

2017 ORPR Camp Application

The ORPR Camp session begins Saturday, July 1 and ends Saturday, July 29, 2017. Please reference this organizational checklist as you prepare to submit your 2017 application.

- Parental Contact Information and Emergency Contact Information**
 - ✓ Include a photocopy of your Driver's License or Personal Identification Card
- Camper Information**
- Camper Medical Coverage and Medical Information**
 - ✓ Include a photocopy of your Medical/Prescription ID Cards (front and back)
 - ✓ Submit a recently updated (within the last year) Illinois State Health Form
 - ✓ Ensure you've signed the bottom
- Transportation**
 - ✓ Ensure you've signed the bottom if you want to use the transportation program
- Parish Form**
 - ✓ Ensure you've received the signature of your Parish Priest
- ORPR Volunteer Form**
 - ✓ Ensure you've signed the bottom if you want to volunteer
- ORPR Tuition Deposit and Completed Fee Worksheet**
 - ✓ Include the \$150 per Camper non-refundable deposit made payable to ORPR Camp

Take Advantage of the ORPR Early Bird Tuition Reduction Pricing

Complete and return your completed 2017 ORPR Camper Application and Tuition Deposit in a postmarked envelope on or before April 30th, 2017 and you will receive the ORPR Early Bird Tuition Reduction.

Please mail the completed application back with the appropriate deposit to:

ORPR Camp
c/o DCMA
PO Box 1367
Des Plaines, IL 60017

Once you submit your application, please allow 3 weeks for receipt and processing. You will hear back from us with a Camper Confirmation and acceptance into the July 2017 Camp Session, or a request for any additional documentation in the application process. If, after 3 weeks you have not received a response from us either way, please email us at info@orprcamp.org.

ORPR reserves the right to refuse admission to any party. Your child's application is not accepted until you receive a Camper Confirmation notice.

Camper Information

The section below will provide us with information about your Camper.

Camper Full Name: _____ (Last Name, First Name, Middle Initial)

Camper Home Address:

Street Address, Apartment/Unit #, City, State, Zip Code

Home Phone Number: _____ **E-mail address** (if applicable): _____

Date of Birth: _____ **Gender** (please check one): Male Female

Camper status (please check one): First Time Camper Returning Camper

Parental Contact Information

The section below provides us with information about you, as the parent(s) or guardian(s) of your Camper.

Father - Contact Information

Name: _____ Primary Phone: _____

Alternate Phone: _____ Email Address: _____

Mother - Contact Information

Name: _____ Primary Phone: _____

Alternate Phone: _____ Email Address: _____

Emergency Contact Information

In the event of an emergency, ORPR camp will seek to reach the parents of the Camper. If however, they are unsuccessful in making contact with a parent, please provide information below that can be used as an alternate emergency contact:

Full Name: _____ Relationship to the Camper: _____

Primary Phone: _____ Alternate Phone: _____

Home Address: Street Address, Apartment/Unit #, City, State, Zip Code

Alternate Emergency Contact Information

Full Name: _____ Relationship to the Camper: _____

Primary Phone: _____ Alternate Phone: _____

Home Address: Street Address, Apartment/Unit #, City, State, Zip Code

Important Note:

Inform the persons listed above that you have listed them as the emergency contact for your Camper. Additionally, let them know the weeks that your Camper will be at ORPR, and that they may be contacted by the Camp in the event of an emergency. This will help to eliminate confusion for them in the event we need to reach them quickly.

Camper Certifications* (NOTE: A copy of the certificate(s) must be included with this application):

Is your Camper Lifeguard Certified? Yes No If no, check here if they are interested in Lifeguard Certification

Is your Camper CPR Certified? Yes No If no, check here if they are interested in CPR Certification

Is your Camper First Aid Certified? Yes No If no, check here if they are interested in First Aid Certification

**Training for certifications is done on an as available basis. ORPR does not guarantee any certification or participation in any programs.*

Camper Swimming Ability:

Please choose which option best describes the swimming ability of your Camper:

- Non-swimmer (has never been swimming)
- Basic swimmer (has been swimming a few times)
- Average swimmer (has a good understanding of swimming & has been many times)
- Good swimmer (is comfortable in almost any depth of water)

Interests:

Does your Camper play any musical instruments? If so, which ones, and how long have they played them? _____

ORPR Camper Long Sleeved Shirt

An ORPR Camp long-sleeved shirt is included in the cost of tuition and will be provided to each camper at the registration desk upon check in. Please note the size worn by your Camper:
Shirt size (check one):

- | | |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Youth Small | <input type="checkbox"/> Adult Medium |
| <input type="checkbox"/> Youth Medium | <input type="checkbox"/> Adult Large |
| <input type="checkbox"/> Youth Large | <input type="checkbox"/> Adult XL |
| <input type="checkbox"/> Adult Small | <input type="checkbox"/> Adult XXL |

Camper Communication – English and Russian

The following is for informational purposes only. Camp acceptance will not be based on language ability. Please choose which option best describes the ability of the Camper to communicate in each language:

- | | | | | | |
|---------------------|---------------------------------|---------------------------------|---------------------------------------|--------------------------------|-------------------------------|
| Speaking in English | <input type="checkbox"/> Native | <input type="checkbox"/> Fluent | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Basic | <input type="checkbox"/> None |
| Reading in English | <input type="checkbox"/> Native | <input type="checkbox"/> Fluent | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Basic | <input type="checkbox"/> None |
| Writing in English | <input type="checkbox"/> Native | <input type="checkbox"/> Fluent | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Basic | <input type="checkbox"/> None |
| Speaking in Russian | <input type="checkbox"/> Native | <input type="checkbox"/> Fluent | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Basic | <input type="checkbox"/> None |
| Reading in Russian | <input type="checkbox"/> Native | <input type="checkbox"/> Fluent | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Basic | <input type="checkbox"/> None |
| Writing in Russian | <input type="checkbox"/> Native | <input type="checkbox"/> Fluent | <input type="checkbox"/> Intermediate | <input type="checkbox"/> Basic | <input type="checkbox"/> None |

Camper Medical Coverage

All Campers must have medical coverage by their family medical insurance policy (include a copy of the **front and back** of the **insurance cards**). ORPR Camp provides no medical insurance. Any medical costs incurred by the camp in providing required treatment to your Camper will be billed to the parents.

Medical Insurance Co. Name: _____ **Medical Policy Number:** _____

Does your Camper have allergies to any medicines?

No Yes, medicines he/she is allergic to include:

Does your Camper have any allergies to food?

No Yes, foods he/she is allergic to include:

Does your Camper have any dietary concerns?

No Yes, dietary concerns/restrictions include:

Does your Camper take any prescription medication?

No Yes, prescription medications he/she takes include (please attach instructions):

For the safety of everyone, your Camper is not allowed to have his/her medication on him/her at any time without prior consent from the Camp. Our ORPR Staff will dispense the medication to the best of our ability, per doctor's instructions. Special accommodations can be made for certain medications taken on an as-needed basis, such as asthma inhalers.

Please indicate if your Camper is affected by or has issues with any of the following:

(Check all that apply)

Asthma Back Problems Bleeding Disorders Convulsions Cramps Diabetes
 Ear Problems Fainting Headaches Hernia Sleepwalking Motion Sickness Nightmares

Does the Camper have any behavioral or social considerations that their ORPR camp counselor should be aware of? _____

Are there any other concerns or considerations you feel we should know about your Camper? _____

State of Illinois Children's Health Form: You need to submit a photocopy of a recent (within the last year) Illinois Health Form. You can locate the form on the ORPR Camp website, or at <http://www.dph.illinois.gov/sites/default/files/forms/certificate-ofchild-health-examination-03032017.pdf>

Authorization of Medical Treatment: In case of illness or accident, I hereby give permission to ORPR Camp to secure medical treatment for my child at the nearest medical facility. I assume full financial responsibility for all medical costs incurred for such treatment. My medical insurance will be the camper's coverage.

Signature of Parent or Legal Guardian: _____ **Date:** _____

Name of Parent of Legal Guardian: _____

Medical Identification Card

This sheet is a placeholder to remind you to include a photocopy of your medical/prescription identification cards (front and back) with your completed application. You do not need to include this page.

The rest of this page is intentionally blank.

Transportation

Please choose one option:

- No, my Camper will not need to use the ORPR Transportation Assistance Program from/to Chicago's O'Hare airport (ORD). *(No further information is needed on this page. Please skip to the next page)*
- Yes! My Camper will need to use the ORPR Transportation Assistance Program from/to Chicago's O'Hare airport (ORD)*. *(Please continue below)*
* Please attempt to make reservations for your camper(s) to arrive at O'Hare on Saturday, July 5th between 8am and 2pm, with the return flight departing no earlier than 4pm on Saturday, Aug 2nd.

ORPR Transportation Details

My Camper will use the ORPR Transportation Assistance Program:

- One way only – on the way to Camp
- One way only – on the way home from Camp
- Both ways – both on the way to Camp, and on the way home from Camp

Camper details on the way to Camp:

Date of Departure: _____ Airline Name: _____

Flight Number: _____ Scheduled Departure Time: _____

Camper details on the way home from Camp:

Date of Departure: _____ Airline Name: _____

Flight Number: _____ Scheduled Departure Time: _____

- Yes, I've read and understand the Transportation Assistance Program as outlined in the ORPR Brochure.

For the arriving trip, I understand that my son/daughter will be escorted to a shuttle bus located at the airport, which will take them to Rockford, Illinois. Upon arrival in Rockford, IL, they will be met by another camp representative who will bring them directly to ORPR Camp.

For the return trip, I understand that my son/daughter will be taken to a bus in Rockford, IL that will then take them to O'Hare airport. Upon arrival at O'Hare airport, my son/daughter will be met by another camp representative who will help them to their flight.

I understand that in some instances, a camp representative may drive my son/daughter directly to/from the airport. Under no circumstances will I hold ORPR camp responsible for sickness or injury incurred during this travel.

I understand that I am responsible for paying a fee of \$50.00 per child/each way for using the services of the ORPR Transportation Assistance Program.

Name of Parent or Guardian: _____

Signature: _____ **Date:** _____

Orthodox Church Information Sheet

You must complete this form and **have it signed by your Parish Priest** in order for your child to be accepted into ORPR Camp.

Camper Name: _____

Current Parish Name: _____

Current Parish Location: _____

Patron Saint of the Camper: _____

Names Day: _____

Church in which the Camper was Baptized: _____

Date of Baptism: _____

Priest who performed the Baptism: _____

Church Location: _____

Parents, please indicate your Camper's participation in Church, outside of Camp:

Please note: Camp acceptance will not be based on the following information. This is for informational purposes.

Attends Divine Liturgy:

- Every Sunday
- Twice a month
- Once a month
- Four times a year
- Less than four times a year
- Never

Attends Vigil:

- Every Saturday
- Twice a month
- Once a month
- Four times a year
- Less than four times a year
- Never

Attends Parish Church School

- Every Week
- Twice a month
- Once a month
- Four times a year
- Less than four times a year
- Never

When was the last time your child had Confession and Holy Communion? _____

Approximately how many times per year does your child partake in Holy Communion?

Does your child sing in the choir? _____

Does your child serve in the altar? _____

By signing below I acknowledge the Camper referenced above is a member of my church and that the above information is true to the best of my knowledge.

Name of Parish Priest (Printed): _____

Signature of Parish Priest: _____ **Date:** _____

ORPR Camp Volunteer Application

ORPR Camp welcomes parents and grandparents of our Campers to volunteer their time during the 2017 Summer Camp Session. In exchange for each full week of volunteer time completed by a parent or grandparent, your family will receive one tuition-free week of Camp for one of your campers.

- Yes! I'm interested in attending the ORPR Camp Session as a volunteer**
*Please submit this part of the volunteer application by **May 15, 2017** so we can plan accordingly!*
- No, thank you. At this time I am unable to attend the ORPR Camp Session as a volunteer.** *(skip to next page)*

Your Contact Information:

Name: _____ Address Line 1: _____
Apartment or Unit: _____ City: _____ State: _____ Zip Code: _____
Primary Phone: _____ Alternate Phone: _____
E-mail Address: _____

Availability

During which weeks of ORPR Camp are you available for volunteer assignments? *(Check all that apply)*

- Week 1 – July 1st to July 8th Week 2 – July 8th to July 15th
- Week 3 – July 15th to July 22nd Week 4 – July 22nd to July 29th

Your Interests:

Volunteer assignments are not guaranteed, and depending on the number of volunteers, you may be needed in several areas. (ie. if a volunteer prefers teaching, he or she might, in addition, need to help out in the kitchen)

Please select your volunteer area(s) of interest:

- Teaching – Russian Language, History, Geography, Scouting, Russian Dancing
- Kitchen – Preparing Meals
- Work Crew – Maintenance, repairs
- Other – (please specify)

Skills and Qualifications:

Please summarize any special skills and qualifications you have acquired from employment, previous volunteer work or other activities such as hobbies or sports.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I also understand that ORPR Camp is a church camp and I am expected to uphold a certain level of behavior as a volunteer. I understand that any violation of camp rules or any inappropriate behavior may result in my immediate dismissal.

Signature: _____ **Date:** _____

Thank you for your interest and willingness to volunteer to make a difference at ORPR Camp! 8

Code of Conduct

As a camper of ORPR Camp, I realize that I represent the Camp and the Russian Orthodox Church in all activities. My personal behavior will reflect the way people perceive ORPR Camp and the Russian Orthodox Church as a whole. Therefore I shall strive to:

- Attend all Church services, meals, activities, and lessons;
- Respect all clergy, monastics and program staff;
- Dress appropriately for all activities;
- Dress appropriately for church services:
 - Females: modest skirts / dresses below the knee;
 - Males: long pants/slacks and collared shirts;
- Use appropriate language at all times;
- Not use cell phones, mp3 players, or video games while at camp;
- Abide by all rules and regulations set forth by O.R.P.R. Camp;
- Abide by the curfew set by the ORPR Camp and respect the quiet time (9:30pm quiet time, 10:30pm lights out);
- Not leave the campgrounds without the permission from the Camp Director

I realize that there are certain things that will not be tolerated at the ORPR Camp and I promise not to indulge in any of the following activities:

- I will not consume alcoholic beverages.
- I will not use narcotics of any kind or any illegal drugs.
- I will not verbally, physically or emotionally assault or abuse anyone.
- I will not engage in public displays of affection, and will act appropriately at ALL times.

The Counselors (Nachal'stvo) of ORPR Camp reserve the right to inspect any facilities where campers reside and any of their personal belongings for the safety and the well-being of all ORPR Campers.

As a camper at ORPR Camp, I promise to abide by this Code of Conduct.

Signature of Camper

Date

As a parent of minor child attending ORPR Camp, I am aware of, and agree to the Code of Conduct as stated above and whatever disciplinary action is decided upon by the Counselors (Nachal'stvo) of ORPR Camp, will be abided by. If my child is expelled from the Camp, I understand that camp tuition is NON-REFUNDABLE. In addition I agree to pay any transportation costs associated with him/her being transported home.

Signature of Parent

Date

Permission and Agreement Form: *You must read this agreement, write your initials in the spaces provided, and sign at the bottom. Without your full and complete agreement, your child will not be admitted to camp.*

I give permission for my child to attend O.R.P.R. Camp (hereinafter "Camp") and participate in all phases of the camp program and activities. I further give permission for my child to be transported to different locations for Camp activities. I and my child also agree to the following (initial next to each paragraph):

_____ I understand that regular Camp activities include many physical activities. I understand that there is always a risk of accident when children participate in Camp activities. Accordingly, **I agree that my child and I will not hold the camp responsible for any harm or injury that may occur, whether by accident, mistake, act of God or other reason.**

_____ I understand that Camp will make a good faith effort to supervise my child. However, I also realize and understand that part of the Camp program includes allowing the child time unsupervised, and that there will be time when my child will be deliberately left unsupervised. I agree and acknowledge the risk of allowing my child to spend time unsupervised, both with and without other children. I agree that my child and I assume these risks, and that we will not hold Camp, its directors, its parent organization(s), or its volunteers liable for any incident that may occur or for any act my child might individually participate.

_____ I agree not to hold Camp liable in case any accident or harm should come to my child during transportation to or from Camp.

_____ I understand that Camp is staffed and operated entirely by volunteers, that Camp's volunteers are lay persons, that they do not possess any special expertise, and that they do not hold themselves out as having any special training or expertise. I further understand that Camp does not guarantee the presence of any licensed professionals, including but not limited to medical professionals, childcare workers, food service handlers, child counselors, social workers, lifeguards, or wilderness guides.

_____ I understand and agree that in the event of any injury or accident, that Camp will use its best judgment, as an organization staffed by lay persons without specialized pediatric knowledge, to either treat my child or transport him or her for treatment.

_____ I hereby give my consent for Camp and its representatives to act as temporary guardians for my child and authorize any medical treatment that may prove necessary. I agree that my insurance coverage will serve as my child's insurance coverage.

_____ I acknowledge that Camp has limited resources and must operate on an all-volunteer staff, and that Camp's staff is chosen solely on their willingness and capability to help serve Camp's mission.

_____ I agree that I will not to hold the Board of Directors, the individual Camp Directors, volunteers, or counselors personally liable for any reason. I further agree that I will not hold O.R.P.R Camp, the Russian Orthodox Church Outside of Russia, the Diocese of Chicago & Mid-America of the Russian Orthodox Church Outside of Russia, or any of its parishes or agents liable for any reason whatsoever, including but not limited to the contents of this agreement.

_____ **I have read the attached copy of the Camp Code of Conduct. I have discussed the Code and the rules with my child, and I guarantee that he or she understands them. Both my child and I understand that the Camp Code is not exclusive, and that there are many other rules of Camp that are not included in the Code. Finally, I understand that if my child breaks any of Camp's rules, whether written or unwritten, then Camp may expel my child, transport him or her home at my expense, and not refund his or her tuition. I understand that Camp has absolute discretion in this regard, and that I have no right to appeal, contest, or dispute Camp's decisions with regard to expulsion.**

_____ I promise that my child has received all standard childhood vaccinations, that all vaccinations are current, and that I have disclosed all known medical conditions.

_____ I understand that I also agree to all the provision listed in this entire application packet, even if they are not repeated here in this section.

_____ I understand that Camp opens on Saturday, July 1st at 12:00 noon and closes on Saturday, July 29th at 12:00 noon. I understand that registration will start at 9:00 am and will end at 11:30am Saturday, July 1st. I understand that there are no accommodations available prior to this time and my child must be registered by 11:30am. Additionally, I will pick up my child between 10:00am and 12:00pm on Saturday, July 29th.

_____ **I understand that the cost for the full session is \$1295 only if the application and all of its accompanying paperwork (please see Application checklist) are postmarked by April 30th, 2017.** The cost for the full session is \$1395 if the application and all of its accompanying paperwork are postmarked after April 30th, 2017.

_____ I hereby state that I am fluent in the English language, that I am able to read and understand this waiver, and that I have personally read and agreed to its contents.

I have read the accompanying Application and Brochure and agree to all of its contents.

Signature of Parent or Legal Guardian _____ Date: _____

Camper Application Deadlines & Pricing*

Please note that there are **no refunds for early departures.**

FIRST-TIME Camper Tuition Only

Option 1 – Early Bird Tuition Reduction Pricing

Postmarked **April 30, 2017** or earlier to qualify for Early Bird Tuition Reduction Pricing:

- My First Time Camper will only attend Week 1. (Enter \$400).....\$ _____
- My First Time Camper will attend both Week 1 and Week 2 (Enter \$800).....\$ _____
- My First Time Camper will attend Weeks 1-3 (Enter \$1200).....\$ _____
- My First Time Camper will attend all 4 weeks (Enter \$1295).....\$ _____

Option 2 – Standard Pricing

Postmarked **May 1, 2017** and after and you will pay Standard Tuition Pricing:

- My First Time Camper will only attend Week 1. (Enter \$450).....\$ _____
- My First Time Camper will attend both Week 1 and Week 2 (Enter \$850).....\$ _____
- My First Time Camper will attend Weeks 1-3 (Enter \$1275).....\$ _____
- My First Time Camper will attend all 4 weeks (Enter \$1395).....\$ _____

RETURNING Camper Tuition

Option 1 – Early Bird Tuition Registration Pricing

Postmarked **April 30, 2017** or earlier to qualify for Early Bird Tuition Reduction Pricing:

- I have 1 child attending the Camp Session (Enter \$1,295 for your child).....\$ _____
- I have 2 children attending the Camp Session (Enter \$1,200 per child).....\$ _____
- I have 3 (or more) children attending the Camp Session (Enter \$1,150 per child).....\$ _____

Option 2 – Standard Pricing

Postmarked **May 1, 2017 and after** and you will pay Standard Tuition Pricing:

- For each child you have that is attending the Camp Session (Enter \$1,395 per child)...\$ _____

Transportation Assistance

- My Camper(s) will require assistance to Camp (Enter \$50 per child if yes).....\$ _____
- My Camper(s) will require assistance home from Camp (Enter \$50 per child if yes)....\$ _____

SUBTOTAL: \$ _____

Tuition Deposit

Deposit you are sending today** (Enter \$150 per child) **TOTAL DEPOSIT:** \$ _____

Balance Due by May 30, 2017 (Subtract 'Total Deposit' from 'Subtotal') TOTAL: \$ _____

* Clergy should email us at info@orprcamp.org to receive pricing information for your children.

We will begin to process your Camp Application when we receive the non-refundable Tuition Deposit of **\$150.00 per Camper, made payable to ORPR Camp. Until that time, any application received by our staff will be put on hold until the receipt of the down payment.