Camp Jack Hazard  
July 21<sup>st</sup>, 2012 2:00 PM – 10:00 PM

Camp Set-Up & Week of Camp  
Camp Jack Hazard  
Highway 108  
Dardanelle, CA. 95314  
(209) 965-4365

### Important Phone Numbers:

Camp Jack Hazard (209) 965-4365

**EMERGENCY CALLS ONLY PLEASE** – This line is in the Resident Directors Office, and is not regularly manned during the day – an answering machine will pick up and your message will be delivered as soon as possible but be aware that it may take up to several hours.

### Letters From Home / Camp Address:

Letters should be sent allowing 3 days for delivery.

Camper's Name  
Camp Saint Andrews  
C/O Camp Jack Hazard  
Dardanelle, CA. 95314

### Contacts:

<u>Title</u>	<u>Name</u>	<u>Phone</u>	<u>E-mail</u>
Camp Director	Mike Siemsen	(925) 899-7252	Director@CampSaintAndrews.org
Asst. Director	Ali Barnes	(415) 601-9109	AsstDirector@CampSaintAndrews.org
Registrar	John Swan	(650) 642-6118	Registrar@CampSaintAndrews.org
Treasurer	Brig Summers	(209) 523-6841	Treasurer@CampSaintAndrews.org
Chaplain	Steve McDonald	(530) 647-2663	Chaplain@CampSaintAndrews.org

### Website:

www.campsaintandrews.org – Be sure to take a look at the frequently updated official Camp Saint Andrews San Bruno website and check the "Info Update" page for all the latest information on Camp 2012.



## MEDICAL HISTORY RECORD

TO BE COMPLETED BY SELF or if under the age of 18 by PARENT, or LEGAL GUARDIAN:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Religion: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mother's Email: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Father's Email: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### PERSON(S) TO CONTACT IN CASE OF EMERGENCY

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

### IMMUNIZATION & COMMUNICABLE DISEASE HISTORY

	<u>DATES</u>		<u>DATES</u>		<u>DATES</u>
SMALLPOX	_____	PNEUMONIA	_____	DIPHTHERIA	_____
MEASLES	_____	WHOOPING COUGH	_____	HERMAN MEASLES	_____
TETANUS BASIC	_____	SCARLET FEVER	_____	MUMPS	_____
TETANUS BOOSTER	_____	POLIO	_____	CHICKEN POX	_____
HEPATITIS	_____				

### GENERAL HEALTH

ANY HISTORY OF THE FOLLOWING: (Please select YES or NO)

ASTHMA, HAY FEVER	YES	NO	HEART TROUBLE	YES	NO	FAINTING	YES	NO
FREQUENT HEADACHES	YES	NO	CHRONIC COUGH	YES	NO	CONSTIPATION	YES	NO
TROUBLE WITH EYES	YES	NO	SHORTNESS OF BREATH	YES	NO	NAUSEA	YES	NO
CONVULSIONS	YES	NO	FREQUENT COLDS	YES	NO	FREQUENT EAR INFECTIONS	YES	NO
HIVES	YES	NO	OPERATIONS	YES	NO	DIARRHEA	YES	NO
EATING DISORDERS	YES	NO	BLEEDING DISORDERS	YES	NO	BEHAVIORAL PROBLEMS	YES	NO
EMOTIONAL DISORDERS	YES	NO						

PLEASE ANSWER YES OR NO TO THE FOLLOWING ADDITIONAL QUESTIONS AND EXPLAIN AS NECESSARY IN COMMENTS AREA!

WEAR GLASSES OR CONTACTS? YES NO HAVE ANY SPECIAL DIETARY NEEDS? \_\_\_\_\_

VEGETARIAN? YES NO IF YES, FISH? YES NO POULTRY? YES NO DAIRY? YES NO EGGS? YES NO

ANY DRUG OR FOOD ALLERGIES? YES NO IF YES, NAME DRUG(S) OR FOOD(S): \_\_\_\_\_

ANY SENSITIVITY TO INSECT STINGS? YES NO IF YES, WHAT INSECT(S): \_\_\_\_\_

FOR PARENTS OF GIRL CAMPERS ONLY: HAS YOUR CHILD MENSTRUATED? YES NO

IF NOT, HAS SHE BEEN TOLD ABOUT IT? YES NO IF SO, IS HER MENSTRUAL HISTORY NORMAL? YES NO

COMMENTS ON ANY ABOVE NOTED ITEMS: Continue on the back of this sheet if needed. If continued on back, please check here

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE

**SIGNATURE of SELF, PARENT, or LEGAL GUARDIAN**



Sonora Regional Medical Center  
1000 Greenley Road  
Sonora, CA. 95370

## CONSENT OF PARENT OR LEGAL GUARDIAN OR OTHER PERSON WHO HAS PRIMARY RESPONSIBILITY FOR THE CARE OF THE PARTICIPANT.

TO BE COMPLETED BY SELF, OR IF UNDER THE AGE OF 18, BY PARENT OR LEGAL GUARDIAN:

NAME OF PATIENT \_\_\_\_\_ AGE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

I / WE , \_\_\_\_\_ give consent to Sonora Regional Medical Center or any other medical facility deemed necessary to arrange for or provide the following health care services for this child

1. Health care including medical examination, routine laboratory studies / X-ray procedures, skin tests, and immunization.
2. Emergency health care for accidents or illness.
3. Transportation of the child to and / or from another health facility for the services as medically necessary.

I hereby consent for all of the above instructions \_\_\_\_\_

**AUTHORIZING SIGNATURE**

### INSURANCE INFORMATION

PRIMARY INSURANCE _____		
ID# _____	GROUP _____	PLAN _____
SUBSCRIBER NAME _____		RELATIONSHIP _____
SUBSCRIBER'S EMPLOYER _____		
INSURER BILLING ADDRESS _____		
INSURER PHONE _____		
PRESCRIPTION PLAN _____	POLICY # _____	

DOES PATIENT HAVE ANY DRUG ALLERGIES? \_\_\_\_\_

IS PATIENT TAKING ANY MEDICATION? YES NO

IF YES, PLEASE LIST \_\_\_\_\_

ANY MEDICATION TO BE TAKEN AT CAMP? (PLEASE INDICATE WHAT MEDICINE AND DOSAGE)

DATE OF LAST PHYSICAL EXAM \_\_\_\_\_



DATE: \_\_\_\_\_

**MEDICAL RELEASE**

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_ hereby authorizes Camp Saint Andrew's, Camp Jack Hazard, and their delegated adult leaders and directors to consent to any medical and hospital care to be rendered to said minor upon the advice of a licensed physician. This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. It is understood that if time and circumstances reasonably permit, Camp Saint Andrew's and Camp Jack Hazard will endeavor, but is not required, to communicate with me prior to such treatment. The undersigned further agrees that Camp Saint Andrew's, Camp Jack Hazard, and their delegated leaders and directors are not legally or financially liable for any claim arising from any consent given in good faith in connection with such diagnosis or advised treatment. This authorization and consent to treatment of minor is given to Camp Saint Andrew's and Camp Jack Hazard in conjunction with any authorized Camp Saint Andrew's or Camp Jack Hazard function or event.

DATE \_\_\_\_\_ **AUTHORIZED SIGNATURE** \_\_\_\_\_

**CONSENT FOR MEDICATIONS**

TO BE COMPLETED BY SELF, OR IF UNDER THE AGE OF 18, BY PARENT OR LEGAL GUARDIAN:

PARTICIPANT'S NAME \_\_\_\_\_ Camp Session CSA

I hereby authorize that person named above may be given non-prescription medications as circumstances call for with the exception of the following:

**PLEASE SELECT YES OR NO FOR THE ADMINISTRATION OF THE FOLLOWING OVER THE COUNTER MEDICATIONS:**

ASPIRIN	YES	NO	THROAT LOZENGES	YES	NO
TYLENOL (Acetaminophen)	YES	NO	ALLEREST COLD TABLETS	YES	NO
MOTRIN (Ibuprofen)	YES	NO	CLARITIN (Allergy Relief)	YES	NO
LAXATIVE	YES	NO	CALADRYL	YES	NO
ANTI-DIARRHEA AGENT	YES	NO	BENEDRYL	YES	NO
TETANUS-BOOSTER	YES	NO	NEOSPORIN	YES	NO
TUMS	YES	NO	SUDAFED	YES	NO

PLEASE LIST ANY OTHER OVER THE COUNTER MEDICATIONS YOUR CHILD IS **NOT** TO RECEIVE:  
\_\_\_\_\_  
\_\_\_\_\_

I understand that the administration of medication will be done under the supervision and authorization of the camp health person/nurse in charge at the time. I also agree that any first aid treatment may be given as needed with the exception of the following restrictions.

RESTRICTIONS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AUTHORIZED SIGNATURE:** \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_

DATE: \_\_\_\_\_

VALID UNTIL: \_\_\_\_\_



# CAMP SAINT ANDREWS CONSENT FOR CAMP ACTIVITY

TO BE COMPLETED BY SELF, OR IF UNDER THE AGE OF 18, BY PARENT OR LEGAL GUARDIAN:

PARTICIPANT'S NAME: \_\_\_\_\_

## CONSENT FOR SPECIAL ACTIVITIES

I understand that like many active sports, some camp activities such as horseback riding, rappelling, climbing, backpacking, and overnight camp outs entail some risk to the participant. Camp Saint Andrews, the Camp Board, and the Camp Staff take all precautions to reduce these risks and provide safe, healthy, enjoyable experiences. (Studies indicate that camp is safer, in general, than school or home). With this understanding, I shall not hold Camp Saint Andrew's, or its staff liable for any damages which are not normally covered by my own family health / medical insurance policy or by applicable Camp Jack Hazard and the Episcopal Diocesan Camp Insurance Coverage. Therefore, I deem myself / child of appropriate age and skill level to participate fully in all activities as supervised by the camp staff except as restricted below.

RESTRICTIONS (IF ANY): \_\_\_\_\_

DATE \_\_\_\_\_ AUTHORIZED SIGNATURE \_\_\_\_\_

PRINTED NAME OF SIGNER \_\_\_\_\_

## PICKUP AUTHORIZATION

I understand that Camp Saint Andrews discourages parents from delivering or picking up their children directly to or from camp. However, if due to unusual circumstances it becomes necessary to pick up my child from camp, I authorize Camp Saint Andrews and its designees to release my child to only the following individuals. (please include at least one family friend).

NAME	PHONE #	RELATIONSHIP
_____	_____	_____
_____	_____	_____
_____	_____	_____

And I request that my child not be released to the following individuals for any reason:

Authorizing Signature \_\_\_\_\_ Date \_\_\_\_\_

## PHOTOGRAPH RELEASE

Permission is granted for photographs and or films taken during participation in Camp Jack Hazard activities to be used for purposes that include publicity and the Camp Photo. Further, I give permission for these photographs and or films to be used without any compensation to myself, my child, or any parties acting on our behalf.

Authorizing Signature \_\_\_\_\_ Date \_\_\_\_\_

## TRANSPORTATION RELEASE

I hereby consent that the Camp Saint Andrews may provide transportation for myself / child to and from camp or camp related activities.

Authorizing Signature \_\_\_\_\_ Date \_\_\_\_\_

## TIE-DYING RELEASE

Arts & Crafts may do tie-dying. If this activity interests your child, please send T-shirts, pillowcases, or appropriate items each labeled specifically for "Tie-Dying". I hereby authorize the above named participant to tie-dye items they own/bring.

Authorizing Signature \_\_\_\_\_ Date \_\_\_\_\_



## MEDICATION AND MEDICAL UPDATE FORM

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

Remember that this form should accompany ANY medication (including aspirin, Tylenol, and vitamins). **Please bring this form and the medications in a labeled bag** (each individual's medications must be packaged separately) **and give them to the check in person on departure day.** All items must be listed below. For Non-prescription items, "as-needed" may be used for dosage description.

Medications:

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

Name: \_\_\_\_\_ Dosage: \_\_\_\_\_ Times: \_\_\_\_\_

(As your original medical history and authorizations were to be returned with the registration forms, please note any changes below:)

Medical Information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Campers Full Name \_\_\_\_\_ Sex \_\_\_\_\_ Grade in Fall \_\_\_\_\_ Age \_\_\_\_\_

## *Camp Saint Andrew's Camper Questionnaire*

Please fill out this form for **EACH** camper whom you are sending to a Camp Saint Andrews. The form is to be filled out by the parent or legal guardian and **NOT** by the camper. Return it at the same time that you return your medical forms. The information in this form is strictly confidential and will not be shared with anyone except those staff working directly with your child. Please be honest and frank while answering the questions below, especially concerning any medical or behavioral issues which pertain to your child. Camp Saint Andrews is a place where all campers are treated equally regardless of past problems, issues, or special circumstances, however the more information we have about your child the better we will be able to respond to your child's needs should they encounter any behavioral or emotional difficulties during the week (even just simple homesickness). If your child is currently diagnosed ADD or ADHD please note that below and describe any particular form of intervention which you find useful when your child is experiencing difficulties. Thank you for taking the time to help us provide your child with the most successful camping experience possible.

Preferred Nickname (if any) \_\_\_\_\_ School Grade in Fall \_\_\_\_\_

All information about ethnicity and family income is confidential and strictly used for statistical evaluation of the diversity of individuals served by our programs. Aside from being beneficial for our personal evaluation of the effectiveness of our community outreach, many foundations and governmental programs require us to demonstrate the diversity of the population served by our programs when applying for government or private grants.

Ethnicity (optional)	Caucasian	Hispanic	African American	Asian	Native American	Other
Household Income	Under \$25000	\$25001 - \$50000	\$50001 - \$75000	\$75001 - \$100000	Over \$100000	

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_ Work Phone \_\_\_\_\_

Are parents living together?      Yes      No

Are there special family circumstances which we should be aware of? \_\_\_\_\_

Any Brothers/Sisters?      Yes      No      Names and Ages \_\_\_\_\_

Does your child get along well with their siblings? Explain \_\_\_\_\_

Are the siblings attending camp the same session      Yes      No

Is the child currently...      Living with parents?      Living with other relative?      Living in a Foster Home or other residential program?

Has your child been to a resident camp before      Yes      No

If yes, where and for what length of time \_\_\_\_\_

What is the longest time your child has ever been away home and their parents? Please explain special circumstances if any. \_\_\_\_\_

How does your child feel about going to camp? \_\_\_\_\_

Does your child have any specific misgivings, fears, hopes, etc? \_\_\_\_\_

What do you especially hope your camper will get out of camp? (i.e., what can the cabin leader do that will be helpful for your child) \_\_\_\_\_

Does your child know how to swim                      Yes                      No  
Do you foresee any problems for your child going on overnight backpacking trips                      Yes                      No  
Please explain \_\_\_\_\_  
\_\_\_\_\_

Is your child allergic to any foods?                      Yes                      No  
If Yes, please list \_\_\_\_\_  
\_\_\_\_\_

What hobbies, sports, or other activities does your child enjoy or excel at? \_\_\_\_\_  
\_\_\_\_\_

Would you say your child is: (Circle One)  
Passive                      Quiet                      Medium Energy                      Energetic                      Hyperactive

Would you say your child gets along with other children: (Circle One)  
With difficulty                      Hesitantly                      Pretty Easily                      Easily                      Extremely Easily

Does your child usually play with other children that are:  
Younger                      Older                      Their own age?

How well do they usually get along? \_\_\_\_\_  
\_\_\_\_\_

Does your child ever wet the bed?                      Yes                      No                      If yes, how often? \_\_\_\_\_

Do they experience any sleeping problems? (sleep walking, nightmares, etc...) \_\_\_\_\_  
\_\_\_\_\_

What suggestions do you have aside from calling home to help your child overcome home sickness \_\_\_\_\_  
\_\_\_\_\_

Are there any special, health problems the staff should be aware of? \_\_\_\_\_  
\_\_\_\_\_

Will your child be required to take any special medications while at camp                      Yes                      No  
If yes, please describe purpose, dosage, and frequency of usage \_\_\_\_\_  
\_\_\_\_\_

What kinds of behavior do you most often discipline your child for? \_\_\_\_\_  
\_\_\_\_\_

What kinds of discipline have you found most effective for your child? \_\_\_\_\_  
\_\_\_\_\_

What other information can you provide to help us make your child's summer camp experience the best ever. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

These questions were answered by (Print Name) \_\_\_\_\_                      **Signature** \_\_\_\_\_  
Relationship to Camper \_\_\_\_\_



## What To Bring

Please remember that Camp Saint Andrews at Jack Hazard is about getting back to basics. Be practical and only bring the absolute necessities. You may be helping to carry your own gear so please keep it light. This includes the size of sleeping bags. Parents, please do not give your young one a sleeping bag to carry that is half their size. At camp everything gets dirty so don't bring anything too nice. Be sure to mark EVERYTHING with your full name. We try to keep careful track of lost and found, but things inevitably get lost or mixed up. Please keep this in mind when packing.

We recommend putting your child's gear in a strong duffel bag (good cheap one will work). We do not recommend foot lockers, trunks, or suitcases. They are more likely to get broken in the luggage loading and unloading process, and they take up excess space.

Use this sheet as a checklist. Please take the recommendations on it seriously. Over 40 years of experience at camp have gone into its making.

## Important Equipment to Bring

_____	Sleeping Bag	The Sierra nights can be chilly so a lightweight blanket or liner can be rolled up with the bag.
_____	Ground Cloth	or 6' x 9' piece of plastic (if there is an overnight or for sleeping under the stars)
_____	Raingear	AN ABSOLUTE MUST!!!! Preferably a hooded poncho of some kind.
_____	Sweater/Jacket	ANOTHER MUST!!! Camp's mile-high evenings can be quite chilly.
_____	Boots or Shoes	Comfortable hiking boots and sneakers or two pair of sneakers (The extra pair is a necessity because one pair is 98% bound to get dirty or wet. Camp is probably not the place for that brand new \$100 pair of Air Jordans) Shoes should fit well and have good ankle support. Water shoes are an additional option.
_____	Clothes	Enough for your one week. Kid's have a way of getting dirty at camp. A good way to remember this while packing for your child is to chant over and over "Camp is dirt, dirt is camp." while picking out your child's clothes for the week (Actually they do shower as often as possible, but the results do not seem to last very long). Please include: jeans, sweater or sweatshirt, shirts, shorts, t-shirts, socks, underwear, and a set of "grubbies" for "dirty work".
_____	Hats	for mountain sun and rain (overheating can be a problem so this is important)
_____	Towels	One large towel and one hand towel are recommended.
_____	Bathing Suit	Modest is better.
_____	Toiletries	Washcloth, toothbrush, toothpaste, soap in a plastic box, shampoo, combs/ brush.
_____	Skin Care	CHAPSTICK, SUNSCREEN, AND MOSQUITO REPELLENT (IMPORTANT!!! Camper's sunburn easily at 6000' and depending on the season mosquitoes can be pesky).
_____	Flashlight	(Extra batteries required)
_____	Water bottle	(about one quart size is sufficient) ABSOLUTELY NECESSARY!! Any plastic NON-LEAKING bottle that holds one quart (32oz).

**DON'T FORGET TO PACK A LUNCH FOR THE FIRST DAY.**  
**(NO GLASS CONTAINERS OR PERISHABLES PLEASE!)**



**Optional Equipment Camp does NOT take responsibility for lost, broken, or stolen items!**

- \_\_\_\_\_ SMALL PILLOW
- \_\_\_\_\_ CAMERA (don't send nice cameras, disposable cameras work the best, please put the names on cameras).
- \_\_\_\_\_ BOOKS AND WRITING MATERIALS (remember stamps for letters home)
- \_\_\_\_\_ SUNGLASSES
- \_\_\_\_\_ BINOCULARS
- \_\_\_\_\_ COSTUMES (watch the camp website – www.campsaintandrews.org – for information on this year's camp theme)
- \_\_\_\_\_ SLEEPING PAD (for overnight)

**Things to Leave at Home!!! (Items will be confiscated and held by the counselor until the end of the session)**

- ANY KNIFE, HATCHET OR BLADE OF ANY TYPE
- COMIC BOOKS
- RADIOS / MP3 PLAYERS / WALKMAN / CD PLAYERS / I-PODS / I-PADS
- ANY ELECTRICAL APPLIANCES (especially hair dryers due to power limitations)
- FOOD OF ANY KIND (STRICTLY ENFORCED TO KEEP ANIMALS OUT OF THE CABINS)
- PETS
- MUSIC WITH INAPPROPRIATE LYRICS
- CAMPERS MAY NOT BE IN POSSESSION OF ANY DRUGS, PRESCRIPTION OR OTHERWISE. ALL DRUGS AND VITAMINS MUST BE ADMINISTERED BY THE CAMP'S HEALTH SPECIALIST.
- WORRIES

**Important Info about Overnights and Backpacking**

1. As we have two pristine wilderness areas near camp, if we have experienced Camp Saint Andrews & Camp Jack Hazard Staff, we may have a "Senior" overnight for the Senior Unit.
2. Temperatures at the higher altitudes (campers over 12 can expect to camp at altitudes as high as 8,000 feet) can get chilly, and a warm, light weight sleeping bag is recommended. Please pay attention to the temperature rating of the bag and add at least 10 degrees to that.
3. Include a waterproof ground cloth. We supply tarps to build shelters if it rains, but ground cover will keep the camper's sleeping bag from getting damp during the night. Often a sheet of plastic, an old army poncho (NOT THEIR RAINGEAR), or a shower curtain can serve this purpose.
4. Please give special attention to comfortable, durable shoes, and thick, warm socks. The back country is hard on footwear.

Above all, please be assured that while the overnight is an experience in roughing it without many of the material comforts of the modern world, we try to provide a safe, comfortable environment in the woods for your child to enjoy their camp experience. This includes balanced, well planned backpacking meals, extensive training for our staff in backpacking and wilderness counseling (including trip organization, shelter building, meal planning, and responding to emergencies), and well maintained equipment. We have received numerous praises from the Forest Service and local emergency officials on the training and competence of our staff in the wilderness. An overnight may be part of the program. Hopefully we will be able to provide this program.



SEE ACCOMPANYING CLOTHES/PACKING LIST: include this list in the duffle bag.

**CLOTHES / PACKING LIST**

Please indicate on the line provided the number of each item you send. This will help your child to check prior to returning home.

- |   |  |
|---|--|
| _____ Underwear (at least 6 pair)       | _____ Sleeping Bag with blanket(s)             |
| _____ Socks (at least 6 pair)           | _____ Blanket(s) (in sleeping bag)             |
| _____ Sweater/Sweatshirt                | _____ Flashlight (with extra batteries)        |
| _____ Long Sleeved Shirts               | _____ Laundry Bag (Plastic)                    |
| _____ Jeans/Long Pants (at least 2)     | _____ Shoelaces (extra)                        |
| _____ Shorts/Cut-Offs                   | _____ Postcards/Stamped and Addressed          |
| _____ Short Sleeved Shirts              | _____ Camp Saint Andrews Scarf (Prior Campers) |
| _____ Warm Pajamas/Nightgown            | _____ Bathing Suit                             |
| _____ Handkerchief/Tissues              | _____ Heavy Jacket                             |
| _____ 2 pair shoes (Boots/Tennis Shoes) | _____ Washcloth                                |
| _____ Bath Towel                        | _____ Hand Towel                               |
| _____ Beach Towel                       | _____ Hat                                      |
| _____ Water bottle/Canteen              |  |

**TOILETRIES (in plastic bag or case):**

- |                              |                                |
|------------------------------|--------------------------------|
| _____ Nail Clippers and File | _____ Drinking Cup             |
| _____ Chapstick              | _____ Insect Repellent         |
| _____ Suncream/screen        | _____ Shampoo                  |
| _____ Skincream/Lotion       | _____ Soap (in a bag or box)   |
| _____ Toothbrush/Toothpaste  | _____ Antiperspirant/Deodorant |
| _____ Brush/Comb             |                                |

**FOR MATURE BOYS ONLY:**

- \_\_\_\_\_ Shaving Supplies

**FOR MATURE GIRLS ONLY:**

- \_\_\_\_\_ Sanitary Supplies  
\_\_\_\_\_ Shaving Supplies

**OPTIONAL:**

- |   |                             |
|---|-----------------------------|
| _____ Small Pillow and Pillowcase                 | _____ Notebook & Pencil/Pen |
| _____ Paperback Book (For Quiet Times)            | _____ Bible                 |
| _____ Camera/Film (one-use cameras are suggested) | _____ Musical Instrument    |

- Notes: 1. Sandals are not suitable footwear for camp and are not allowed.  
 2. No pocketknives will be allowed for campers.  
 3. No radios / I-Pods / CD players are allowed in camp.  
 4. Socks are to be worn at all times, except while at pool.  
 5. Signed permission must be given on Authorization Form for your child to bring a musical instrument or camera.