

Parent-Camper Handbook

Camp Pinehurst Summer Camp for Boys and Girls

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Parent Permission Form for Self-Administered Emergency Medication AND Physician's Form for Medications (if applicable for individual camper)

CAMP PINEHURST MEDICAL FORM (Completed and signed prior to start of camp!)



Camp Pinehurst Summer Camp for Boys and Girl's

23 Curtis Road Raymond Maine 04071 Felephone: 207-627-4670 FAX: 207-627-4793 www.camppinehurst.com

director@camppinehurst.com

DIRECTORS
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23 CURTIS ROAD
Raymond, ME 04071
IELEPHONE: 207-627-4670

MR. & MRS. JOHN L. CURTIS, JR.
12 CIDER LANE
MASHUA, NEW HAMPSHIRE 03063
FAX/TELEPHONE: 603-850-6287

2023 Season

Dear Camp Pinehurst Campers and Families,

We are so excited to celebrate our 77th season with you! The directors and staff are ready to give your kids a safe and wonderful experience!

This handbook includes the very helpful **packing list** and the <u>required</u> **medical forms**.

If you have any questions, please send us an email (director@camppinehurst.com) or give us a call (603-880-6287 for Jack & Elizabeth during the school year and 207-627-4670 for all the directors during the summer). We are happy to help!

Pinehurst Proud,

Jack & Elizabeth Curtis Kate & Matt Green John & Jean Curtis

| Checklist: |
|---|
| Complete Tuition Payments |
| Order uniforms from Amerasport |
| Mail signed medical forms and current physical with immunizations |
| before your camper(s) arrive at Pinehurst |
| Send summer travel plans with emergency phone numbers |
| Read camp policies and send signed blue permission form |
| |

SUNDAY ARRIVAL & DEPARTURE TIMES:

ARRIVAL:

- Campers arrive from 10:30-11:15am on Sunday morning
- Pull onto the field and check in with Jack
- Your camper will be checked in by our medical personnel
- Staff will carry belongings to the cabin and help your camper unpack and settle in

DEPARTURE:

- Departing campers will be ready by 9:30am
- Campers must be picked up before 10:15am

DAILY PHOTOS:

Pictures are taken daily of campers engaged in different activities at Pinehurst. Family and friends can get a peek at the fun, and campers love to see the pictures when they return home from Pinehurst. Kate and Jack keep them on the site so campers can look at earlier years, too!

MAKING TUITION PAYMENTS:

Payments are due May 1st. **Checks** should be mailed to Camp Pinehurst, 12 Cider Lane, Nashua, NH 03063. (Any balance not paid by June 1st may result in a \$100 dollar late fee.)

Payments can also be made by **credit card**. On the Camp Pinehurst site, under Registration, select the Make a Payment page, and click the Pay Here button. This brings you to Simply Easier Payments (our secure payment provider) where you can also pay with an **electronic check** (ACH).

Note: If you desire to wire money to the Camp Pinehurst account instead, please contact the directors for instructions.

MEDICAL FORM REQUIREMENTS:

- **The Camp Pinehurst Medical Form is required and your signature for parent authorization is essential! **
- **Please include a **current physical** (must be less than one year old) along with **immunization records**. These are required!**
- The **Physician's Health Form** is also enclosed. This is needed for campers who will be taking medication and especially if they have authorization to self-administer emergency medications, such as an asthma inhaler or an epinephrine pen. Both the physician and parent should complete the health form.
- Please mail medical forms to Camp Pinehurst, 12 Cider Lane, Nashua, NH 03063, no later than June 10th or email a scanned PDF to director@camppinehurst.com.
- We require health histories and important signatures **before** opening day.

SUMMER ADDRESSES and TRAVEL PLANS:

If you will be traveling, *please provide us with an itinerary*. If grandparents or other family members will be responsible for your camper(s) in your absence, we must have their names and contact information on file at Pinehurst. Please inform us of any changes of address, telephone numbers, or email addresses.

UNIFORMS:

Uniforms are ordered directly from AmeraSport; they are not sold at camp. Using the Packing List will help you to determine each camper's needs (please contact AmeraSport with questions about sizes and Elizabeth with any other questions!). Thank you for labeling ALL articles of clothing and belongings.

CAMP POLICIES

SPENDING MONEY – Campers do not need any spending money (no trips to the mall!). The camp and directors will not be responsible if this rule is violated.

PASSPORTS – The directors will store passports, travel money, and cell phones in the camp safe for campers who are traveling.

TELEPHONE CALLS – The only telephone calls for campers are for birthdays (or family emergencies, of course).

REACHING the DIRECTORS – If parents wish to inquire about their children or discuss specific situations, please call (207) 627- 4793 or email director@camppinehurst.com.

ELECTRONICS -

- Cell phones and electronic games are NOT PERMITTED at Pinehurst.
- Electronic music devices although permitted are not the responsibility of Camp Pinehurst and must be labeled. If the music device is also a smartphone, please remove the SIM card from the device before sending your camper.

MAIL and PACKAGES -

- <u>Mail call</u> is a highlight of the day; we make a big production out of it each evening after the meal! Campers love to receive a letter or a postcard!
- Food packages should NOT be sent to campers!
- Chewing gum and candy are not permitted.
- Email correspondence is for contacting directors. Campers do not have access to the Internet or email while at camp.

MAIL IDEAS: Letters, post cards, books, comic books, magazines, puzzles, comics from the newspaper, card games, and board games. Please label all items!

| Camper's Name: | |
|----------------|--|
| - | |

CAMPER PERMISSIONS 2023

| Please note: Any permission, such as have pick up the camper(s) at the end of campedirectors prior to pick-up day and must in the person to the camper. | , must be submitted in writing to the |
|--|---|
| | (person's name) is |
| permitted to pick up | (camper) on |
| (date). | (compon) on |
| NOT permitted to pick up | (person's name) is (camper). |
| | |
| WHITE WATER RAFTING Campers 10 years of age or older was six weeks are eligible to take the white additional charge for this trip. Prior to the permission and release form from the raftin addition to your signature below issue Signed | te trip, you will be sent a separate tring company requiring a signature d to Camp Pinehurst. |
| I have read and discussed the Ca Signed Parent or Gua | |
| rarent or Gua Thank you for signing and returning t signed medical forms and immunization | his <u>form</u> and completed and |
| signed medical forms and immunization | ms prior to the start of camp. |
| Before June 10th | After June 10th |
| Camp Pinehurst | Camp Pinehurst |
| 12 Cider Lane | 23 Curtis Road |
| Nashua, NH 03063 | Raymond, ME 04071 |

PACKING for PINEHURST

Label everything you send with your camper. For clothing, a Sharpie laundry marker works well. Use a regular Sharpie for all other items. Check off a **packing list** so we can find all of your camper's items when it's time to return from camp! Please send one with your camper(s).

Order These Items:

- 6 (or more) Pinehurst tshirts
- 4 shorts of choice
- o 1 Pinehurst sweatshirt
- 1 WHITE Pinehurst laundry bag

Essential Clothing:

- 3 (or more) bathing suits: one piece for girls, trunks for boys
- o 9 pairs of socks
- o 9 pairs of undergarments
- o 2 pairs of pajamas
- o 1 long sleeve shirt
- o 1 extra t-shirt
- o Extra shorts
- o Pair of sweatpants
- o 2 pairs jeans/pants
- o 1 warm jacket and/or fleece
- o Rain jacket

Towels and Bedding:

- o 3 Blankets
- o 1 Pillow
- o 2 Pillowcases
- o 2 sets of TWIN sheets
- o 2 bath towels
- o 2 beach towels (or more)

Footwear:

- o 1 pair of flip flops
- o 1 pair of sandals
- o 2 pairs of sneakers
- Optional- hiking boots & cleats

Other Gear:

- Duffle bags (for packing please no trunks or suitcases!)
- 1 Sleeping bag for 3-6 week campers for overnight trips
- o 1 Flashlight (extra batteries)
- Shower caddy or toiletry kit for toothbrush, toothpaste, soap/body wash, deodorant, shampoo, etc.
- o Sunblock
- o Bug spray
- o 1 Water bottle
- o Baseball cap
- o Tennis racquet, 1 can tennis balls
- Books, stationery, pens, stamps, addresses
- o Fishing equipment
- Optional swim goggles/mask, swim fins, baseball glove, shin guards, bathrobe

AIR TRAVEL ARRANGEMENTS

To make arrivals easier for everyone concerned, please try to schedule flights in the following manner.

ARRIVALS- Flights should be scheduled to arrive in PORTLAND, MAINE, in the late afternoon or early evening on the day your child will begin camp.

DEPARTURES- Departing flights should be scheduled for the morning, before noon, of the day leaving camp.

The requested timing of arrivals and departures is necessary in order for us to provide transportation service to and from the airport. It is a 45-minute ride each way. There is a taxi fee charged of \$50.

ALL FLIGHTS MUST HAVE PORTLAND, MAINE, AS THEIR FINAL DESTINATION. A Pinehurst representative or director will meet the camper at that point.

UNACCOMPANIED MINORS can request assistance from the airlines for transfers and delivery at final destinations. Parents must sign and pre-pay for this service in advance. Please indicate that the camper will be met by a "representative of Camp Pinehurst" or Mr. or Mrs. Curtis.

TICKETS and PASSPORTS, etc. will be stored in the camp safe until needed for the return trip. Flights will be reconfirmed.

ALL FLIGHTS must be confirmed **in writing** with the directors including information for airline, flight #, departure time, and arrival time. If using connecting flights, please send us an itinerary. **PLEASE DO THIS BEFORE JUNE 15**TH.

CALL the directors if there are any changes in your written plan or if you have any questions as you plan air travel.

DIRECTIONS TO CAMP PINEHURST

- A. From Boston Area: Route 128 to I-95 North. Continue to New Hampshire Turnpike and Maine Turnpike.
- B. From Connecticut and New York area: Route 84 from Hartford to the Mass. Pike. From Mass Pike take exit 10 (Auburn-Worcester) onto Rt. 290. Follow 290 to Rt. 495 North. Proceed to I-95 North at New Hampshire Turnpike. Then on to Maine Turnpike. After Portland, Maine, be sure to stay straight on the Maine Turnpike, which is now 95 North, until Exit 63 (formerly Exit 11).
 - 1. Leave Maine Turnpike at Exit 63 in Gray. At the traffic light, turn LEFT onto Rte. 202. Move over to the right hand lane and at the first traffic light go RIGHT onto Rte. 26A.
 - 2. Travel Rte. 26A for 1.4 miles to the junction of Rte. 26. As the road bears left, Rte. 26A becomes Rte. 26. Follow Rte. 26 for 2.9 miles to a blinker light. Turn LEFT at blinker onto NORTH RAYMOND RD. Travel 4.8 miles to your second left and turn LEFT onto LEDGE HILL ROAD.
 - 3. Proceed on Ledge Hill for 0.8 mile and be very cautious as you approach a SHARP RIGHT onto SPILLER HILL ROAD. Continue for 1.7 miles and as you come to a "T" in the road, bear LEFT onto RAYMOND HILL ROAD.
 - 4. Travel 0.4 and take the first RIGHT onto CONESCA RD.
 - 5. Travel one mile and you will see the tall green Pinehurst sign. Turn LEFT onto the camp road. Parking will be on your right on the athletic field.

The total distance from the Gray exit to camp is approximately 12 miles. Please call if you have difficulty. The Camp Pinehurst phone number is (207) 627-4670 and we are in Raymond, Maine, on Crescent Lake.

PARENT PERMISSION FORM

USE OF SELF-ADMINISTERED EMERGENCY MEDICATION

| As the parent or guardian of | 1 |
|---|-----|
| Camper Name during his/her time at camp, the above listed camper is permitted to ha | , , |
| or possess outside of the regular supervision of the camp's health staff medically necessary: (Circle all that apply or list other emergency self-medication) | , |
| a. Asthma Inhaler | |
| b. Epinephrine Pen | |
| c. Other (please list) | |
| I have read the State of Maine Law as listed below and confirm that my and the skills to safely have readily available and self-administer the in medication in camp. | |
| Parent or Guardian signature Date | |

Summary of Maine Law on Self-Administration of Emergency Medications:

Recreational camps for children; emergency medication. A recreational camp for boys or girls must have a written policy authorizing campers to self-administer emergency medication, including, but not limited to, an asthma inhaler or an epinephrine pen. The written policy must include the following requirements:

- A. A camper who self-administers emergency medication must have the prior written approval of the camper's primary health care provider and the camper's parent or guardian;
- B. The camper's parent or guardian must submit written verification to the camp from the camper's primary health care provider confirming that the camper has the knowledge and the skills to safely self-administer the emergency medication in camp;
- C. The camp health staff must evaluate the camper's technique to ensure proper and effective use of the emergency medication in camp; and
- D. The emergency medication must be readily available to the camper.

The full statute may be viewed at: http://janus.state.me.us/legis/statutes/22/title22sec2496.html

PHYSICIAN'S HEALTH FORM for CAMP PINEHURST

TO BE COMPLETED BY A LICENSED PHYSICIAN ATTACH COPY OF CURRENT IMMUNIZATIONS AND INSURANCE CARD FRONT/BACK

| | | inehurst without a current med | ical form on file. You may also a | ttach a doctor | 's office generic |
|----------------------|-----------------|-----------------------------------|--|----------------------|-------------------|
| sports physical fo | rm if availabl | е. | | | |
| Name of the Physicia | an: | | Tel: | | |
| Address: | | | | | |
| | | | | | |
| MEDICATIONS: | | | | | |
| • | | ny medications on a daily bas | <u> </u> | | |
| | | ollowing medications while at | | | T |
| lame of med | Date Started | Reason for taking it | When is it given | Amount or dose given | How is it given |
| | | | ☐ As Needed (PRN) | | |
| | | | ☐ Breakfast ☐ Lunch | | |
| | 1 | | | | |
| | | | | | |
| | | | Other time | | |
| | | | ☐ As Needed (PRN) | | |
| | | | □ Breakfast | | |
| | | | ☐ Lunch | | |
| | | | □ Dinner | | |
| | | | ☐ Bedtime | | |
| | | | ☐ Other time | | |
| | | | ☐ As Needed (PRN) | | |
| | | | □ Breakfast | | |
| | | | ☐ Lunch☐ Dinner | | |
| | | | | | |
| | | | Other time | | |
| | | | □ PRN | | |
| | | | ☐ Breakfast | | |
| | | | ☐ Lunch | | |
| | | | □ Dinner | | |
| | | | ☐ Bedtime | | |
| | | | ☐ Other time | | |
| | | | □PRN | | |
| | | | □ Breakfast | | |
| | | | Lunch | | |
| | | | ☐ Dinner☐ Bedtime | | |
| | | | | | |
| Please comment o | on any curren | t health problems that we would | □ Other time | | |
| , , , | | ATIONS BY LICENSED MEDICA | L PHYSICIAN | | |
| | s Name | | Date | | |
| BP He | ight | Weight: | | | |
| The above named | l child may pa | rticipate in the full camp progra | | | |
| | | | | | |
| Signature of Licens | sea Pnysician: | | | | |
| | Au | | - Marie - Mari | Date | |

If mailed before June 10th: Camp Pinehurst 12 Cider Lane, Nashua, NH 03063

weeks prior to entering camp.

If mailed after June 10th: Camp Pinehurst 23 Curtis Road, Raymond, ME 04071

Camp Pinehurst Medical Form

| Camper's Name: | | M/F | Date of Birth: | | | |
|-------------------------------|---|----------------------|-------------------------------|--|--|--|
| Parent(s) / Guardian(s): | | | | | | |
| | | | | | | |
| Town: | State: _ | | Zip: | | | |
| Cell #1: | Cell #2: | Home# | : | | | |
| Work #1: | Work #2: | | | | | |
| | Emergency Contact (if parent | s cannot be reache | ed) | | | |
| Name: | Relationship | o: | Phone #: | | | |
| | Relationship | | | | | |
| | Medical Cont | tacts | | | | |
| Pediatrician or Family Doct | or: | | Phone #: | | | |
| | | | | | | |
| | | | | | | |
| | Medical History, Restrict | ions, or Allergies | | | | |
| Please list any medical histo | ory, restrictions, or allergies (if no | ot already in the ph | ysical): | | | |
| | | | | | | |
| | Parental State | ement | 444444 | | | |
| and x-rays. In the case of a | edical attention for my child, I gra n emergency, and I cannot be rea ; injections, anesthesia, and surge | ched, I authorize d | | | | |
| Signature: | | Date: | | | | |
| | | | | | | |
| ine camp must be notified | l if this child has or has been exp | osed to any comm | unicable disease within three | | | |

Forms Needed:

- 1. Copy of the latest **physical** (must be less than one year old) along with **immunization records**, **including vaccination status**.
- 2. If your child will be taking any **prescribed medication** during camp, the medication must be listed in the physical and provided in **original containers**. If they are not listed in the physical, we must receive a separate note from your doctor stating the medication and dosage to be administered.
- 3. If your child has an **epi-pen or inhaler**, please fill out the "Use of self-administered emergency medication" form.
- 4. Copy of both sides of the camper's medical insurance card.