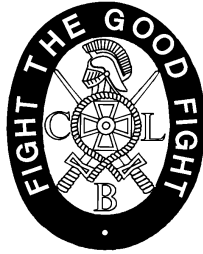


# CLB Summer Camp Program

2016



## Applications Package

*Please find enclosed the following documents:*

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

# The CLB

## Summer Camps 2016

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March, 2016

To: All Company Commanders

The forms necessary for application to Summer Camps 2016 are attached. Please print as many copies of the applicable pages as needed for your Company. Rather than asking who wants a camp application form, maybe consider giving copies to all JTC's, Seniors and all officers so they can take it home to read and think about coming with us this year? Don't forget a copy of the Parents' letter. Please return all **completed forms and full fees** to the Regimental Camping Director, Lt. Jamie Peddle, **by no later than April 30, 2016**, at 274 Pouch Cove Highway, Flatrock, NL, A1K 1C9. **Please note that it is imperative that forms be submitted at this time as NO APPLICATIONS WILL BE ACCEPTED after this date. If fees cannot be provided, along with the applications, by this date please inform Lt. Jamie Peddle. The final deadline for fees will be June 15, 2016.**

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, 2015 will not be permitted to attend.
2. All applications, including Health and Medical 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 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.
4. **All applications for campers and staff must be submitted by no later than April 30, 2016. All fees must be paid in full by no later than June 15, 2016.** This year's fees will be increasing by \$10.00, for a total of **\$190.00 per person.** 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. Please help us do our planning by forwarding all applications on time.
5. **Please complete the two summary sheets by listing all members of your company planning to attend SC and JTC Camps.** 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 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 work party, will take place during Senior Camp.
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 (\$30 recommended, \$35 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. Notice is also given that cell phones are not permitted to be used in camp.
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. This year, any officer who is unable to attend camp as a member of staff for the full week may be permitted to attend for a minimum of three days and two nights.
16. The telephone number for Mint Brook is 674-9900.

For additional information or clarification, contact the undersigned at email: [jpeddle77@hotmail.com](mailto:jpeddle77@hotmail.com) or phone (709) 728-6024 (cell) after 5pm or anytime on weekends.

Looking forward to another great Summer Camp Program! Why not come along and join us!

Lt. Jamie Peddle  
Regimental Camping Director



# The CLB

## Summer Camps 2016

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March, 2016

Dear Parents:

Your child has the opportunity to go to camp this summer!

We'd like you to consider this unique opportunity. It is a week-long camp at the Anglican Church's Mint Brook facility near Gambo. It is run under the guidelines of the CLB and is a secure place, with guaranteed supervision and full of planned activities for your child.

Tim Horton's does such a great job of promoting summer camps. One of their posters says...

**Teamwork, Leadership, Confidence...**  
**You'd be amazed at some of the things a kid can bring home from camp!**

And our camps are no exception! Some of our officers best loved memories are from attending CLB camps as a child. Some of our programs include Archery, Canoeing, Swimming, Band, Air Rifles, Crafts, Sports, Boating, Orienteering, Map & Compass, Wilderness Survival, Hiking, Leadership, Fire Fighting, Knot Tying, Basic Rescue, etc, etc. Not to mention the comradery of friends - new and old, nutritious meals, fun snacks and lots of games. Please check out our website: [www.theclb.ca](http://www.theclb.ca) for some camp pictures.

This year's camps are:

- July 2-9 for Senior Corp members
- July 9-16 for JTC members

The cost is \$190.00 for the week, which covers transportation, meals and camp supplies. We suggest you supply a \$30.00 - \$35.00 canteen allowance. The complete kit list is attached, along with a camp application form and medical questionnaire. We have qualified medical staff and caring adult volunteers.

If you decide to have your child attend, please return the forms back to your CLB Company by no later than April 23, 2016, to allow us enough time to do adequate planning. Once you've submitted your application, you'll get a call about a week before camp with times and places for drop off and pick up. We do not encourage parents to visit during the week of camp, because experience has taught us it can sometimes cause homesickness. We will contact you should the need arise. But, for emergency, you can contact your Company Commander.

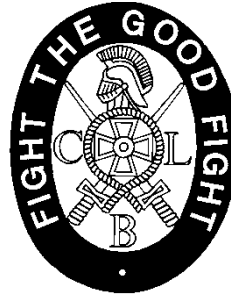
So, what do you say? Why not discuss this with your child and encourage him or her (or them?) to come along? You might be surprised to see what it could mean to them! If you have any questions, please feel free to discuss them with your child's section leader, or your Company Commander, or the undersigned Camping Director - at email: [jpeddle77@hotmail.com](mailto:jpeddle77@hotmail.com) or phone (709) 728 - 6024 after 5:00 or anytime on weekends.

Looking forward to another great Summer Camp Program!

Lt. Jamie Peddle  
Regimental Camping Director

# The CLB

## SUMMER CAMP 2016



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CAMP USE ONLY:

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ARRIVED IN CAMP  
\_\_ Yes \_\_ No

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### CAMP APPLICATION

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

- Senior Camp** Saturday, July 2, 2016 to Saturday, July 9, 2016
- JTC Camp** Saturday, July 9, 2016 to Saturday, July 16, 2016

FULL NAME: \_\_\_\_\_ MALE\_FEMALE\_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 NCO's 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, boating, 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 to participate in all camp activities. I also 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 2016

### Health Record

CAMP USE ONLY:

ARRIVED IN CAMP

Yes  No

FULL NAME: \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_ MCP \_\_\_\_\_

EXPIRY: (D) \_\_\_\_\_ (M) \_\_\_\_\_ (Y) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ 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 and Section A of the Medical Record Form at the end of the Application must be completed.)

Should Camp Staff be aware of any behavioural issues concerning your child?  Yes  No

(If yes, please complete Section B of the Medical Record at the end of the Application).

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, Lt. Jamie Peddle, by email at [jpeddle77@hotmail.com](mailto:jpeddle77@hotmail.com) or (709) 728 - 6024 (C) after 5:00pm or anytime on weekends.

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: \_\_\_\_\_

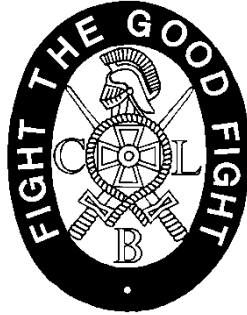
If you do not wish for your child to be treated without your prior consent, please indicate same on the back of this form. If your child should require medical treatment, the Camp Medical Officer, Camp Commandant or officer from your CLB Company will contact you.

In case of emergency, please contact:

_____	_____	_____
(Name)	(Work Telephone)	(Home Telephone)



# The CLB



## SUMMER CAMP 2016

### 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
- \_\_\_\_\_ one red t-shirt
- \_\_\_\_\_ warm sweater and jacket
- \_\_\_\_\_ swim suit (One Piece Only)
- \_\_\_\_\_ beach towel for swimming
- \_\_\_\_\_ appropriate sleeping attire
- \_\_\_\_\_ flashlight
- \_\_\_\_\_ soap, soap dish, face cloth, towel, shampoo
- \_\_\_\_\_ tooth brush, tooth paste
- \_\_\_\_\_ hair brush or comb
- \_\_\_\_\_ insect repellent and lotion for fly bites
- \_\_\_\_\_ sun block lotion
- \_\_\_\_\_ head wear for sun protection, water bottle
- \_\_\_\_\_ required medication
- \_\_\_\_\_ pocket money for daily canteen (\$30 suggested; \$35 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. No cell phones permitted in camp.**

# The CLB

## SUMMER CAMP 2016



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:

- SC Camp**                      July 2 - July 9, 2016
- JTC Camp**                     July 9 - July 16, 2016

*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: \_\_\_\_\_ MALE\_\_ FEMALE\_\_ 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



CAMP USE ONLY:

Arrived in Senior Camp  
Yes No

## SUMMER CAMP 2016

### 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:

- Senior Camp                      Saturday, July 2, 2016 to Saturday, July 9, 2016
- JTC Camp                              Saturday, July 9, 2016 to Saturday, July 16, 2016

*Please Note:* The Camp Commandant will make the selections.

FULL NAME: \_\_\_\_\_ MALE\_\_ FEMALE\_\_ 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



CAMP USE ONLY:

Arrived in Senior Camp  
Yes No

## SUMMER CAMP 2016

### 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:

JTC Camp                      Saturday, July 9, 2016 to Saturday, July 16, 2016

*Please Note: Selection will be made at the Senior Camp. Applicants who do not apply for Senior Camp will not be considered for Work Party. You will only be chosen for the camp in which you are needed.*

FULL NAME: \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_ 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: \_\_\_\_\_







