

2022 Explorer Club Handbook



BROOKWOODS



DEER RUN

Dear Parents:

I would like to thank you for the opportunity you are giving the Staff at Christian Camps and Conferences to be with your child this summer at camp. As you know, our camps are special places set apart to provide a camping experience based upon the teaching of the Bible; places to nurture the potential in young people; and places where campers learn more life skills in a summer camping experience than in nine months of school. A beautiful outdoor learning environment provides the setting for direction, and purpose, in the lives of young people.



While we know that campers will love their time at camp, we are always looking for ways to make the transition easier for first-timers. **The Explorer Club is a way for first-time campers to “dip their toes into the water” and experience camp life.** This program provides eight to ten-year-olds the opportunity to join the Brookwoods and Deer Run family without having to spend a full two weeks away from Mom and Dad. Your camper will get to engage in classic camp activities like an overnight on Plum Island, a hike to Mt. Major, and exciting activities like rocketeering and BB's.

Before you place this Handbook aside, please review the checklist on page three. **It will let you know what has to be done before camp starts.**

Our Camp Store supplier is offering FREE shipping for any uniform t-shirts and gear ordered through the on-line store and delivered to camp. Your camper will have it waiting for them when they arrive at camp! You can visit the on-line store on the camp website under "Parent Resources". Place your order early enough to allow for delivery in time for camp.

We are here to help. My wife, Debbie, and I are parents too...with similar hopes and dreams for our children, just like you; so please give us a call at 603-875-3600 if you have any questions about the summer camping experience of your child.

Cordially yours,

Bob Strodel
Executive Director

"Quick Start" Checklist for Explorer Club Parents**

Forms Due by May 1st



☐ **Health Examination.** New Hampshire requires that every camper be examined within the past year, by a physician prior to arrival at camp. The Medical Form has two parts. The first part is to be filled out by the parents. The second portion by your child's physician. Some physicians have a "standard form" for regular school and activity purposes, and that would suffice for camp as well. BOTH portions of the form are required before camp attendance. We are unable to accept campers without the signed Medical Form. Medical forms are due by May 1st. You can also print out a copy from the camp website under "Resource Center". The parent portion of the Medical Form can also be filled out and submitted on-line from a link on the "Resource Center".

☐ **Transportation Form.** This form is required for campers arriving via plane requiring transportation to the camps. The Transportation Form is on our website under "Resource Center" or use the one located in the back of this Camper Handbook. Please submit it **at least two weeks prior** to your child's arrival at Camp, along with an Airline Itinerary. We cannot guarantee availability for last minute arrangements and reserve the option of an additional fee for late notification.

☐ **Tuition.** Tuition payments for all campers are to be **paid in full on or before April 15th** (unless other arrangements have been made with the Finance Office). This process can be completed on-line, or through the mail. Please make checks payable to: *Christian Camps & Conferences, Inc.*

☐ **Confidential Camper Information.** This information guides us in assigning cabins and staff, and alerts us to any special needs. We would like your input as a parent. This information will be held confidentially with our Camp Directors, Program Directors, and the immediate counselors. This Form is located in the back of this Camper Handbook, as well as on our website under "Resource Center".

☐ **A Letter to My Counselor.** Please ask your child to complete this form. This Form is located in the back of this Camper Handbook, as well as on our website under "Resource Center".

All forms should be returned to:

Christian Camps and Conferences, Inc.
34 Camp Brookwoods Road
Alton, NH 03809

Forms can also be e-mailed to corey@christiancamps.net
Fax: 603-875-4606

**** If you don't read anything else in this book...please at least look over this list so you know what forms to fill out prior to camp!**

A Special Welcome to Explorer Club Campers

We hope that your child has played a role in choosing Brookwoods or Deer Run. Making a choice—even a guided one—helps to give your child a sense of investment in his or her experience here. Although Camp is a lot of fun, it's not unusual for some children to feel anxious or insecure when they first arrive. Our top-notch staff is trained and ready to provide empathetic support to any camper who needs it. If more serious adjustment issues arise, we will work with you to decide how best to help your child have a memorable and rewarding summer.

As a first-time camper (and Camp Parent), it's imperative that you read through this handbook carefully. There are some steps you must take prior to your child's arrival—such as obtaining a medical examination, returning the Medical Form, sending tuition payment and planning for your child's travel. Also, this handbook offers a closer look at Camp life and what your child can expect when he or she arrives. If you read through this handbook and still have questions, please call our main office at 603-875-3600. We'd love to hear from you.

Get ready for a very special summer!

Life at Camp

Camp life is designed to nurture and support your child's growth—all while providing an exciting and stimulating environment. Through a combination of structured programs, your child can participate in a wide variety of safe, noncompetitive and exciting activities—hiking, swimming, rocketeering, BBs and much more.

Cabin life

While we encourage healthy, long-lasting friendships at Camp; we actively discourage cliques or exclusive one-on-one friendships. These types of relationships are limiting and destructive to the group experience. If your child is coming to Camp with a close friend, consider talking about this topic in advance and coming up with a plan to make sure the friendship remains inclusive of others. Also, campers and their counselors will participate in various outdoor activities, such as mountain hiking and an overnight sleepout. These activities provide a special time for counselors and campers to get to know each other. Upon arrival, campers are assigned to a single cabin for the Explorer Club — the cabin has 2 counselors and approximately 12 campers. Each cabin has a bathroom. Deer Run cabins are equipped with hot water and shower facilities. Brookwoods campers have the use of hot water at the shower house centrally located in the cabin area.

Participating in Camp activities

The Explorer Club participants are involved in an exciting schedule for the week. The schedule is designed to give them an opportunity to select a variety of structured activities at camp. Explorers will engage in swim lessons if they do not pass the swimming test.

Here's a quick look at an "average" day at Brookwoods and Deer Run:

7:00 Wake Up	3:00 Rest Hour
7:30 Cabin Cleanup/Devotions	4:15 Open Waterfront/ Additional Activities
8:00 Breakfast/Singing	5:30 Dinner
9:00 Bible Study	6:45 Evening Program
10:15 Morning Activities	9:00 Return to Cabins/ Bedtime /Devotions
12:45 Lunch	
1:45 Afternoon Activities	

Camper guidelines

Too much emphasis on “the rules” takes away from the atmosphere we strive to create at Camp. So, while our rules are few, they are absolutely necessary to keep your child safe and foster an atmosphere of encouragement, self-discipline, creativity, and responsibility:

- Unsupervised swimming is not allowed.
- Smoking, chewing tobacco, alcohol, swearing, and possession or use of weapons or unprescribed drugs is not allowed. [These are not usually a problem with Explorer Club campers!]

Health and Safety

Before coming to Camp, all campers must have a health examination (within the last year) and must return the Medical Form to the office prior to arrival. Health records are maintained by the resident Medical Staff.

Can I use a doctor specific form?

We do accept doctor specific forms, containing an immunization record, in addition to the first two pages of our form filled out by a parent.

What if my child becomes ill or injured?

If your child is ill or injured, Camp will comply with the American Camping Association regulations:

- In the event of minor injury / illness such as headache, simple abrasion or earache, the Camp nurse will provide appropriate treatment. A phone call home is not required.
- In the event of major injury / illness such as broken bones, concussion, allergic reaction or any other event requiring a hospital visit, you will be contacted as soon as possible when we have all the details.

Please note that we will try to contact you in person and will not leave a detailed message on voice mail

- If a non-hospital incident happens at night, and is not serious, we will call you the next morning. Please be assured that we will act in the best interests of your child when determining medical care.

What if my child needs to take medications at Camp?

All medications, including vitamins—prescription or not—must be turned in to the Camp medical staff upon arrival and noted on your child's Medical Form. (Please see page 21 for special information regarding Epi-pens and inhalers.) All prescription medications, including vitamins, must be submitted in their original marked container indicating the name of the drug and dosing information. Our medical staff are not legally allowed to dispense any medications that are not in an original, marked container—there is no flexibility with this policy. The Camp pediatrician has provided written orders allowing us to dispense common, over-the-counter medications, as needed for a medical condition, such as Tylenol, Sudafed and Advil. You do not need to send these with your camper.

Does your camper take regular script or OTC medications? If so a MD/NP/PA must write an order on page 4 of the Health Form or provide other written authorization

A special note about vitamins/herbal supplements: New Hampshire no longer permits Camp nurses to dispense vitamins/herbal supplements without a doctor's signature. If your child needs to take vitamins/herbal supplements, please have your **doctor** indicate permission on the medical form or on the doctor's letterhead. All vitamins must be in their original marked container.

Do you have a lice problem at Camp?

Since we cannot allow campers to enter the camp with lice, on Incoming day we will routinely inspect each camper for any potential problem. Once in a while we find some lice, and it is a surprise to all involved. In that case the parent has the option to take their child home for treatment, cut the camper's hair, or pay to have the camper treated on-site. We utilize a professional service that charges \$200 for the treatment, and is passed on to the parent. Historically this has not been a major issue at camp, but one we choose to be diligent about before we have a larger problem.

What immunizations does my child need?

All campers must be up-to-date on their immunizations, including Tetanus Toxoid (within the previous 10 years), or have a parent signature on the second page of the Health Form indicating the camper is not fully immunized.

Is my child's medical information confidential?

In keeping with the Health Insurance Portability and Accountability Act of 1996 (or HIPAA), information regarding your child's medical background, diagnosis, medications and treatments will only be released to staff medical personnel who have a reasonable need to be involved in providing health care to your child during their stay at Camp.

To all parents of children with severe allergic reactions and/or asthma:

The camp's health staff are trained in the use of inhalers and Epi-pens, are available 24 hours a day, and maintain a stocked emergency bag with Epi-pens and other emergency first aid supplies and equipment. In addition, all trips leaving camp include a first aid bag that includes an Epi-pen.

If you or your health care provider feel that your child's allergic reaction is severe or potentially life-threatening, an Epi-pen should be carried on his/her person at all times. State law requires that two Epi-pens be provided to camp: one for the camper to carry and one to be stored in the Health Lodge. Each Epi-pen must be clearly marked with the camper's name as well as that of the prescribing physician.

Regarding asthma, state laws dictate that the child may carry his/her own inhaler. It must be clearly marked with the camper's name and recorded by the nurse on the incoming day of camp. We strongly recommend a second inhaler for any camper carrying his/her own inhaler to be stored with the camp nurse.

If your child must carry an inhaler or an Epi-pen, your licensed health care provider must complete the information on the form located on page 21.

How do I contact Camp in an emergency?

You can always reach the Brookwoods and Deer Run office by calling 603-875-3600 during the hours of 8:00am – 6:00pm. If you need to contact the Medical Building, call the main number (above) and we will transfer you there. For after-hours emergencies only: call 603-520-0878. You will be calling the cell phone of our Executive Director.

Tuition and Payment

Tuition for all Camp sessions, is due in full by April 15th, regardless of whether the other required forms are completed or not. We would prefer you send in the tuition payment by check. If that is not possible, and you desire to pay with a credit card you may do that through the camp website, under "Online Payments". Call Corey or Debbie in the office if you need assistance with the transaction. We would also be happy to set up an internal payment plan if you would like to complete payments over several months. Contact Debbie for those arrangements. We will send you a reminder statement by mail before April 15th .

International payment process

An additional fee of \$100 per family is required for all families living outside the U.S. (including Canada and Mexico .) Whether you are sending one child or more than one child, the fee stays the same. Due to fees associated with international transactions, you may wire one payment—including tuition and any additional fees—directly to the Camp's bank, or pay on-line with a credit card. Please contact Debbie at the camp office if you wish to obtain wiring instructions.

What to Bring to Camp

All articles, including shoes, socks, hats, clothing and athletic equipment must be marked with your camper's name. Campers are urged to keep track of their belongings and are given the opportunity to claim lost articles each week. Following is a comprehensive list of what (and what not) to bring to Camp. Explorer Club campers should bring enough clothes to last the entire week long stay.

Clothing and equipment list

We recommend the clothing and equipment listed below—all labeled with your child's name. Quantities are based on a one-week session. Because temperatures and weather conditions vary during the summer, campers must have cool-weather and rain gear. Camp clothes experience a lot of wear and tear—please don't pack pricey clothing that you wouldn't want damaged. Explorer Club members attending the August 14th to the August 20th session will participate in the "end of month" banquet. A polo shirt and pants work well for the guys, and the girls should bring a simple modest dress for the evening.

Bed linens, blanket or washable sleeping bag
Pillow/ pillow case
Face towels/bath towels
Waterproof rain gear*
Footwear (see note below)
Underwear (for 1 week)
T-shirts
Athletic socks/2-pair warm or wool socks
Sweatshirt and sweatpants
Warm fleece pullover/Hooded Sweatshirt
Light windbreaker-type jacket
Sneakers (2 pair in case one gets wet)
Swimsuit: one-piece for girls and trunk-style for boys
Beach towel
Jeans or rugged pants (1)

Pencils/pens
Camera (extra batteries)
Flashlight (extra batteries)
Stamps and stationery (to write home!)
Sunscreen/lip balm/sunglasses if desired
1 laundry bag (labeled with name!)
Insect repellent/ after-bite stick
Personal hygiene items (in labeled bag)
Comb/brush
Soap and shampoo
Toothpaste/toothbrush
1 water bottle
Shorts
Teddy bear
Pajamas
Bible (NIV version suggested)

*When purchasing rain gear, look for coated nylon or PVC-coated waterproof (not repellent) material. Vinyl rain wear and ponchos are not recommended.

We also recommend making duplicate lists of items brought to camp—one list to accompany the camper so they can check inventory when packing to return home—and one list to remain at home.

Footwear

Many foot injuries at camp can be prevented through use of proper footwear. Camp is a tough environment for feet with dirt roads, paths through the woods, and an abundance of sticks and rocks. **The BEST footwear you can provide your kids at camp are types with closed toes that also have straps to remain on the feet while running. Sneakers and closed toe sport sandals work well.** No campers will be permitted to engage in activities if they are wearing any type of footwear that does not have a strap. The exception to this will be at the waterfront or walking to the boy's shower house at Brookwoods, where "flip flops" are permitted.

Luggage

We strongly recommend duffel bags instead of traditional luggage for transporting your child's gear to Camp! They are easier to pack, travel with, and store at Camp.

Sleeping bags and bedding

Washable sleeping bags are a must at Camp. In the cooler months (June and mid-August), we suggest bringing a blanket in addition to your sleeping bag. All campers must bring their own pillow. Sleeping bags may be purchased at any sporting goods store (usually least expensive).

Bed wetting

Please note that if your child experiences occasional or frequent bed-wetting, you will need to make some special preparations. Sleeping bags should not be used for daily sleeping in this circumstance; please bring sheets and a washable blanket for your child to use. Give us a call if you expect this to be an issue with your child as we will be better prepared to handle this situation if we know in advance.

What *not* to bring to Camp

In keeping with Camp's philosophy, **electronic equipment is not allowed**—please keep these items at home. This includes radios, television, iPods, hand-held electronic games, iPads, Kindles, and cell phones. If your camper brings these items, they will be placed in the Camp office for the duration of their stay. If these items appear at camp, the organization bears no responsibility for their return. If your son or daughter is using camp transportation to or from camp, they may use electronic equipment, including iPods, during the trip. Digital cameras are permitted if used appropriately. It is also not permissible to bring pets, weapons, alcohol, tobacco in any forms, drugs, chainsaws, drum sets, snowballs, or lightsabers to camp. (You get the idea!)

Returning lost items

Camp will not accept responsibility for lost or stolen articles. Marked items left at Camp may be mailed home only when a parent calls or e-mails the office to identify the missing item and reimburses Camp for the mailing cost. Please understand that hundreds of nice items (clothing, equipment, etc.,) are left at Camp every summer. We can neither pay to mail everything nor hold the items indefinitely, and larger items need to be pre-paid. Unclaimed items will be donated to a charitable organization by the middle of September.

Camp Dress Code

Clothing worn daily should be modest and appropriate for the Camp environment. Please NO strapless, spaghetti strap or backless dresses or shirts. Dresses and skirts must be modest length.

Please don't put Camp in an uncomfortable position—make sure that outfits are appropriate. We reserve the right to ask your child to change clothes if deemed inappropriate.

Travel Overview

While we will assist with your child's travel plans whenever possible, you are responsible for arranging your child's safe travel to Camp. It's imperative that we know your child's travel plans if arriving by air—including mode of transportation and arrival and departure dates and times—at least two weeks prior to arrival. Please inform us immediately of any changes to your child's itinerary.

Please read this section very carefully before making your travel plans. Complete the Transportation Form, which is located at the back of this handbook or on-line on our website.

Please note that Camp provides a van service from the airports noted and will pick up campers at their various terminals. A Camp staff member will meet your child at the airline's baggage area and help retrieve luggage. Your camper should wait for a staff member wearing a camp uniform and holding a clipboard or sign. Please note that airport van service to camp is available only for those campers arriving or departing by airplane.

Upon departure, at the airport, Camp staff members will escort campers to their various terminals, see them through security and will wait at the airport until the plane departs. If your child is traveling as an official Unaccompanied Minor by the airlines, we will obtain a gate pass and meet them at the gate. Most airlines charge a fee if you choose to send your child as an official Unaccompanied Minor. The parent is responsible for paying this fee, to the airlines, prior to the flight. We will be happy to provide you the names of the staff members picking up your child 2-3 days before travel.

Arriving at Brookwoods and Deer Run

By car: Please plan to arrive between 1:00pm-5:00pm on your child's incoming day.

By plane: Please plan travel so that your child arrives at either Boston's Logan Airport or New Hampshire's Manchester Airport between 12:00pm-5:00pm on your child's incoming day.

Departing Brookwoods and Deer Run

By car: Please pick up your camper between 9:00am-11:00am on outgoing Saturdays.

By plane: Plane departure reservations should be made between 12:00pm-5:00pm on outgoing Saturdays.

Preparing your child for travel

Make sure your child travels with Camp's phone number. They may call Camp at any point if they need help: Brookwoods and Deer Run: 603 - 875 -3600.

Transportation Fees

Consider sending money with your child for purchasing snacks en route. In addition, more airlines are charging baggage fees. Please be sure to arrange this in advance or send additional money with your child ahead of time. We can keep their extra baggage money in the camp office during their stay at camp.

Airline Security

It is your responsibility to check with your airline regarding any new security-related rules. Some airlines not only provide an escort service, but require it for official Unaccompanied Minors.

Corresponding with Your Child

Campers love to receive mail, perhaps more than they like to answer it! We encourage you to write often and keep the tone cheerful. Also, campers are encouraged to write home and we do provide free postcards in the Camp Store. If you are not hearing from your child and are concerned, please let us know and we will be happy to confirm that your child is doing well.

Our mailing address is:

Camp Brookwoods and Deer Run

34 Camp Brookwoods Road

Alton, New Hampshire 03809

As a convenience to our parents, we do offer a one-way e-mail service to campers through BunkNotes. Please visit our web site at www.christiancamps.net for additional information about this service.

A note for "kid-sick" parents

With the exception of emergencies, we cannot permit phone calls to campers. Calls interrupt camp experiences and are logistically nearly impossible to handle for our camp office. If you are a "kid-sick" parent, give us a call and we will have you talk to a staff member who can assure you that your child is well and having a great time at Camp. We don't want to turn a "kid-sick" parent into a "homesick" camper problem. Thank you for your cooperation with us.

A word about care packages...

Packages are NOT ALLOWED at camp and will not be delivered. If your camper forgets an important item, for example a raincoat or swimsuit, you can contact our office and they will provide instructions to permit you to ship it to the office and the missing needed items will be distributed to the camper. We appreciate your cooperation in this matter.

Directions and Accommodations for Brookwoods and Deer Run

From the Boston Area: Take the 93 N Expressway through Boston to Route 95 North. Continue on Route 95N to the Spaulding Turnpike (near the Portsmouth, NH/Maine border) to Exit 15 - Route 11 NW. Take Route 11 NW to the Alton Traffic circle where Route 11 intersects with Route 28N. Take Route 28N for about 5 miles from the Alton Traffic circle. Take a left onto Chestnut Cove Road. Follow signs for Camp Brookwoods and Camp Deer Run. **To get direction from a GPS type in "34 Camp Brookwoods Road 03809"**

Accommodations

If you are planning on staying in the Lakes Region, it's important that you make advance reservations early and directly with motels or resorts. The following is a guide to some of the accommodations that are near Camp.

Lodging

- Crescent Lake Inn and Suites, 280 S Main Street, Wolfeboro 603-569-1100 (6.6 miles)
- Wolfeboro Inn, 44 N. Main, Wolfeboro 603-569-3016 (7.7 miles)
- Lake Wentworth Inn, 427 Center Street, Wolfeboro 603-569-1700 (9.3 miles)
- Holiday Inn Express, 77 Farmington Road, Rochester 603-994-1175 (20 miles- ask for camp discount!)
- Marriott - TownePlace Suites, 14 Sawmill Road, Gilford, NH 603-524-5533 (21.7 miles)

If you're interested in local Bed and Breakfast options, please contact the Wolfeboro Chamber of Commerce at 603-569-2200.

Restaurants

- Nolan's Brick Oven Pizza, 39 N. Main Street, Wolfeboro (603-515-1028) (7 miles)
- Wolfeboro Inn, 44 N. Main, Wolfeboro 603-569-3016 (7.7 miles)
- WolfeTrap, 19 Bay Street, Wolfeboro 603-569-1047 (8 miles)
- Back Bay Grill, 51 Mill Street, Wolfeboro 603-515-1002 (8 miles)
- Johnson's Seafood and Steak, 69 Route 11, New Durham 603-859-7500 (11 miles)
- Morrissey's Front Porch, Rt. 28, Wolfeboro 603-569-3662 (7 miles)
- Downtown Grill Cafe, 33 South Main Street, Wolfeboro 603-569-4504 (8 miles)
- Wolfeboro Dockside Grille, 11 Dockside Street, Wolfeboro 603-515-1053 (8 miles)

Airport Transportation to Brookwoods or Deer Run

(This form is also available on the camp website)

Before you complete this form, please read the "Travel Overview" section on page 10 very carefully—it contains specific travel-related instructions, including required arrival and departure times.

If your child is traveling by plane and if you'd like for us to meet your child at the airport and provide van service to and from Camp, please use the form below to provide us with your child's travel plans, including detailed flight information. We are unable to guarantee transportation without this information in writing, and **we must have this form at least two weeks prior to a camper's arrival. We cannot guarantee availability for last minute arrangements, and reserve the option of an additional fee for late notification.**

Camper Name _____ Age _____

Airline Official Unaccompanied Minor? Yes ____ No ____

Has parent paid Unaccompanied Minor fee to airline? Yes ____ No ____

If you have not paid the fee, then they are not an official Unaccompanied Minor.

Area Code + Home Phone _____

Parent Cell Phone Number _____

Parent Fax Number _____

Emergency Contact, name and phone number _____

Camper's Cell Phone _____

I plan to arrive at (check/circle one) and need transportation to Camp:

☐ Boston Logan Airport

☐ Manchester Airport

Airline Name/Flight #	Arrival Time (between 12:00 pm and 5:00 pm)	Date
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I plan to depart (check/circle one) and need transportation to the airport:

☐ Boston Logan Airport

☐ Manchester Airport

Airline Name/Flight #	Departure Time (between 12:00 pm and 5:00 pm)	Date
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Important!

Please attach a copy of the itinerary or the confirmation from the airline or e-mail to the camp office at transportation@christiancamps.net



Back of Transportation Form



Confidential Camper Information

(to be completed by parent)

(This form is also available on the camp website)

Name _____ Age _____ Date of Birth _____

Current Grade _____

Father's Name _____ Occupation _____

Mother's

Name _____ Occupation _____

1. Who lives in the home?

Father _____ Mother _____ Names and ages of siblings:

2. If divorced or legally separated, who has custody? _____

To Whom may your child be released? _____

3. Church Affiliation _____

4. Has your son/ daughter previously been to a camp? _____ How long? _____

Name of camp: _____

5. What fears, if any, does your child have? _____

6. Is your child oversensitive? _____ If yes, in what way? _____

7. Camper's sleeping habits: Light _____ Heavy _____ Sleepwalks _____ Nightmares _____

Bed Wets _____ Just Fine _____ All of the above! _____

8. Socializing qualities (mixing, group living, etc.): Below Average _____ Average _____

Above Average _____ COMMENTS: _____

9. My child is: Very Independent _____ Independent _____ Average _____

Dependent _____ Very Dependent _____ COMMENTS: _____

10. My child makes friends: Easily _____ Very Easily _____ Average _____

Very Slowly _____ COMMENTS: _____

11. My child has had previous Group Experiences outside of school: Clubs _____

Scouts _____ Other _____ Were these good experiences? _____

12. My child's religious interests are: Little _____ Some _____ Much _____
Average _____ Very Much _____ COMMENTS: _____

13. We are sending our child to camp for the following reasons: (check as many as apply)
____A summer vacation _____An experience in group living
____Learn to further appreciate the outdoors _____To learn new skills
____To experience camping as you know it _____To have a variety of experiences
____To be a part of a Christian camp; one with a positive atmosphere
____For a special reason _____

14. Please list special talents or interests that your child shows evidence of having: _____

15. What does the camper do with most of his/her spare time? _____

16. What kind of problem, if any, are the counselors most likely to have with your child at camp? _____

17. What additional suggestions do you have for the cabin counselors? _____

18. Has your child had psychological counseling? _____ If so, for how long and for what purpose? _____

19. Additional information or comments, if any: _____

These questions answered by: _____

Relationship to camper: _____

Signature: _____

A Letter To My Counselor At Camp

(To Be Filled Out By The Camper)

(This form is also available on the camp website)



My full name is _____

My friends call me _____

After this summer, I will be entering _____ grade

This is my _____ year at Brookwoods / Deer Run / Moose River Outpost

The things I like to do most when I am **alone** are _____

The things I like to do most **around my home** are _____

The things I like **most at school** are _____

The things I like **least at school** are _____

The qualities I like **most in other people** are _____

As I prepare for camp, I **feel** _____

I would like to have a **camp leader** who _____

The music **instrument I play** is _____

The kind of **music I enjoy listening to** is _____

I enjoy watching these **TV shows** _____

While at camp, I want to: _____

	Definitely	Maybe	No-way!
Archery	_____	_____	_____
Outdoor Cooking	_____	_____	_____
Basketball	_____	_____	_____
Riflery	_____	_____	_____
Bicycling	_____	_____	_____
Sailing	_____	_____	_____
Canoeing	_____	_____	_____
Singing	_____	_____	_____
Soccer	_____	_____	_____
Softball	_____	_____	_____
Dramatics	_____	_____	_____
Swimming	_____	_____	_____



Back of Letter to Counselor



Christian Camps and Conferences

Legal Name: _____
First Middle Last "Nickname"
☐ Male ☐ Female Birth Date _____ Age on arrival at camp: _____
Month/Day/Year

Health History Form - Parent Portion

Directions:

1. Parents: Please fill out pages 1 and 2 of this form as much as possible. It can also be submitted on-line at the camp website for your convenience.
2. Provide the Medical Staff portion of the form to your child's health care provider for completion. They can complete the form, or they can simply attach the information in a format specific to their practice.
3. **Return all information it to the camp by May 1st if possible.**

Office Use Only
E1 E2 E3 E4

Home Address: _____
Street Address City State Zip Code

Parent/guardian with legal custody to be contacted in case of illness or injury:

Name: _____ Relationship _____
to Camper: _____ Preferred Phone: (_____) _____
Email: _____

Home Address: _____
(If different from above) Street Address City State Zip Code

Second parent/guardian or other emergency contact:

Name: _____ Relationship _____
to Camper: _____ Preferred Phone: (_____) _____
Email: _____

Additional contact in event parent(s)/guardian(s) can not be reached:
Relationship _____

Medical Insurance Information:

This camper is covered by family medical/hospital insurance ☐ Yes ☐ No

Parent/Guardian Authorization for Health Care:

This health history is correct and accurately reflects the health status of the camper to whom it pertains. The person described has permission to participate in all camp activities except as noted by me and/or an examining physician. I give permission to the physician selected by the camp to order x-rays, routine tests, and treatment related to the health of my child for both routine health care and in emergency situations. If I cannot be reached in an emergency, I give my permission to the physician to hospitalize, secure proper treatment for, and order injection, anesthesia, or surgery for this child. I understand the information on this form will be shared on a "need to know" basis with camp staff. I give permission to photocopy this form. In addition, the camp has permission to obtain a copy of my child's health record from providers who treat my child and these providers may talk with the program's staff about my child's health status.

Signature of Custodial Parent/Guardian _____ Date _____ Relationship _____
to Camper: _____

If for religious or other reasons you cannot sign this, contact the camp for a legal waiver which must be signed for attendance.

Health History

Page 2 of 2

Name: _____
First Middle Last

General Health History: Check "Yes" or "No" for each statement. Explain "Yes" answers below.

Has/does the camper:

- | | |
|---|--|
| 1. Ever been hospitalized? <input type="checkbox"/> Yes <input type="checkbox"/> No | 11. Had fainting or dizziness? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Ever had surgery? <input type="checkbox"/> Yes <input type="checkbox"/> No | 12. Passed out/had chest pain during exercise?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Have recurrent/chronic illnesses? <input type="checkbox"/> Yes <input type="checkbox"/> No | 13. Had mononucleosis during the past 12 months?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Had a recent infectious disease? <input type="checkbox"/> Yes <input type="checkbox"/> No | 14. If female, have problems with menstruation?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Had a recent injury? <input type="checkbox"/> Yes <input type="checkbox"/> No | 15. Have problems with falling asleep/sleepwalking? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. Had asthma/wheezing/shortness of breath?..... <input type="checkbox"/> Yes <input type="checkbox"/> No | 16. Ever had back/joint problems?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 7. Have diabetes? <input type="checkbox"/> Yes <input type="checkbox"/> No | 17. Have a history of bedwetting?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 8. Had seizures? <input type="checkbox"/> Yes <input type="checkbox"/> No | 18. Have problems with diarrhea/constipation?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 9. Had headaches? <input type="checkbox"/> Yes <input type="checkbox"/> No | 19. Have any skin problems?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 10. Wear glasses, contacts, or protective eyewear? <input type="checkbox"/> Yes <input type="checkbox"/> No | 20. Traveled outside the country in the past 9 months?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |

Please explain "Yes" answers in the space below, noting the number of the question. For travel outside the country, please name countries visited and dates of travel.

Mental, Emotional, and Social Health: Check "Yes" or "No" for each statement.

Has the camper:

- | |
|---|
| 1. Ever been treated for attention deficit disorder (ADD) or attention deficit/hyperactivity disorder (AD/HD)? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Ever been treated for emotional or behavioral difficulties or an eating disorder?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. During the past 12 months, seen a professional to address mental/emotional health concerns?..... <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. Had a significant life event that continues to affect the camper's life?..... <input type="checkbox"/> Yes <input type="checkbox"/> No
(History of abuse, death of a loved one, family change, adoption, foster care, new sibling, survived a disaster, others) |

Please explain "Yes" answers in the space below, noting the number of the questions. The camp may contact you for additional information.

Does your camper take script or OTC medications? If so a MD/NP/PA must write an order on page 4 of this form or provide other written authorization.

If your camper has NOT been fully immunized, please sign the following statement: I understand and accept the risks to my child from not being fully immunized.

Signature of Custodial _____ Relationship _____
Parent/Guardian: _____ Date: _____ to Camper: _____

Health-Care Providers:

Name of camper's primary doctor(s): _____	Phone: (_____) _____
Name of dentist(s): _____	Phone: (_____) _____
Name of orthodontist(s): _____	Phone: (_____) _____

What Have We Forgotten to Ask? Please provide in the space below any additional information about the camper's health that you think important or that may affect the camper's ability to fully participate in the camp program.
Attach additional information if needed.



Parents/Guardians: STOP here. The rest of the form is to be completed by the camper's licensed health-care provider.

Medical Staff
Page 1 of 2

Name: _____
First Middle Last

Medical Personnel: This form is to provide the information appropriate for the health and safety of a summer camper or staff member. Please fill out this form and return to the parent, or you could simply attach a “standard” form that might be a normal part of the practice.

Weight: _____ lbs Height: _____ ft _____ in Blood Pressure _____ / _____

Physical exam done today: ☐ Yes ☐ No (If “No,” date of last physical: _____)

Do you feel that the camper will require limitations or restrictions to activity while at camp? ☐ No ☐ Yes

If you answered “Yes” to the question above, what do you recommend? (describe below—attach additional information if needed)

“I have reviewed the CAMPER HEALTH HISTORY FORM, and have discussed the camp program with the camper’s parent(s)/guardian(s). It is my opinion that the camper is physically and emotionally fit to participate in an active camp program (except as noted above on this form.)

Name of licensed provider (please print): _____ Signature: _____ Title: _____

Office Address _____
Street City State Zip Code

The following non-prescription medications are commonly stocked in camp Health Centers and are used on an as needed basis to manage illness and injury.

Cross out those items the camper should not be given.

Acetaminophen (Tylenol) **Aloe** **Ammonia inhalent** (for fainting) **Bacitracin ointment**
Bactroban 2% ointment (Mupirocin – for skin infection)
Benzocaine gel (OraSol, Anbesol – for toothaches)
Calamine lotion **Calcium Carbonate** (Tums – antacid) **Cetirizine** (Zyrtec – antihistamine)
Dextromethorphan (Robutussin DM, Delsym – cough syrup)
Diphenhydramine (Benadryl – antihistamine) **Epinephrine** (Epipen – for anaphylaxis)
Generic cough drops **Guaifenesin** (Robutussin – cough syrup) **Hydrocortisone 1% cream**
Ibuprofen (Advil, Motrin) **Lidocaine Gel** (pain relieving burn gel)
Loperamide (Immodium AD – antidiarrheal)
Loratadine (Claritin – antihistamine) **Milk of Magnesia** (laxative)
Phenol spray (Chloraseptic – Sore throat spray)
Phenylephrine (Sudafed PE – decongestant) **Pseudoephedrine** (Sudafed – decongestant)
Tolnaftate 1% cream (antifungal)

Allergies:

- ☐ No Known Allergies
☐ To foods (list):

☐ To medications: (list):

☐ To the environment (insect stings, hay fever, etc.– list):

☐ Other allergies: (list):

Describe previous reactions:

Diet, Nutrition: ☐ Eats a regular diet. ☐ Has a medically prescribed meal plan or dietary restrictions: (describe below)

The camper is undergoing treatment at this time for the following conditions: (describe below)

Medical Staff Page 2 of 2

Name: _____

First

Middle

Last

Medication: ☐ This camper will not take any daily medications while attending camp.

☐ This camper will take the following daily medication(s) while at camp:

"Medication" is any substance a person takes to maintain and/or improve their health. This includes vitamins & natural remedies. The camp requires original pharmacy containers with labels which show the camper's name and how the medication should be given. Parents need to provide enough of each medication to last the entire time the camper will be at camp.

Name of medication	Amount or dose given	How it is given	When it is given	Reason for taking it	Date started
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> Other time: _____		
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> Other time: _____		
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> Other time: _____		
			<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner <input type="checkbox"/> Bedtime <input type="checkbox"/> Other time: _____		

Inhaler / Epi-Pen authorization: Camper has Inhaler Epi-Pen (circle one) with them and may self-administer.

☐ Not Needed ☐ No ☐ Yes _____ (initials of health care provider)

Immunization History: Provide the month and year for each immunization. Starred (*) immunizations must be current. Copies of immunization forms from health-care providers or state or local government are acceptable; please attach to this form.

Immunization	Dose 1 Month/Year	Dose 2 Month/Year	Dose 3 Month/Year	Dose 4 Month/Year	Dose 5 Month/Year	Most Recent Dose Month/Year
Diphtheria, tetanus, pertussis* (DTaP) or (TdaP)						
Tetanus booster* (dT) or (TdaP)						
Mumps, measles, rubella* (MMR)						
Polio* (IPV)						
Haemophilus influenzae type B (HIB)						
Pneumococcal (PCV)						
Hepatitis B						
Hepatitis A						
Varicella (chicken pox)	<input type="checkbox"/> Had chicken pox Date:					
Meningococcal meningitis (MCV4)						

Inhaler and Epi-Pen Permission

Must be completed by a licensed health care profesional if Epi-Pen is to be carried at all times.

New Hampshire and Maine have legislation controlling the use and storage of inhalers and Epi-Pens at camp. The purpose of these law is to allow your camper to keep his/her inhaler or Epi-pen on his/her person to be used if needed while at the same time providing a safe environment for other campers. The law requires two Epi-pens: one for the camper and one to be kept with the Nurse. While the State of New Hampshire does not require two inhalers, but Camp Brookwoods and Deer Run recommends two inhalers: one for the camper and one for the Nurse.

_____ has the knowledge and skills to safely possess and administer
(name of camper) the medication in a camp setting.

INHALERS THAT MUST BE CARRIED

Medication _____ Dose _____ Frequency _____

Medication _____ Dose _____ Frequency _____

Medication _____ Dose _____ Frequency _____

EPI-PEN

Medication _____ Dose _____ Frequency _____

List any special side effects, complications, and/or adverse reactions to be observed other than those listed on the package insert. _____

Although rare, the adminstration of epinephrine to an individual other than for whom it is prescribed can result in serious medical problems which are listed on the epinephrine package insert. This patient has been instructed in the dangers of administration of his /her epinephrine to any other person.

HEALTH CARE PROFESSIONAL'S NAME _____

SIGNATURE OF HEALTH CARE PROFESSIONAL _____ DATE _____

ADDRESS _____

BUSINESS PHONE () _____ EMERGENCY PHONE () _____

For additional information, please contact our friendly staff:

Bob Strodel	Executive Director	bob@christiancamps.net
Corey Porter	Registrar	corey@christiancamps.net
Debbie Strodel	Office Manager & Finance	debbie@christiancamps.net
Ben Tabone	Brookwoods Director	ben@christiancamps.net
Mary Beth Bowling	Deer Run Director	marybeth@christiancamps.net
Seth Coates	Moose River Outpost Director	seth@christiancamps.net
Tim Nielsen	Director of Ministry Services	tim@christiancamps.net

Lost or additional forms can be found on each camp website. You can access the individual camp websites at: www.christiancamps.net or you can use the following:

Brookwoods: www.campbrookwoods.net

Deer Run: www.campdeerrun.net

Moose River Outpost: www.moosriveroutpost.net

Accreditation

Brookwoods, Deer Run and Moose River Outpost are accredited members of the American Camping Association (ACA) and Christian Camp and Conference Association (CCCA). They have earned and maintained the highest recognition and standing with both organizations. This means that Camp has met the requirements for membership established by the ACA and CCCA. Camps awarded these emblems are inspected every three years by qualified personnel to ascertain their compliance with standards set by these organizations.

*Our Mission at Brookwoods, Deer Run and Moose River Outpost
is to foster vibrant Christian communities located in
awe-inspiring outdoor settings in which young people are
spiritually transformed through Christ-centered relationships.*



Christian Camps and Conferences, Inc.

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