

Camp San Joaquin  
A Christian Summer Camp for Youth

**Camper Application**

Check which session camper will be attending:

- Youth Camp (grades 4-8) July 24-27, 2011 ..... Cost \$150
- High School Camp (grades 9-12) July 31-August 4, 2011 ..... Cost \$200

Name of Camper

Male  
 Female

Street Address

City, State and ZIP Code

Date of Birth

Age

Grade (just completed)

Parent/Guardian ( ) Home Telephone Number

Parent/Guardian's Email Address ( ) Work or Cell Telephone Number

Name of Camper's Church

**Camper Statement:** I will abide by all camp rules and participate fully in the camp program, including assisting with camp duties. I understand that violations of camp rules may lead to the suspension of privileges or dismissal from camp.

Signature of Camper Date

Camp San Joaquin  
A Christian Summer Camp for Youth

**Parental Permission and Release**

I give permission for my child to attend Camp San Joaquin. I understand that my child is expected to abide by camp rules and participate fully in the camp program, including physical activities, Bible studies and worship services. I understand that the physical activities that occur at Camp San Joaquin include, but are not limited to, swimming, biking, archery, volleyball, basketball, horseshoe-throwing, and other strenuous or competitive games.

I give permission for my child to be transported for special day trips by vehicles authorized by the camp, and in the event of an emergency to be transported to a medical facility for treatment. I understand that Camp San Joaquin's insurance is secondary to my own or that of my child.

I, on behalf of my child, agree to release and hold harmless Camp San Joaquin, Inc., its Board of Directors, employees and agents, for any and all claims for injuries, or liability related to my child's participation in any activity occurring at Camp San Joaquin. This release does not apply to any willful acts of misconduct by Camp San Joaquin staff, Board members, employees and agents.

By signing this document, I acknowledge that if anyone is hurt, or any personal property damaged, during my child's participation in these activities, I may be found by a court of law to have waived any right to maintain a lawsuit against Camp San Joaquin, on the basis of any claim which has been released herein.

Signature of Parent/Guardian Date

Printed name of Parent/Guardian

Relationship to Camper

Camp San Joaquin  
A Christian Summer Camp for Youth

**Camper Health Form**  
To be completed by Parent or Guardian

Name of Camper
----------------

Date of Birth
mm / dd / yyyy

List any allergies your child has, including allergies to medications: \_\_\_\_\_

Has your child ever been stung by a bee? \_\_\_\_\_ Date of last tetanus booster? \_\_\_\_\_

List any dietary restrictions your child has: \_\_\_\_\_

List any illness your child has had in the past two months: \_\_\_\_\_

List any medications, including over-the-counter medications, that will be sent with your child: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

Medical Insurance and policy number: \_\_\_\_\_  
(Please attach copy of insurance card, front & back.)

I hereby authorize any necessary medical, surgical, or hospital care for the above camper, as determined by the Camp Nurse or Urgent Care physician or Emergency Care physician. I also give permission for my child to receive over-the-counter medicines, as listed on the health form, from the Camp Nurse. To the best of my knowledge my child is in good health and can participate in the camp program.

This document may be relied upon by any licensed physician, surgeon, dentist or appropriate hospital representative in accordance with Section 6910 of the Family Code of California. I authorize any hospital which has treated the above named minor to surrender physical custody of the minor to Camp San Joaquin staff. This authorization conforms to Section 1283 of the Health and Safety Code of California.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

Camp San Joaquin  
A Christian Summer Camp for Youth

**Camper Information**

Camp San Joaquin is located within Sequoia National Forest, at 64949 Generals Highway. The telephone number at camp (after June 10) is 559-565-3511. The website is [www.campsanjoaquin.com](http://www.campsanjoaquin.com)

The camp is located in the High Sierras at an altitude of 7,000 feet. It is cool most of the summer – even when temperatures in the Valley soar to over 100 degrees. So, warm bedding is needed – a sleeping bag is nice, but some sheets and at least two blankets will work. And bring a pillow! Sweaters and jackets are necessary in the evenings. But you will also want to bring light shirts and shorts for the warm afternoons.

Besides warm bedding and clothing, here are some things you may want to bring:

- ✓ sunglasses and sunscreen
- ✓ camera and flashlight
- ✓ swimsuit for the pool and waterfall
- ✓ toothbrush, toothpaste, comb, hairbrush, soap
- ✓ pajamas
- ✓ a good book

Here are some things that you *should NOT* bring:

- candy, food or drink – attracts wildlife into the cabins
- weapons or toy weapons
- alcohol or any other drugs (except authorized medicines)
- radios, disc or mp3 players, electronic games, laptop computers, video players, etc.

**Applications should be completed, signed and sent with full payment to:**

Camp San Joaquin Office  
120 North Hall Street  
Visalia, CA 93291  
559-732-4821