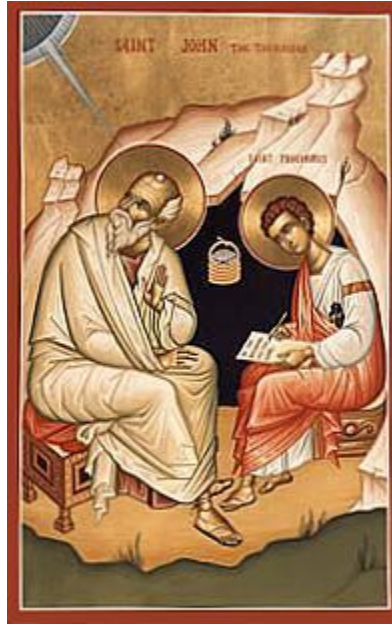


## An Introduction to St. John's Summer Camp



Dear Campers and Parents,

St. John's Summer Camp aims to provide teenagers with a safe, fun, and encouraging experience in a camp setting, interspersed with daily prayers and teachings of the Christian Orthodox Faith, that will offer practical guidance and challenge teens to deepen their spiritual life.

Campers will study the teachings of the Holy Scripture to learn more about living the Christian life in the present age. Using group participation and peer interaction campers will investigate what we believe and why we believe it.

Our camp teacher each year is a nationally recognized youth leader who has the knowledge and experience to communicate the Faith to the future leaders of the Church.

If you have any questions about our camp program please feel free to inquire. You may also find information and photos from previous camps on our web page, which can be found at [www.stjohnalaska.org](http://www.stjohnalaska.org).

Fr. Marc Dunaway

St. John Orthodox Cathedral  
PO Box 771108  
Eagle River, AK 99577  
907-696-2002, 907-696-5555 (fax)

# St. John Summer Camp

A Christian Orthodox Summer Camp for Teens

August 7-12, 2011

Phone: 907-696-2002

Email: [www.stjohnalaska.org](http://www.stjohnalaska.org)

Registrations are due by July 31, 2011

## Camper Instructions

(Please save this page for future reference)

We look forward to another great year at camp. To help with preparation, here are some instructions so you will know what to expect at camp.

**Financial:** Each registration form must be accompanied with a check for \$50.00 made out to St. John Youth Group, which will be a refundable deposit. Checks for the full amount of **\$255** will of course be accepted. The full payment, less the paid deposit, is due by August 5, 2011.

**Medical:** Campers, except for diabetics who receive previous permission, will not be allowed to have any medications in their possession. Our camp provides a nurse to help with first aid and emergencies. **To facilitate emergency medical treatment please enclose with the registration form a photocopy of both sides of your medical insurance card.**

**Transportation:** We will travel from St. John Orthodox Cathedral in Eagle River to the North Star Bible Camp in Willow by a chartered bus, which is included in the camp cost. We will meet at St. John Orthodox Cathedral on Sunday, August 7 at 4:30 pm and depart at 5:00 pm. We will return to Chugiak Senior Center no later than 8:00 pm on Friday, August 12.

**Registration Forms:** All forms are due by July 31, 2011. Please mail forms to the following address:

**St. John Orthodox Cathedral  
Summer Camp  
PO Box 771108  
Eagle River, AK 99577**

**Visitors:** Visitors are not normally allowed at camp, as this is very disruptive and costly.

**Spending money:** The \$255 covers all camp costs. There is a snack shop, which will be open every day, and campers will need to bring their own money for the snack shop.

**Phone calls:** There are no phones available for the campers. In an emergency the campers will be able to use a staff cell phone. If parents need to contact their campers, they can call 907-495-6378.

**Dress code:** While camping is by nature an informal affair, Christian modesty should be taken into account when packing for camp. Inappropriate attire such as two-piece swimsuits, short shorts or skimpy tops (any tops showing midriff) should not be worn. Some girls choose to wear T-shirts over their swimsuits rather than buy a new one. We also look our informal best for services and while traveling.

Should campers dress inappropriately, they will be asked to return to their cabin and change clothing.

**Laundry:** There are no laundry facilities at camp.

**Emergencies:** If you must contact the North Star camp in an emergency call: 907-495-6378.

**Talent Show:** One evening we hold a talent show. Campers may bring things with them if they want to use them in the talent show.

**Conduct:** All campers are expected to behave in ways appropriate to Christian lifestyles. While necessary disciplinary action will be taken at camp to resolve problems on site, the camp staff will also reserve the right to dismiss campers for gross violations or camp rules, especially for endangering themselves or others. Parents will be responsible for transporting dismissed campers.

## Packing Checklist

### What to bring:

Clothing for five days and nights.  
Modest swimwear. (One-piece suits for girls, no Speedo's for boys).  
Rain gear.  
Sweaters, cool weather clothes.  
Sleeping bag, pillow.  
Towels, toiletries, personal care items.  
Bible, pen.  
Flashlight.  
Camera.  
Spending money for snack shop.  
Insect repellent.  
Ideas and appropriate plans for the talent show.  
All your questions about the Christian Faith and life.  
Prepare for the Bible Bowl by studying the Gospel of Matthew according to the Orthodox Study Bible (or the New King James Version).

### What not to bring:

Any electronic devices, no electronic games, hand held games, music devices, cell phones, alarm clocks, computers, beepers or entertainment makers.  
Valuable jewelry.  
Pets.  
Illegal substances, marijuana, tobacco, alcohol and drugs.  
A bad attitude.



## Consent for Emergency Medical or Surgical Care

This authorizes Camp Director or Camp Nurse to give permission to appropriate medical or hospital personnel to provide emergency paramedic transport and medical or surgical care for my child.

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

Date of Birth: \_\_\_\_\_ Parent Phone: (hm) \_\_\_\_\_ (wk) \_\_\_\_\_

I understand that every effort will be made to contact me, my campers other parent, or legal guardian as soon as possible. I understand my obligation to keep myself available by phone. I will assume the cost of necessary transportation and medical or surgical care.

My child has the following allergies to medications:

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

My child has the following allergies to food:

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

My child takes the following medication on a regular basis:

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

Our family physician is: \_\_\_\_\_

Phone: \_\_\_\_\_

We have the following medical insurance: Carrier: \_\_\_\_\_

Policy or group #: \_\_\_\_\_

I have enclosed a photocopy of both sides of my medical insurance card.

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Signature of parent/guardian: \_\_\_\_\_

Date: \_\_\_\_\_