



Dear Parents/Guardians,

Thanks for placing your trust in us by sending your child to Camp Johnsonburg. We are looking forward to having your camper with us this summer and we hope to offer a fun and meaningful experience for them that reinforces the values of home and church, while keeping them safe. Enclosed in this confirmation packet you should find all the information you need to help prepare for your child's time at camp, including several forms for you to complete. After looking it over, if you have any questions, please do not hesitate to be in touch with us.

### Health Forms

**Law requires that each camper have a signed health form on file, and without it, we cannot register your child.** In addition to providing necessary health information, this form also serves as permission to treat and a general release. Please bring your completed form with you on registration day. If you choose to mail your form in ahead of time, we recommend making a copy and bringing it with you. Please note that every camper must have had a physical within 24 months of their camp session. If you wish to use this year's physical for next year, please make a copy of the health form and save it, as we are unable to access previous year's health forms.

### Outstanding Balances

**We ask that all balances be paid in full by June 1.** When paying by check, please write the camper's name and event number on the check. If a check covers several campers, please provide all names with appropriate event numbers and the amounts to be credited to each camper (use a separate piece of paper if the information will not fit on the check). Make checks payable to Johnsonburg Presbyterian Center, and send to: Registrar, Presbyterian Camp, P.O. Box 475, Johnsonburg, NJ 07846. **SPECIAL NOTE:** If the balance is being paid via a campership from your church, our registrar **MUST** have a completed and signed Church Reimbursement Acknowledgement Form in possession or you will be responsible for the **FULL BALANCE** at the time of registration. Please be prepared for this. If this is a problem or concern, please contact the registrar no later than the Wednesday immediately prior to your child's scheduled registration date. Thank you for your help and understanding with this new process.

### Canteen (Camp Store)

For your convenience you may send us your child's canteen spending money prior to June 1st by adding this amount to any balance due. Spending money will be accepted on registration day, but registration will go quicker if you send it in. The canteen is open Sunday during registration and Saturday during pick-up.

### Registration

Please note that **registration for your child's week of camp is on Sunday afternoons from 2 - 3 p.m. and pick-up will be on Saturday mornings from 9 - 10 a.m.** The only exceptions are for three-day Genesis and Discovery Events. Genesis I and Discovery I events begin Sunday at 2 - 3 p.m., but end Wednesday from 9 - 10 a.m. Genesis II and Discovery II events begin Wednesday from 2-3 p.m., and end Saturday at 9 - 10 a.m. **Please call us if you will be late for either drop off or pick-up.**

Upon arriving on registration day, Johnsonburg staff will direct you to the parking area. Please leave baggage in your car and bring your child's health form, any medication, and canteen money, if applicable, to the registration area in the recreation center. At registration you will:

- get screened for lice\*
  - meet an Age Group Director, who will tell you which camping unit your child is in, who their counselors are, and answer any questions you may have.
  - turn in any money for the canteen (camp store)
  - see one of our Health Center staff who will receive and review your child's health form, take a copy of your insurance card (bring one with you to save time), and conduct a brief medical screening.
- Please Note: there is a separate registration line for campers who have medication to turn in.**

\*Be Aware: A change for this year will be lice screening for ALL campers at registration.

**Campers with active lice or nits will not be allowed to stay at camp.** Please check your child before coming, so we avoid any unpleasant situations.

After leaving the registration area, return to your car and deposit the baggage at the appropriate sign in the meadow where you are parked. We will bring your child's baggage to the unit; however we encourage you to carry sleeping bags, pillows, fishing poles, teddy bears, etc that are easily portable or personally valuable when you bring your child to their unit. Children and parents will then go to the units to meet counselors. Parents are asked to say good-bye to their children at the unit.

### Medications

**By law, all medication, even over the counter items, needs to be turned in to the health center.** In addition, medication must be in the original containers (including inhalers). Campers cannot hold medications. They will receive medication from the nurse at meal times or at the Health Center. This policy applies to vitamins, any drug which can be bought over the counter, or drugs prescribed by a doctor (except inhalers). Please do not send vitamins unless prescribed for certain deficiencies. If you bring medication to camp, please fill out the page, "If Camper is Bringing Medication" and bring it and the medication with you when you register your child.

As noted above, **there is a separate registration line for campers who have medication to turn in.** Please be aware this line typically moves a bit slower than the other lines. This is because each camper and their family will visit with a camp nurse so we can make sure we are clear about the medical needs of your child. We appreciate your patience! To help things move faster, please:

- have medication forms filled out ahead of time for each medication that needs to be turned in
- avoid turning in over the counter items that we stock in the health center (Caladryl, Tylenol, Benadryl, etc). If you're not sure if we stock a particular item, please call ahead.

### What to Bring to Camp

**Clothing:** (please label each item with the camper's name)

- 5 – 6 pairs of shorts
- 2 pairs of full-length pants or jeans
- Underwear and socks for a week
- Short and long sleeved shirts
- Hiking or other sturdy shoes, if you have them
- Sneakers or other **closed-toe** shoes
- Please Note: For safety reasons, campers are not allowed to wear flip-flops** or other open-toed shoes and sandals at camp, with the exception of in the shower area of the bath-houses.
- Sweater/sweatshirt and jacket
- Raincoat and boots

- Pajamas or other suitable sleepwear
- Bathing suit and beach towel (goggles if wanted)

**Bedding** (All campers will have a cot and mattress)

- Sleeping bag or 2-3 warm blankets and sheets.
- Pillow and pillowcase (if desired)

**Toiletries:** Soap in a container, washcloths and bath towels, toothbrush, toothpaste, comb & brush, sanitary supplies

**Other Items:** Bible, flashlight & batteries, insect repellent, sunscreen, laundry bag, pencils, pens, stationery, and stamps. (These items are also at the camp store.)

**Optional:** Water bottle, fishing equipment, camera, guitar, pocket knife (for Jr/Sr Highs - knives will be kept in a central location. Elementaries & Juniors may not bring knives.)

**Please Do Not Bring:** MP3 players, video games, or other electronic or expensive items. **Cell phones are not allowed (see below).** In addition, **no food should be brought or sent to camp.** Because we will be camping in the woods and do not want to attract wildlife (raccoons, etc.) food will be taken & returned at the end of the week before you go home.

**Note:** **Drugs, liquor, and tobacco products are prohibited by the Camp Board.** Anyone found possessing these substances will be asked to leave the program without refund. Those with illegal substances are liable under the penalties of law.

**Contacting Your Camper at Camp**

We realize that having your child away from home for an extended period of time can be difficult for everyone, especially when it is their first time away. That being said, we discourage direct contact between parents and children during the child's time at camp, either through visits or phone calls. Camp allows children a chance to grow in their independence and self-confidence. **For this reason, we ask that you NOT leave a cell phone with your camper.** Having a cell phone readily available to call home doesn't allow campers the independence to solve problems and handle situations on their own. Encourage your child to talk with his/her counselor if they are having a problem. If the situation persists, one of our directors will be brought in to the situation. If necessary you will be contacted at that point. We will never prevent a parent from speaking to their children, but we truly believe it's in the best interests of all involved, especially the camper, to give them the opportunity to work through the issues that arise when they are away from home. If there is an emergency, we'll contact you immediately.

We do encourage mailing and emailing (see the link on our website: [www.campjburg.org](http://www.campjburg.org)) your campers while they are at Johnsonburg. When writing to your campers, please keep the messages positive and upbeat. **At this time, we do not have the capability of having campers respond to emails.**

**Refund Policy**

If cancellations are made four weeks before the beginning date of the camp event, a full refund, less \$25 for administrative costs, will be made. Late cancellation or failure to show will result in forfeiture of the full camp fee. Refund requests for medical reasons must be received with a written statement from your physician and can result in a refund of up to half the fee.

### **Special Dietary Needs**

If your camper has special dietary needs (allergies, vegetarian/vegan, etc.) please contact the camp ahead of time so we can plan accordingly. We can typically deal with most food issues, but in some cases it may be necessary to send some food along with your camper. As a rule, campers are expected to try the meals that are served. Our counselors are trained to keep an eye on campers to make sure they are eating, and we will contact you if there are concerns.

### **Gratuities**

Please aware that our staff are not allowed to accept gratuities. If you would like to show your appreciation for any of our staff, please consider making a contribution to the camp scholarship fund.

### **Bible Study/Curriculum**

Each summer we have a Biblically-based curriculum that allows campers the opportunity to grow in their faith. Camp Johnsonburg is not interested in indoctrinating campers or forcing any particular beliefs. Rather, we hope to create a safe environment where campers can feel comfortable discussing faith-related matters. Campers are invited to participate at the level they are comfortable.

### **Directions to Camp (Please save for your trip to camp)**

**From Rt. 80:** Exit at Allamuchy (Andover, Hackettstown-Exit 19). At end of the exit ramp bear right of the median strip, Andover Lane. At yield, cross Rt. 517 and go down the road directly across from you, into the town of Allamuchy. At the base of the hill is the Allamuchy General Store. Turn left before the store and follow Rt. 612 for five miles to a Stop sign. At the Stop sign turn left onto Rt. 519; go one mile to the camp entrance and sign on your left.

**From Rt. 206:** Exit onto Rt. 80 and go West to exit 19 and follow the above directions.

**From Rt. 31:** At the end of Rt. 31, turn left onto Rt. 46 West. Then turn right at the first traffic light one mile later onto Rt. 519. Follow Rt. 519 for 6 miles. Then turn right at blinker light in Hope, New Jersey. Stay on Rt. 519 for 5 miles to the camp entrance on your right.

**From the Shore:** Follow the Garden State Parkway North to Rt. 287. Take Rt. 287 to Rt. 206, then to Rt. 80, then West on Rt. 80 to exit 19 and follow the above directions from Rt. 80.

**For Mapquest Users:** Enter the address as 822 Route 519, Blairstown, New Jersey 07825

**For GPS Users:** Enter the town as Frelinghuysen Township, then enter the address as 822 Hope-Johnsonburg Road.

Camper Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

Event Number (s): \_\_\_\_\_ Week(s) attending camp: \_\_\_\_\_

## LET'S GET ACQUAINTED

**Please complete and send to camp before camp begins.**

### Part I: To be completed by campers:

1. I am attending Camp Johnsonburg because I like: (Examples: to meet friends, to swim, to sing, to hang out with cool counselors)

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2. The things I want to be sure to do at camp this summer are:

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3. At home I like to: (Example: Read, watch TV, play guitar, etc.)

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4. I attend church: Weekly \_\_\_\_\_ Often \_\_\_\_\_ Occasionally \_\_\_\_\_ Never \_\_\_\_\_

5. My favorite sport to play or watch is: (Examples: Soccer, basketball, baseball)

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6. I am involved in the following clubs or organizations (Examples: Boy/Girl Scouts, chess club, etc.)

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7. My best friend's name is: \_\_\_\_\_ We have been friends for \_\_\_\_\_ years.

I like my best friend because she/he is \_\_\_\_\_

8. The thing I am most proud of in the past year is: \_\_\_\_\_

9. While at camp I agree to abide by the camp's policies, standards and expectations, including not possessing or using drugs, alcohol, and/or tobacco; obeying counselors; and to refrain from any threatening/defiant behavior.

**Camper's signature** \_\_\_\_\_ **Date signed** \_\_\_\_\_

**MAIL TO:** Registrar/Presbyterian Camp, P.O. Box 475, Johnsonburg, NJ 07846

**Part II: To be completed by parent or guardian:**

Please take a moment to share with us, in advance of your child's arrival, anything you believe might help us provide a richer experience for your child, including: (1) your personal expectations for camper improvement (e.g., wanting child to assume more responsibility for personal hygiene); (2) any family or school issues that may be on the child's mind (e.g. grandmother in the hospital); or (3) special emotional circumstances (e.g. bedwetting; ADHD, anorexia). Any information you share with us will be handled with the utmost sensitivity, strictly for the benefit of your child.

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Camp Johnsonburg strives to be an accepting and non-judgmental community, sensitive to the individual needs and special circumstances of each camper. As we work together to continue to achieve these ends each summer, we ask that you talk with your child before camp about your expectations for appropriate behavior. We also ask you to reiterate the camp's expectations regarding listening to and obeying staff, demonstrating a cooperative spirit, and refraining from the use of drugs, alcohol, or tobacco. Thank you for being partners with us as we work together to provide a positive, life-affirming experience of Christian community for your child.



Camper Name: \_\_\_\_\_

**IMMUNIZATION HISTORY (month and year)**

Diphtheria, Tetanus, Pertussis (DTaP or TdaP) 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
4. \_\_\_\_\_ 5. \_\_\_\_\_

Most recent Tetanus booster (dT or TdaP) \_\_\_\_\_

Polio (IPV) 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

Measles, Mumps, Rubella (MMR) \_\_\_\_\_

Hepatitis B Series 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Haemophilus Influenzae B (HIB) \_\_\_\_\_

Other: Pneumococcal (PCV), Hepatitis A, Varicella (chicken pox), Meningococcal meningitis \_\_\_\_\_

**TO BE COMPLETED BY A LICENSED PHYSICIAN:**

Date Examined (must be within two years of week attending camp): \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_

Most recent TB test (not required, list date): \_\_\_\_\_

The applicant is under care of a physician for the following condition(s): \_\_\_\_\_

Current Medication (s): \_\_\_\_\_

Allergies to (food, drugs, plants, insects, etc.): \_\_\_\_\_

Dietary restrictions: \_\_\_\_\_

Activity restrictions: \_\_\_\_\_

Medical, Emotional, and Social Health History: \_\_\_\_\_

**Licensed physician's signature:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone number:** \_\_\_\_\_

**Date of form completion:** \_\_\_\_\_ **\*by:** \_\_\_\_\_

\*If completed by nurse or physician's assistant

**For Camp Use Only**

**Screening Record**

Date Screened \_\_\_\_\_ Time \_\_\_\_\_

Meds received \_\_\_\_\_

Updates/additions to health history noted \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ None required

Current health needs identified \_\_\_\_\_

Observational notes \_\_\_\_\_

Screened by \_\_\_\_\_

**A PHYSICAL IS REQUIRED EVERY 2 YEARS. IF YOU WANT TO USE THIS PHYSICAL FOR NEXT YEAR, PLEASE MAKE A COPY AND KEEP IT FOR NEXT SUMMER. WE DO NOT KEEP FORMS FROM YEAR TO YEAR.**

**IF CAMPER IS BRINGING MEDICATION TO JOHNSONBURG**

Dear Parent/Guardian,

**As mentioned earlier, by law, all medication that your child will use at camp must be turned in upon registration at camp to the health center staff. This includes vitamins and all over the counter medication.**

Further, each medication must be in the original pharmacy container and must be labeled with the camper's name, the name of the medication, the dosage, and the physician's name. (This includes inhalers or any doctor prescribed medication).

To expedite your check-in on registration day, please complete a form below **for each individual medication**, and bring the forms with you to camp. You'll hand them in to the nurse when you register, along with your medications. If you forget these forms, you can obtain them at registration.

**Please know that the health center is equipped with most over the counter medications your child may need, so in most cases you can leave it at home and expedite the registration process. Please call us if you're not sure.**

Presbyterian Camp at Johnsonburg  
Medication Registration  
(for one prescription)

Presbyterian Camp at Johnsonburg  
Medication Registration  
(for one prescription)

Camper's name: \_\_\_\_\_  
Camper's age: \_\_\_\_\_  
Grade completed: \_\_\_\_\_  
Doctor's name: \_\_\_\_\_  
Diagnosis: \_\_\_\_\_  
Medication: \_\_\_\_\_  
Dosage: \_\_\_\_\_  
Time to be given: \_\_\_\_\_  
Parent/Guardian Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Camper's name: \_\_\_\_\_  
Camper's age: \_\_\_\_\_  
Grade completed: \_\_\_\_\_  
Doctor's name: \_\_\_\_\_  
Diagnosis: \_\_\_\_\_  
Medication: \_\_\_\_\_  
Dosage: \_\_\_\_\_  
Time to be given: \_\_\_\_\_  
Parent/Guardian Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Camper's name: \_\_\_\_\_  
Camper's age: \_\_\_\_\_  
Grade completed: \_\_\_\_\_  
Doctor's name: \_\_\_\_\_  
Diagnosis: \_\_\_\_\_  
Medication: \_\_\_\_\_  
Dosage: \_\_\_\_\_  
Time to be given: \_\_\_\_\_  
Parent/Guardian Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

Camper's name: \_\_\_\_\_  
Camper's age: \_\_\_\_\_  
Grade completed: \_\_\_\_\_  
Doctor's name: \_\_\_\_\_  
Diagnosis: \_\_\_\_\_  
Medication: \_\_\_\_\_  
Dosage: \_\_\_\_\_  
Time to be given: \_\_\_\_\_  
Parent/Guardian Signature: \_\_\_\_\_  
Date: \_\_\_\_\_



Dear Parents, Guardians, Campers, and Friends,

At Camp Johnsonburg, we are always looking for ways to better equip young people with the tools they need to deepen their faith, build upon their personal uniqueness, form and strengthen relationships, and meet the challenges of the future with hope and resilience.

Underlying the fun of camp is our passion for safety. To provide a rich and safe experience, our staff are screened for responsibility, trained for a week before campers arrive, and supervised twenty-four hours a day. Over our history, we also have learned that equally important to creating a safe community is our partnership with parents. To this end, we ask that you share the following observations with your camper.

### **Mosquitoes and other flying bugs**

We encourage all campers to bring with them an insect repellent for use during the day on hikes or other extended outdoor programs. We also will have bug repellent in each unit. We will continue to do our part here to control the mosquito population by treating areas of standing water and scheduling to have the Warren County Mosquito Commission spray the campsite as needed in the summer.

### **Other occasional critters in residence**

As New Jersey has become more populated, larger mammals like raccoons and bears have reestablished themselves in the more remote areas of the state like the Johnsonburg area. We have seen raccoons and the occasional black bear en route to and from a garbage can or dumpster in search of food. In these cases, the animals remain well clear of campers, tents, and cabins, and their presence seems to diminish with the increased tempo of summer camp. However, if campers keep food or even substances that smell like food (e.g., soap or toothpaste) in their cabins or tents, the chance exists that the scent can summon a wild animal. In fact, we have stopped doing cookouts in camper units to make sure animals are not attracted to these areas. We will still do cookouts, but they will take place at more centrally located fire circles, away from living areas.

To create an extra margin of safety, we ask your help to ensure that your child ***brings no food(including candy) to camp and that you send them no food while they are at camp.*** We will serve plenty. In those cases where we discover that a camper has food in a cabin or tent, we will keep it away from the living areas until the end of their stay.

### **Small but stubborn critters**

Dog ticks and deer ticks have lived with us at Johnsonburg for years and have not been a problem. With the increase in Lyme disease, however, we ask you to reinforce with your camper the need to wear long sleeves and pants on hikes, and we will check each other for ticks at intervals during the day.

### **Sunshine**

Your child will spend most of the day outdoors. To protect campers from exposure to the sun, please send you child with a sunscreen of SPF 15 or higher. We stock it in each unit area, but we recommend that each child have his own supply.

### Human critters

Camp Johnsonburg has always been, and we will continue to ensure that it is, a safe environment where people's humanity is reaffirmed, not denied. Our style is to encourage healthy communication among campers and between campers and staff. Still, we ask that you join with us in a few specific ways:

- By talking with your camper about the necessity of raising with his/her counselor any needs or anything the camper finds uncomfortable. Typically this is something as simple as “when will we be going by a bathroom.” But not sharing these feelings can result in a more difficult initial adjustment. Our staff is trained to listen and be responsive.
- By being involved in packing your child's belongings before you leave home, and being alert to the presence of items that are inconsistent with a week of safe, summer camp fun -- things like drugs, alcohol, cigarettes, chewing tobacco, firecrackers, firearms, and knives other than pocket knives. We have not had a problem with campers bringing inappropriate items to camp, but we wanted to take an extra measure of precaution.

We very much look forward to having your child with us for a wonderful time this summer. If you have any questions, please call us.

Sincerely,

Harry

Harry Zweckbronner  
Program Director

# Church Reimbursement Acknowledgement Form

**Parents:** Please use this form for camp scholarships awarded by your church. Please have the responsible person at your church complete and sign this form and return it to:

Johnsonburg Presbyterian Center  
P. O. Box 475  
Johnsonburg, NJ 07846  
Phone: 908-852-2349, Fax: 908-852-0045  
Email: wendy@campjburg.org

**Please Note:** If this form is not completed and returned to the camp prior to the start of your child's session, the parent/guardian will be responsible for any camp balance, which may be the full balance, at the time of registration.

## Camper Information

To be completed by camper parents/guardians:

Name of Camper \_\_\_\_\_  
Name of Camper's Parents/Guardians \_\_\_\_\_  
Address \_\_\_\_\_  
Home Phone # \_\_\_\_\_ Parent/Guardian Cell Phone # \_\_\_\_\_  
Parent/Guardian email: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

By signing this form, parent/guardian will be responsible for any camp balance not covered by scholarship.

## Church Information

To be completed by church representative:

Church Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone # \_\_\_\_\_  
Church email: \_\_\_\_\_ Church Code # \_\_\_\_\_

Amount of camp scholarship awarded by the church \$ \_\_\_\_\_

## Person authorizing campership monies for campers

Print Name: \_\_\_\_\_ Position at Church: \_\_\_\_\_

Signature: \_\_\_\_\_

By signing this form, the church is agreeing to provide a scholarship to the above named camper at the amount indicated above.

On conclusion of Camp Johnsonburg's camping season, a bill will be sent to the church. Please list below the name and address of the person to whom the invoice should be sent.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ Title: \_\_\_\_\_