Metropolis of Pittsburgh Summer Camp

One Holy, Catholic & Apostolic Church—

The Orthodox Church

On behalf of Metropolitan Maximos, we welcome you to Summer Camp! Camp is a great opportunity to have fun and make new friends, all while growing in the Orthodox Christian faith!

After reading the Registration Packet, if you have any questions, please feel free to call or e-mail. We look forward to your participation!

THE FACILITY

Camp Nazareth is located in Mercer, PA northwest of Interstate I-79 and I-80. (Exit #15, off of I-80.) The drive is about 1 ½ hours from Pittsburgh or Cleveland, 3 ½ hours from Columbus and 5 hours from Lancaster. The facility, which we rent is owned by the Carpatho-Russian Orthodox Diocese and is situated on 289 acres along the Shenango River. As you arrive, the first structure you will see is the beautiful Sts. Cyril and Methodios Church, built in the traditional Carpatho-Russian style.

The camp includes a large meeting lodge which holds the cafeteria, rec room, gift/snack shop, arts & crafts room and health center. The lodge over looks an Olympic-sized pool, basketball & sand volleyball courts, and baseball field. Many of our activities take place in the nearby outdoor pavilion.

There are 8 cabins each with ½ baths, 16 camper bunks and a 2-bed counselor room. There is a separate bath/shower house. There are 2 other cabins for Support Staff. The camp is surrounded by woods and is great for hikes on nature trails.

THE CAMP DAY

Our daily schedule includes a morning & evening prayer service, Orthodox Christian Life Sessions and discussion groups which will all be based on the camp theme: “We are the Church!” In addition, the campers participate in various activities such as swimming, sports, campfires, nature walks, team building games, Olympics, skits, singing/chanting, arts & crafts and Greek dancing.

THE STAFF

Our staff is administered by Metropolitan Maximos and the camp director. The camp director is assisted by 2 session directors who together help to guide His Eminence’s program and ensure the safety and comfort of the campers. Our staff is also directed by a chaplain for each session and several clergy who will spend the week at camp to help minister to the spiritual needs of the campers.

Each cabin has at least 2 counselors with an average ratio of 1:6 counselors to campers. Counselors for the JOY sessions are young adults, age 19 or older, and parents of JOY campers. Counselors for GOYA sessions are preferably 21 years and older. Each counselor is required to have a recommendation from his/her parish priest and has successfully completed a national background check in order to participate in our program.

In addition, we have medical personnel on staff to dispense medications, address health concerns and coordinate emergency care when needed.

CAMPER AGE/GRADE REQUIREMENTS

**JOY Sessions 1 & 2:** Campers for JOY sessions must be going into 3rd grade in the Fall and up to/including 6th Grade.

**GOYA Sessions 3 & 4:** Campers for GOYA sessions must be going into 7th thru 12th Grade in the Fall (and 2008 High School Grads are included).
Metropolis of Pittsburgh Summer Camp 2008

Registration Instructions continued ... Please read thoroughly.

**THE FAITH EXPERIENCE**

Our program gives the campers an opportunity to experience the life of the Orthodox Church without any of the distractions of everyday life. Including the constant need to use technology. (See page 6.) Campers will learn about our faith through participation in a variety of presentations, discussions, liturgical services and the Sacraments. At camp, we participate in various services including Divine Liturgy, Holy Unction Service, Agiasmos/Blessing of the Water, Artoclasia/Blessing of the Loaves, Trisagion, etc. Also, there are several priests available for the Sacrament of Confession. The weekly theme is given by our Metropolitan Maximos, who wants our campers to learn about their faith and why we believe as we do. Why do we say that “We are the Church—the One, Holy Catholic & Apostolic Church?” This theme will be taught by our Metropolis clergy, seminary students and educated lay people during our Orthodox Christian Life Sessions, discussion groups and evening cabin talks. Our prayer is that the campers and staff will grow in their faith daily and be able to take the tools that they have learned at camp back with them to their homes.

**REGISTRATION**

To reserve a place for your camper, the completed Application Form (at least pages 4-9) and full Registration Fee is required. The Medical Examination Form (pages 10-11) may be submitted later, so as not to hold up the Application Form. The Medical Examination Form is due no later than June 1st to allow our medical staff to review the forms. (See page 5 for more explanation.)

Acceptance of this Application is based on space availability. Campers from the Metropolis of Pittsburgh will be given priority if registered on/before May 15th. All other applications will be held until May 15th and then registered in order of postmark date. (Fees are based on postmark date.)

All Application Forms postmarked on/before May 15th will be entitled to the $375 fee. Registrations postmarked after May 15th require a $400 Registration Fee. (See Page 5 for more information concerning the Registration Fees.)

**CAMPER CONFIRMATION**

Confirmation of acceptance for the Summer Camp program will be sent via e-mail.

*Please make sure that you provide an e-mail address that is clearly written on the Registration Form.*

Confirmations will only be sent once the entire Application Form and Registration Fee are received.

In addition, confirmations can not be sent until the camp is adequately staffed with counselors & support staff. (Please be patient as we work to get quality staff for our program!)

**SUMMER CAMP STAFF**

*Our staff is a VOLUNTEER staff and we are always looking for LOTS of staff who are willing to give their time and talents to serve!* All members of the staff must be available for training which takes place before each camp session. If you or someone you know, may be interested in being part of the staff, please have them complete the application process. The staff forms will be posted on the Metropolis website.

**Forms/Balance due:** All Medical Examination Forms and the Registration Fee is due by June 1st. All balances are the responsibility of the camper’s family, regardless of any scholarships to be received.

**Wait List:** We anticipate a camper waiting list, therefore after June 1st, campers with outstanding balances or without complete forms may forfeit their spot to someone on the Wait List who has all forms/fees turned in.

**Cancellations:** We appreciate prompt notification if a camper must cancel. There is a minimum $25 processing fee for all cancellations. All cancellations must be made at least ONE week prior to the beginning of the session in which the camper is confirmed. If cancelled less than one week prior to the start of camp, a 50% refund of the fee paid may be given and only if requested in writing.

**Returned checks** must be reissued with the addition of a $25 service fee/bank fee.
**Metropolis of Pittsburgh Summer Camp 2008**

**CHECKLIST FOR SUBMITTING CAMPER APPLICATION  Please include the following:**

- Application Form (Pages 4 & 5)
- Registration Fee (full amount*)
- Mobile Technology Covenant (Page 6)
- Metropolis Dress Code (Page 7)
- Health History (Pages 8 & 9) Copy of insurance cards must be attached.
- New Orthodox Study Bible Order (Page 12) If you would like to purchase.
- Mail the Forms in their entirety, NO FAXES, NO E-MAILS may be accepted.
- Keep a copy of the form for your records.

*Please note: If submitting the Registration Fee by May 15th creates a hardship, please contact the Summer Camp Director to make other arrangements.

**APPLICANTS FROM OTHER METROPOLISES, JURISDICTIONS OR FAITHS**

The Metropolis of Pittsburgh Summer Camp is open to all...but, first we need to be able to accommodate campers from our Metropolis. Therefore, all applications from parishes outside of the Metropolis, will be held until May 15th, the early registration deadline. Then the forms will be processed according to postmark date (with completed application & payment) and are subject to space availability. Registration Fees are based upon the postmark date.

**PARISH AND OTHER SCHOLARSHIPS**

Campers receiving parish or other scholarships are responsible for the entire Registration Fee getting to the Metropolis by June 1st. Campers who are receiving full or partial scholarships should send the original registration form to the Metropolis and send a copy to your parish or scholarship organization to make them aware of your camp registration. No forms will be accepted without payment. (All deadlines apply.)

The entire Registration Fee is due by June 1st whether the scholarship comes from the parents or the scholarship organization. If the scholarship organization will not be able to send the money by that date, the parents are responsible to pay the balance and be reimbursed by the organization.

**DAMON G. HALKIAS CAMP SCHOLARSHIP FUND**

Limited scholarship funds based on financial need are available from the Metropolis. Any family who would like to receive a Scholarship from the Metropolis must apply in writing using the Scholarship Form, which may be requested by calling or e-mailing the Camp Director. (ph: 412-621-8543; e-mail: youth@odph.org) The Scholarship Form will then be e-mailed or mailed. Completed forms must be returned to the Metropolis by May 15th (postmark date). Notification of scholarships will be made after May 25th.

**DRIVING DIRECTIONS TO CAMP (from Interstate 80)**

In Pennsylvania from Interstate 80:

Camp Nazareth is located at:
339 Pew Road, Mercer, PA 16137

**NOTE: many GPS systems send you to the wrong Pew Rd!**

- Take Exit #15 to Mercer. (Old Exit #2)
- Follow Route 19 North thru Mercer.
- At the fork in the road, bear left on Route 58 West.
- Follow 6 Miles to Pew Road (See Camp Nazareth sign on the left.) There is a used-car lot across the street on right.
- Turn Left on Pew Road to the bottom of the hill (approx. 1 mile). Bear right into camp.

**TRANSPORTATION FROM THE EAST**

Bus transportation from Eastern PA will be available for Sessions 1, 3 & 4 based upon availability.
The cost is $75 round-trip.

**To make Reservations**

Sessions 1 & 4 contact:
Maria Kouraris,
Annunciation Church
Ph: 717-394-1735, E-mail: agocmaria@verizon.net

Session 3 contact:
Fr. Nicholas Halkias, Sts. Constantine & Helen Church
Ph: 610-374-7511
E-mail: fnicholashalkias@mail.goarch.org

*Bus reservation does not guarantee Camper Confirmation for Summer Camp!*
Metropolis of Pittsburgh Summer Camp 2008
APPLICATION FORM RETURN A.S.A.P. - Space is Limited.

Metropolitan Maximos and the
Greek Orthodox Metropolis of Pittsburgh invite you to

Summer Camp 2008
One Holy, Catholic & Apostolic Church
The Orthodox Church

CAMP SESSIONS  (If selecting more than 1 session, please indicate 1st & 2nd choice.)

<table>
<thead>
<tr>
<th>I want to attend:</th>
<th>SESSION</th>
<th>DATES</th>
<th>GROUP</th>
<th>GRADES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Session 1</td>
<td>June 15 — 21</td>
<td>J.O.Y.</td>
<td>3rd — 6th</td>
</tr>
<tr>
<td></td>
<td>Session 2</td>
<td>June 22 — 28</td>
<td>J.O.Y.</td>
<td>3rd — 6th</td>
</tr>
<tr>
<td></td>
<td>Session 3</td>
<td>June 29 — July 5</td>
<td>G.O.Y.A.</td>
<td>7th — 12th, 2008 Grads</td>
</tr>
<tr>
<td></td>
<td>Session 4</td>
<td>July 6 — July 12</td>
<td>G.O.Y.A.</td>
<td>7th — 12th, 2008 Grads</td>
</tr>
</tbody>
</table>

PERSONAL INFORMATION  Please print clearly!

First Name: | Last Name:     
Street Address: | City, State:  
Zip Code:       | Year In School: (as of September 2008):  
Date of Birth: | Age:           | Male | Female  
Parish Name: | Parish City:  
Camper Home Phone/Cell: (Area Code/Phone) | Camper E-mail: (Print clearly)  
Parent/Guardian Phone DAY: (Area Code/Phone) | Parent/Guardian E-mail: (Print clearly)  
Parent/Guardian Phone EVE: (Area Code/Phone) | Parent/Guardian Cell: (Area Code/Phone)  
Swim Level: (Circle) | T-Shirt Size: (Circle)  
Beginner | Intermediate | Advanced | Life Guard | Child | Adult  
| S | M | L | | | S | M | L | XL | XXL |

OFFICE USE ONLY

REC: _______________ CK1: _______________ CK2: _______________ SC: _______________  
PST: _______________ AM1: _______________ AM2: _______________ AM: _______________  
CBN: _______________ C: _______________ DC: _______________ SPR: Need: _______________
Metropolis of Pittsburgh Summer Camp 2008

FINANCIAL INFORMATION (Make checks payable to “Greek Orthodox Metropolis of Pittsburgh.” No cash.)

| CHECK HERE | $375 “Early Bird” Registration Fee  
| To be considered for the “Early Bird,” the following must be followed: |  
| • Pages 4—9 entirely completed. |  
| • Registration Fee included. |  
| • Envelope must be postmarked before/on May 15th. |  
| • A $25 LATE FEE will be assessed for any portion not received by June 1st. |  
| $400 Registration Fee  
| To qualify for this fee, the following must be followed: |  
| • Pages 4 — 11 entirely completed. |  
| • Envelope postmarked between May 16th - June 1st. |  
| • A $25 LATE FEE will be assessed for any portion not returned by June 1st. |  
| $425 Registration Fee |  
| • Pages 4 — 11 entirely completed. |  
| • All Registrations received after June 1st. |  
| Scholarship Arrangements |  
| • (Circle) Full or Partial | Amount of Scholarship $__________  
| • (Check which type) | Parish_____ AHEPA_____  
| Other __________________________ (Indicate from where.) |  
| • Metropolis_____ (Please call or e-mail the Metropolis Youth Office for an application.) |  

- I/we give consent for our child to attend and participate in the entire Camp Session requested, including athletic activities, transportation and field trips.
- I/we agree that our child will abide by all the rules and guidelines set forth by the Greek Orthodox Metropolis of Pittsburgh for the safety and good health of all the campers and staff.
- I/we also agree that if our child has to return home due to discipline violations, it will be at our own expense and I/we may be responsible for transportation. Curfew violations are grounds for immediate dismissal from camp. No partial session refund will be given. Camp Nazareth still charges us a full week price.
- I/we consent to the use of any photo, film or videotape taken during the Camp Session for publicity deemed appropriate by the Metropolis of Pittsburgh.
- I/we will be responsible for transportation for our child to/from camp and will not permit him/her to drive to camp.
- I/we will review/sign & return the Mobile Technology Covenant, the Metropolis Dress Code and “Leave at Home” List. I/we will expect our child to abide by the conditions outlined in these documents.

SIGNATURE OF PARENT(S) OR GUARDIAN(S)  

DATE
Every summer, the Metropolis of Pittsburgh offers youth of the Church a unique opportunity to retreat away from the pressures and struggles of everyday life. Encouraging participants to step away from daily habits and routines, the camp makes available a community in which participants can become immersed in an authentic Orthodox Christian atmosphere.

A major component in creating such an atmosphere is separating participants from outside influences and distractions. Of course this is a cooperative effort accomplished by campers, staff, clergy, and parents. Your participation in this effort is vital to the success and effectiveness of the camp ministry.

To this end, participants and parents are being asked now, during the registration process, to start preparing for a week away from “earthly cares,” focusing on Jesus Christ.

By initialing the points below and signing this Covenant, campers and parents show their support of the edifying environment that will be presented at the Metropolis of Pittsburgh Summer Camp and they agree to contribute to that environment in the specified ways.

**Campers (Please read and initial the following)**

- Contact with friends and family members back home by phone, e-mail, or text messaging during the camp session removes me from the focused atmosphere of the camp. For this reason, I agree to check my mobile phone in to a designated staff member upon arriving at camp.

- Use of personal gaming systems (Gameboy, PSP, etc.) and personal audio systems (i-Pods, mp3 players, etc.) are a distraction to the program and removes me from the focused atmosphere of the camp experience. For this reason, I agree to check in my personal gaming devices & personal audio systems upon arriving at camp and registering.

- Use of video production devices are prohibited by both campers and staff (unless permission is given) during the camping session. Videography may be taken on Friday evening and Saturday morning only. (Photography is permitted.)

**Parents/Guardians (Please read and initial the following)**

- I understand that being in contact with my child by phone, or text messaging during camp removes them from the focused atmosphere of the camp. As well, I understand that speaking to a parent back home worsens cases of homesickness. For this reason, I agree to refrain from contacting my child during the camp session, except in cases of emergency when I will make contact through the Summer Camp Office. All calls placed to the Metropolis Youth Office phone (412) 621-8543 will automatically be forwarded to the Camp Office. Emergency phone numbers will be available online at www.pittsburgh.goarch.org.) Likewise, should a serious need arise regarding my child, the camp will contact me immediately. You will be able to send e-mails to your child during camp. Information on the Bunk Note E-Mail Service is on Page 13.

- I feel that it is important for my child to participate in the focused atmosphere as a full participant in the camp community. For this reason, I agree to discuss this covenant with him/her prior to camp and to support its goals and methods.

**Camper Signature (required)_______________________________ Date ______/_____/______

**Parent/Guardian Signature (required)_______________________________ Date ______/_____/______
Parents & Campers,

We want to make sure that you fully understand the Metropolis Dress Code and “Leave at Home” List, so we are asking you to review this page as a family:

Due to the fact that we are in a camp setting, dress is casual. Please pack comfortable, washable clothing. In keeping with the Orthodox Christian family environment, our Metropolis camp program requires modest clothing.

No clothing with logos that contain profane language, reference to drugs, alcohol, tobacco, and violent or anti-Christian propaganda will be permitted. Consistent with the Orthodox teaching of respect for the body as a temple of the Holy Spirit and at the request of the Metropolitan, all participants in our program, may not have any visible tattoos, brandings or body piercings. (If your camper has a visible tattoo, they must keep it covered with a bandage.) Males may not wear earrings. Females may wear no more than one earring in each ear. Any piercing which may be visible must be removed prior to camp.

Girls: Mid-riff must be covered at all times. Tube tops, halter tops, tank tops, spaghetti straps, bikinis, tankinis, or 2 piece bathing suits are not permitted. No “short shorts,” short mini-skirts, or spandex. Overly tight fitting or low cut apparel is also not allowed.

Boys: Please wear swim trunks— no Speedos permitted. No “saggy-baggy” pants to be worn below the hips. No boxers may be worn as outerwear or are allowed to extend above or below shorts or pants.

All Participants: During Vespers each evening and at Divine Liturgy, no shorts are permitted. Boys must wear long pants or jeans (no holes). Girls must wear conservative long pants, jeans (no holes), skirts or casual dresses/jumpers. Skorts are acceptable if the length is mid-thigh or longer. Pants or shorts with writing on the seat are not permitted. Pajamas may not be worn as outerwear.

The Camp Director, Clergy & Staff reserve the right to ask you to change your clothing if they feel that what you are wearing is inappropriate.

Leave at Home:

Aerosol sprays  iPods and MP3s*
Alcohol, Cigarettes, Drugs  Incense & lighters
Camcorders*  Electronic games*
CD players & radios*  Grills or Hibachis
Cell phones*  Magazines

Mini-refrigerators
Pagers
Perishable Foods
Weapons

*See page 6 for explanation.

Camper Signature (required) ________________________________ Date _____/_____/_____

Parent/Guardian Signature (required) __________________________ Date _____/_____/_____
HEALTH HISTORY - For Parent to Complete

PLEASE NOTE: Original Must be mailed. No faxes or Scanned Forms.
Completed Medical Forms must be mailed to the by JUNE 1st for Camp Medical Staff to review.
Metropolis of Pittsburgh Summer Camp
5201 Ellsworth Avenue, Pittsburgh, PA 15232

Pages 1-4 are to be completed by the parent/guardian, adult camper, or staff member and reviewed by the health care provider at the time of examination. This form is used to help camp medical staff in determining appropriate care.

Emergency Contact Information

Camper/Staff Name ____________________________

Home Address ____________________________________________ Phone ____________________________
Street City State Zip Area Code/Phone

Birth Date __________ Age __________ Gender __________ Social Security # __________

Custodial Parent*/Guardian Name ____________________________ Phone ____________________________
* If the parents are divorced, this is the individual who has legal custody during the camp session.

Home Address ____________________________________________ Cell ____________________________
Street City State Zip Area Code/Phone

Business Address ____________________________________________ Phone ____________________________
Street City State Zip Area Code/Phone

Other Parent/Guardian Name ____________________________ Phone ____________________________

Home Address (If different from above) ____________________________ Cell ____________________________
Street City State Zip Area Code/Phone

Business Address ____________________________________________ Phone ____________________________
Street City State Zip Area Code/Phone

If custodial parent and other parent are not available in an emergency, please notify:

Name ____________________________ Relationship ____________________________

Address ____________________________________________ Phone ____________________________
Street City State Zip

Name of Family Physician ____________________________ Phone ____________________________

Name of Family Dentist ____________________________ Phone ____________________________

NOTE: Please bring all medications to camp in their original containers and in a plastic Ziploc bag that is labeled with the camper’s name.
**HEALTH HISTORY (Continued)**

**Insurance Information**

Does the participant have family medical/hospital insurance?  Yes  No

Carrier __________________________________________  Policy or Group # ________________________________

(Please attach a photocopy of the participant’s medical insurance card.)

Name of Policy Holder __________________________________ Relation to Participant ____________________________

SS # of Policy Holder or Insurance ID Number ____________________________________________________________

A copy of the Insurance Card must be attached here.

A copy of the Insurance Card must be attached here.

**IMPORTANT — PLEASE COMPLETE IN ORDER TO ATTEND**

**Custodial Parent or Guardian Consent:** This health history is correct and complete to my knowledge. The person described has permission to participate in all camp activities except as noted. I hereby give permission to the camp to obtain relevant health care, administer prescribed medications, and seek emergency medical treatment, including ordering x-rays or routine tests. I agree to the release of any records necessary for insurance purposes. I give permission for the camp to arrange related transportation for me/my child. The purpose of onsite camp medical staff is solely for administering medications and performing triage and minor first-aid. In the event that I cannot be reached in an emergency, I hereby give permission to the health care provider selected by the camp to secure and administer treatment, including hospitalization.

Custodial parents are responsible for ALL medical bills incurred while at camp (doctor visits, emergency room visits, and prescriptions). All attempts will be made to contact parent/guardian before taking the camper for “off camp medical care.” A description of care received will be given to the parent.

Signature of Custodial Parent/Guardian: ________________________________________________________________

Witness: ___________________________________  Date: __________________________

I understand and agree to abide by any restrictions my health care provider places upon my participation in camp activities.

Signature of minor or adult camper/staff ________________________________________ Date ____________________
## GENERAL HEALTH HISTORY

Participant has or has had any of the following: *(Please check if YES.)*

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recent injury, illness, infection</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chronic illness/condition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Surgery</td>
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<td></td>
<td></td>
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<tr>
<td>Frequent headaches/migraines</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recent head injury</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Heart murmur</td>
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<td></td>
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<tr>
<td>Diabetes</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Glasses, contacts</td>
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<td></td>
<td></td>
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<tr>
<td>Frequent ear infections</td>
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<td></td>
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<tr>
<td>Passed out during or after exercise</td>
<td></td>
<td></td>
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<tr>
<td>Dizzy during or after exercise</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>High blood pressure</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Please explain any “yes” answers:

____________________________________________________________________
____________________________________________________________________

## DATE OF LAST TETANUS BOOSTER

____________________________________________________________________

## IF FEMALE *(Please answer YES or NO.)*

Has this person menstruated? ___ If not, has she been told about it? ___ Is her menstrual history normal? ___

## ALLERGIES *(list all known)*

Describe the reaction and management of the reaction.

Medication Allergies (list) ____________________________________________
____________________________________________________________________

Food Allergies (list) - (i.e. Nuts, lactose intolerance, shell fish) ____________
____________________________________________________________________

Other Allergies (list) - (i.e. insect stings, hay fever, asthma, animal, plant, etc.)
____________________________________________________________________

## RECOMMENDATIONS AND RESTRICTIONS

Explain what limitations are necessary.

Dietary (i.e. vegetarian): no restriction restriction:_____________________

Physical Activity: no restriction restriction:_____________________

Swimming/Diving: no restriction restriction:_____________________

(Is capable of swimming the deep end of the pool?) yes no uncertain *(Certified camp lifeguard may evaluate.)*

Other restrictions: ____________________________________________________
MEDICATIONS BEING TAKEN  Please list all prescription and non-prescription medications taken on a regular basis. Please keep in original bottles labeled with health care provider’s name, phone number, dosage and instructions. Place all medicines in one plastic Ziploc bag and label with camper’s name. Have available for collection on registration day.

NOTE: It is camp policy that all medications will be kept and secured at the Camp Health Center. This includes vitamins/supplements and medications taken on an “as needed basis.” The only medicines that may be left in cabins are creams and inhalers.

Please attach additional pages for more medications. Make sure to notify the medical staff when you arrive at camp if additional medications have been added after the health form was filled out.

1) Med _____________________ Dosage ___________________ Specific times per day ___________________
   Reason for taking ____________________________________________

2) Med _____________________ Dosage ___________________ Specific times per day ___________________
   Reason for taking ____________________________________________

The following non-prescription medications may be given to my child, if needed: (Please circle YES or NO)

<table>
<thead>
<tr>
<th>medication</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tylenol/acetaminophen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advil/ibuprofen</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cough syrup, lozenges, throat spray</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Antacid</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Imodium</td>
<td></td>
<td></td>
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</tbody>
</table>

Other medications per discretion of camp medical staff

TO BE COMPLETED BY LICENSED HEALTH CARE PROVIDER

I examined this individual on ______________________ * (Exam must be performed within 12 months of camp attendance.)
BP _______________ Weight ______________ Height ______________

I have personally reviewed the above health information and activity restrictions and have made any necessary corrections or additions.

Signature of Licensed Health Care Provider ________________________________________________________

Name (printed) ____________________________________________________________________________ Title ____________________________________________
Address ______________________________________________________________________________________
Phone __________________________ Date __________________________

Screening Record (For Camp Use Only)

Meds received ____________________________________________________________

Current health needs identified ________________________________________________

Observational notes _________________________________________________________

Screened by __________________________ Date __________________________
Order the newly released

Complete Orthodox Study Bible

*A gift for a lifetime for your Camper or Family!*

The first ever full-length Orthodox Study Bible in English presents of the Bible of early church and the church of the early Bible.

Orthodox Christianity is the face of ancient Christianity to the modern world and embraces the second largest body of Christians in the world. In this first-of-its-kind study Bible, the Bible is presented with commentary from the ancient Christian perspective that speaks to those Christians who seek a deeper experience of the roots of their faith.

The Orthodox Study Bible, published by Thomas Nelson, uses the New King James Version of the Bible as the basis for a fresh translation of the Septuagint text. The Septuagint is the Greek version of the Bible used by Christ, the Apostles, and the early church.

**List Price:** $49.95 plus shipping/handling

**Your Price:** $35.00 if pre-ordered with a separate check and the form below:

Bible(s) purchased by: _________________________________________________________________

To be given to: ___________________________________________________________________

# of Bibles:_______________ Ck # enclosed ________________Amt $_____________________

*Please write separate check for the Orthodox Study Bible.*

My child is attending Session #_____________. The Bible(s) will be distributed at Registration.

Please insert a Dedication Label to read as: (Example: This Study Bible is presented to our daughter, Sophia Pappas. With love, Mama & Baba, 2008) **LIMIT 20 words or less.** Please use reverse side for other dedications.
STAY IN TOUCH DURING CAMP
with ONE-WAY CAMPER E-MAIL

We are excited to tell you about our partnership with Bunk1.com!
Bunk1’s secure, easy to use, summer website services let you stay in touch with your camper all summer!

RETURNING PARENTS: If you had an account at this camp last summer, you can continue to use your old username and password. Simply sign in at the link below. The first time you visit the site you will be prompted to update your contact information and re-activate your account.

To set up a new account and visit our Online Community:
1. Go to our website at http://pittsburgh.goarch.org/camp
2. Click the flashing “Camper Email” button*
3. Click the “Register Now” link
4. Enter your Pre-Approved Registration Code: 87692PGH**
5. Fill out all the required information
6. Purchase Bunk Note credits (you will need a credit card)
7. Send an email to your camper!

*If you can’t find this button, go to www.greekorthodoxmetropolisofpittsburghsummercamp.bunk1.com and continue on to the next step.

FREQUENTLY ASKED QUESTIONS

How do I send a Bunk Note (one-way e-mail) to my camper?
Follow the instructions above except, after registering, simply sign in and click on the Bunk Notes button. Enter your camper’s name, select the correct cabin, type your message, and hit the “Send” button.

Why do I have to pay to send Bunk Notes (one-way e-mail)?
Each morning, the Bunk Notes system bundles and sorts the messages for us to print out and distribute to campers. It also protects us from computer viruses and allows us to easily manage these e-mails. Your payment may help us cover the cost of the system, paper, ink, and labor and more importantly, frees us to do what we do best – be with your kids! Bunk Note credits cost $1 each and are purchased in packs of various sizes.

Can other relatives use these services?
Certainly. Once you have set up your account, you will be able to invite other people to access these services.

What do I do if I lost my username and password?
You can get it online by going to www.Bunk1.com and clicking on the link "Lost Your Password?” (to the left of the page below the sign in button). You will receive an email with your username and password within a few minutes.

QUESTIONS OR PROBLEMS?
Please call Bunk1 at 1-800-216-9472 or go to www.bunk1.com/contact.asp
Save the date!

Summer Camp Reunion and Greek Day at Kennywood

Tuesday, July 22nd

for the entire Family!

Admission: $20 Pre-Sale Discount Price* $11 Pre-Sale Seniors (age 55+) Free (age 2 & under)

Greek Food, Pastries, Music & Dancing!
Performances by various Dance Groups!
Greek Day Pavilion (#3, 4 & 5)

For tickets, please contact: Ypapanti/Presentation of Christ Church: 412-824-9188

Coupons may be requested for Evening Fun Pass Admission (after 5:00 p.m.)

See www.kennywood.com for information about planning your family’s trip to Kennywood.
(Directions, hotel accommodations, etc.)

For more information, please contact: the Metropolis Youth & Young Adult Ministries: 412-621-8543