

CLB Summer Camp Program

2009

Applications Package

Please find enclosed the following documents:

- 1. Memo to Company Commanders Re: Camp**
- 2. Camp Application**
- 3. Health Record**
- 4. Kit List**
- 5. Camp Sergeant Major Application**
- 6. Sergeants' Mess Application (JTC Camps)**
- 7. Work Party Application (JTC Camps)**
- 8. JTC Camps Applications Summary**
- 9. Senior Camp Applications Summary**



The CLB

Summer Camps 2009

March 1, 2009

To: All Company Commanders

The forms necessary for application to Summer Camps 2009 are attached. Please print as many copies of the applicable pages as needed for your Company. Should you require paper copies, contact the Regimental Adjutant or Battalion Adjutant. Please return all **completed forms and full fees** to the Regimental Camping Director, Major Gary Rose, **by no later than April 30, 2009**, at 1071 Indian Meal Line, Portugal Cove – St. Philip's, NL A1M 3C4.

Company Commanders are asked to **please read carefully and take note** of the following guidelines regarding camp applications:

1. All those attending camp must have completed one training year in the applicable corps. Members not included on the Nominal Roll dated December 31, 2008 will not be permitted to attend.
2. All applications, including Health Records, must be thoroughly reviewed and signed by the Company Commander to ensure that all information is included. Forms without MCP Numbers including day, month and year of expiry, Parents and Company Commander signatures and other pertinent information will not be accepted.
3. Requests for financial assistance for camp fees should be directed first to the Anglican Charitable Foundation through your Company Chaplain. Please note that the committee that approves applications for assistance does not meet during the summer. It is important therefore that your Chaplain apply early in order for the funds to be available for the young people to go to camp. Secondly, assistance may be sought from the Claudia Piercey Fund; in this case, a letter from your Company Chaplain should accompany the application.
4. **Full fees for all campers and staff must be submitted with the applications by no later than April 30, 2009. Fees are \$165.00 per person of which \$50 will be non refundable, except for extenuating circumstances.** Fees for 2009 are unchanged from 2008. Please include the full amount in one cheque for all members attending camp from your Company. The cheque should be made payable to the CLB Eastern Diocesan Regiment. You are reminded that points are made available under the Colonel Stirling Rankings for submitting camp applications and fees by the deadline. **Applicants who submit forms or fees late may not get an opportunity to attend camp.**
5. Please complete the two summary sheets by listing all members of your company planning to attend SC and JTC Camp. For the JTC Camp Summary, do not include those applying for Work Party and Sergeants' Mess. It is suggested that you make a copy of these summary sheets for your reference.
6. Those Senior Corps members wishing to attend a JTC Camp as Work Party or Sergeants' Mess must complete the applicable applications. Also, there is an application for any W&NCO wishing to apply for a Camp Sergeant Major position. The CSM and Sergeants' Mess will be selected by the Camp

Commandants. **PLEASE NOTE:** Selection of the two work parties, which normally takes place during Senior Camp, will take place prior to the two JTC Camps due to the Senior Camp being moved because of The Belize Mission occurring at the same time Senior Camp is normally held.

7. On the summary sheets you will find a column for you to enter a sports code (athletic ability) for each camper. Please enter a number for each camper in accordance with the key at the bottom of those sheets. On the summary sheet for Senior Camp, there is an additional column in which you should identify those members who have indicated on their applications that they wish to complete Phase 1 & 3 of the WO or NCO Proficiency Course at Camp.
8. Provide as notes on a separate page (which you may title “Behavioral Summary”) any pertinent information regarding behavioral concerns or anticipated adjustment problems for any of your campers. You work with these young people and are undoubtedly aware of any such problems. This information will obviously be held in strict confidence and will hopefully result in a more enjoyable camping experience for the campers and staff.
9. Alternate programs may be offered to individuals who are unable to fully partake in the regular programs. Please identify anyone who may fall into this category and provide details with the applications.
10. Each company sending members to a camp is strongly encouraged to have at least one adult leader attend that camp.
11. All adult leaders planning to attend are required to complete the Health Record portion of the application.
12. Company Commanders should ensure that each camper has sufficient pocket money (\$25 recommended, \$15 minimum, \$30 maximum) and adheres to the kit list. **PLEASE NOTE:** NO DRESSES OR SKIRTS WILL BE PERMITTED TO BE WORN IN CAMP. Also only one piece bathing suits will be permitted.
13. The Regiment will provide transportation to and from camp. You will be notified approximately one week prior to camp about departure times, pick-up times, arrival times, etc.
14. Please **do not encourage** parents to visit camp. In many cases this only creates homesickness, teasing, dissention, etc.
15. Company Officers **are not encouraged** to drop by camp for a night or two. You are encouraged to attend camp as a member of staff and should make your intentions known to the Camp Commandant prior to camp so that you will be included in camp meetings and assigned specific duties.
16. The telephone number for Mint Brook is 674-9900.

For additional information or clarification, contact the undersigned at 895 - 6551 (home).

Looking forward to another great Summer Camp Program!

Major Gary Rose
Regimental Camping Director

The CLB

SUMMER CAMP 2009



CAMP USE ONLY:

ARRIVED IN CAMP

Yes No

CAMP APPLICATION

I hereby make application to attend the following CLB Summer Camp at Mint Brook Camp near Gambo, NL:

- 1st JTC Camp** Saturday, July 4, 2009 to Saturday, July 11, 2009
- 2nd JTC Camp** Saturday, July 11, 2009 to Saturday, July 18, 2009
- Senior Camp** Saturday, July 18, 2009 to Saturday, July 25, 2009

FULL NAME: _____ COMMON NAME: _____

RANK: _____ COMPANY: _____

ADDRESS: _____ TELEPHONE: _____

DATE OF BIRTH: _____ MCP #: _____

EXPIRY: (D) _____ (M) _____ (Y) _____

Parents please note: If you do not plan to be at the residence noted above during any or all of the period that your child is in camp, please provide the address and phone number where you can be reached, and the dates you will be at the alternate location:

ALTERNATE ADDRESS: _____

ALTERNATE TELEPHONE: _____ DATES: _____

Senior Corps members may choose to forgo a portion of the regular camp program in order to attend Phase 1 & 3 of the WO or NCO Proficiency Course. If your child is applying for Senior Camp and intends to avail of this opportunity, check the appropriate box:

- WO Proficiency Phase 1 & 3
- NCO Proficiency Phase 1 & 3

If your child has a physical or behavioural condition which may prevent him or her from fully participating in the camp program, which may include such activities as swimming, hiking, sports, class instruction and recreation, please explain on the reverse side of this application.

PARENTAL CONSENT: I hereby give consent for my child (named above) to attend the camp (selected above) and I agree to supply my child with all items on the approved kit list.

SIGNATURE OF PARENT OR GUARDIAN: _____ DATE: _____

REVIEWED BY COMPANY COMMANDER: _____ DATE: _____

The CLB

SUMMER CAMP 2009



CAMP USE ONLY:

ARRIVED IN CAMP

Yes No

Health Record

FULL NAME: _____ MCP #: _____

ADDRESS: _____ EXPIRY: (D) _____ (M) _____ (Y) _____

DATE OF BIRTH: _____

Parents or guardians: Check the appropriate box if your child has suffered from any of the following diseases or illnesses. Please provide details on the back of this form.

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> arthritis | <input type="checkbox"/> appendicitis | <input type="checkbox"/> asthma | <input type="checkbox"/> attention deficit disorder |
| <input type="checkbox"/> bed wetting | <input type="checkbox"/> bronchitis | <input type="checkbox"/> chicken pox | <input type="checkbox"/> convulsions |
| <input type="checkbox"/> diabetes | <input type="checkbox"/> digestive upset | <input type="checkbox"/> diphtheria | <input type="checkbox"/> ear trouble |
| <input type="checkbox"/> eczema | <input type="checkbox"/> epilepsy | <input type="checkbox"/> fainting | <input type="checkbox"/> Hay fever |
| <input type="checkbox"/> German measles | <input type="checkbox"/> heart disease | <input type="checkbox"/> hysteria | <input type="checkbox"/> kidney trouble |
| <input type="checkbox"/> measles | <input type="checkbox"/> mononucleosis | <input type="checkbox"/> mumps | <input type="checkbox"/> night terrors |
| <input type="checkbox"/> pleurisy | <input type="checkbox"/> pneumonia | <input type="checkbox"/> poliomyelitis | <input type="checkbox"/> rheumatic fever |
| <input type="checkbox"/> scarlet fever | <input type="checkbox"/> sinusitis | <input type="checkbox"/> sleep walking | <input type="checkbox"/> tonsillitis |
| <input type="checkbox"/> tuberculosis | <input type="checkbox"/> whooping cough | | |

List any other diseases or illnesses suffered by your child: _____

List any allergies: _____

Is your child allergic to any type of nuts?? Yes No If yes what type?? _____

Does your child use medication for reaction to this allergy?? Yes No If yes what type?? _____

Does your child normally wear glasses or contact lenses? Yes No

Are your child's immunizations up to date? Yes No

Date of last tetanus immunization: _____

List all operations and major injuries with the dates and the nature of each. (Please use reverse).

While in camp, will your child require special medication, inoculations or other special treatment? Yes No
 (If yes, a doctor's letter with instructions must be given to the Camp Medical Officer at the start of camp.)

Please provide any other information about your child that you feel is pertinent on the back of this form, or you may contact the Regimental Camping Director, Major Gary Rose, at 895-6551 (H).

Should my child (named above) require medical treatment, the Camp Medical Officer or his or her designate has my permission to authorize such treatment.

Parent or Guardian _____ (print name) _____ (signature)

Date: _____ Witness: _____

If you do not wish for your child to be treated without your prior consent, please indicate same on the back of this form. If your child should require medical treatment, the Camp Medical Officer, Camp Commandant or officer from your CLB Company will contact you.

In case of emergency, please contact: _____ (Name) _____ (Work Telephone) _____ (Home Telephone)

The CLB

SUMMER CAMP 2009



KIT LIST

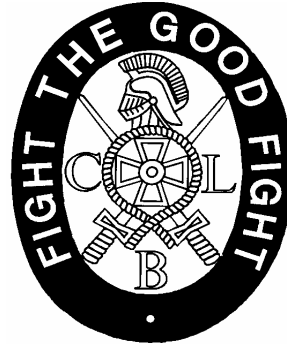
IMPORTANT: Please ensure that your child has all of the items listed in this approved kit list. Please pay particular attention to sufficient clothing for the full week. Labelling of all items with your child's name is recommended. Please use the check list to ensure that no items are overlooked. Also, please do NOT allow your child to bring radios, televisions, pocket knives, fishing poles, air rifles or cell phones.

- _____ complete uniform (**to be worn to and from camp**)
- _____ kit bag
- _____ sleeping bag plus blanket and pillow
- _____ one wire coat hanger
- _____ rain clothes and rubber boots (**very important**)
- _____ sneakers for outdoor/indoor sports
- _____ old sneakers or water shoes for swimming
- _____ gym shirts and shorts/track pants
- _____ adequate socks and underwear
- _____ jeans, track pants and shirts
- _____ warm sweater and jacket
- _____ swim suit (One Piece Only)
- _____ beach towel for swimming
- _____ appropriate sleeping attire
- _____ soap, soap dish, face cloth, towel
- _____ tooth brush, tooth paste
- _____ hair brush or comb
- _____ insect repellent and lotion for fly bites
- _____ sun block lotion
- _____ head wear for sun protection
- _____ required medication
- _____ pocket money for daily canteen (\$25 suggested; \$30 maximum)
- _____ boot/shoe polish and cleaning kit
- _____ personal sports equipment (please label)

NOTE: **NO DRESSES OR SKIRTS WILL BE PERMITTED TO BE WORN IN CAMP;**
ONLY ONE PIECE BATHING SUITS ARE PERMITTED

The CLB

SUMMER CAMP 2009



CAMP USE ONLY:

Arrived in Camp
Yes No

CAMP SERGEANT MAJOR APPLICATION

I hereby make application for the position of Camp Sergeant Major at the following CLB Summer Camp(s) at Mint Brook Camp near Gambo NL:

- 1st JTC Camp July 4 - July 11, 2009
- 2nd JTC Camp July 11 - July 18, 2009
- SC Camp July 18 - July 25, 2009

Please Note: You may apply for more than one camp, but you will not be selected for more than one camp. Camp Commandants will make the final appointments.

FULL NAME: _____ COMMON NAME: _____

RANK: _____ COMPANY: _____

ADDRESS: _____ TELEPHONE: _____

DATE OF BIRTH: _____ MCP #: _____
EXPIRY: (D) _____ (M) _____ (Y) _____

Enter in the spaces below the years in which you have attended previous CLB Camps:

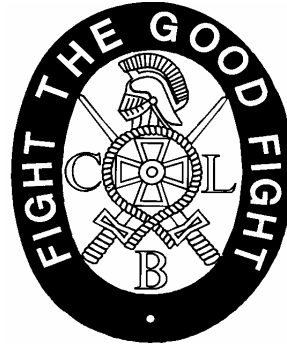
JTC Camper	SC Camper	Work Party	Sergeants' Mess
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature of Applicant: _____ Date: _____

NOTE: The applicant is required to attach a brief summary of his/her CLB experience, an explanation of why he/she should be considered for this important position, and a list of two or more references with telephone numbers.

The CLB

SUMMER CAMP 2009



CAMP USE ONLY:

Arrived in Senior Camp
Yes No

SERGEANTS' MESS APPLICATION - JTC CAMP

I hereby make application for a position with the Sergeants' Mess at the following CLB Summer Camp(s) at Mint Brook Camp near Gambo NL:

- 1st JTC Camp Saturday, July 4, 2009 to Saturday, July 11, 2009
- 2nd JTC Camp Saturday, July 11, 2009 to Saturday, July 18, 2009

Please Note: You may apply for both JTC Camps, but you will not be selected for both. The Camp Commandants will make the selections.

FULL NAME: _____ COMMON NAME: _____

RANK: _____ COMPANY: _____

ADDRESS: _____ TELEPHONE: _____

DATE OF BIRTH: _____ MCP #: _____
EXPIRY: (D) _____ (M) _____ (Y) _____

Enter in the spaces below the years in which you have attended previous CLB Camps:

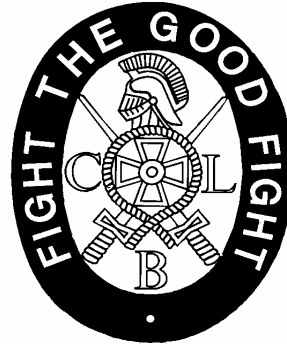
JTC Camper	SC Camper	Work Party	Sergeants' Mess
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature of Applicant: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

The CLB

SUMMER CAMP 2009



CAMP USE ONLY:

Arrived in Senior Camp
Yes No

WORK PARTY APPLICATION

I hereby make application for a position with the Work Party at the following CLB Summer Camp at Mint Brook Camp near Gambo NL:

- 1st JTC Camp Saturday, July 4, 2009 to Saturday, July 11, 2009
- 2nd JTC Camp Saturday, July 11, 2009 to Saturday, July 18, 2009

Please Note: You may apply for both Work Parties, but you will not be selected for both. Selection will be made prior to the two JTC camps due to the Belize Mission occurring at the same time Senior Camp normally takes place. Applicants who do not apply for Senior Camp will not be considered for Work Party.

FULL NAME: _____ COMMON NAME: _____

RANK: _____ COMPANY: _____

ADDRESS: _____ TELEPHONE: _____

DATE OF BIRTH: _____ MCP #: _____
EXPIRY: (D) ____ (M) ____ (Y) ____

If selected for a Work Party, I will perform the duties assigned to me by the Camp Commandant and the camp Work Party Officer to the best of my ability. I hereby declare that I have made application to attend Senior Camp this year and I have attended the following camps in the past (fill in the blanks with the years):

JTC Camper

Senior Camper

Work Party

Signature of Applicant: _____ Date: _____

Signature of Parent or Guardian: _____ Date: _____

The CLB

JTC Summer Camp 2009

Applications Summary

Following is a list of members and officers from _____ Company attending JTC Summer Camp, excluding Work Party & Sergeants' Mess.

NOTE: Please return this form with your cheque.

1st JTC Camp

2nd JTC Camp

	Rank	Name	Paid (X)	Sports Code
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				

Fees Included: _____ Persons X \$165.00 = _____
 Received by Regimental Camping Director _____

Sports codes: 5 = well above average, 4 = above average,
 3 = average, 2 = below average, 1 = well below average

The CLB

Senior Camp 2009

Applications Summary

Following is a list of members and officers from _____ Company attending the Senior Corps Summer Camp.

NOTE: Please return this form with your cheque.

	Rank	Name	Paid (X)	Sports Code	Proficiency (WO or NCO)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Fees Included: _____ Persons X \$165.00 = _____
 Received by Regimental Camping Director _____

Sports codes: 5 = well above average, 4 = above average, 3 = average, 2 = below average, 1 = well below average