

# Camp Bluebird A camp for cancer survivors.

It's time to begin the preparations for three days of fun at Camp Bluebird!

When: October 10-12, 2023

Where: Springville Camp and Conference Center

3886 Mountain View Rd #6316

Odenville, AL 35120

Start time: 10 a.m. | Tuesday, October 10

End time: 11:30 a.m. | Thursday, October 12.

### It's important that you have all of your belongings out of your room before breakfast on Thursday.

Our theme for this camp is **"Love One Another Around the World**". There will be a theme night on Wednesday if you wish to dress up for it, or just come as you are. Always remember, Camp Bluebird is a time to relax and have fun!

Our Camp Bluebird family continues to grow! Our new campers will be given priority before returning campers. All return campers will have their names drawn until all the spaces are full.

Enclosed in this packet are the forms that you will need to complete:

- Camper registration form
- Health history form
- Rules and Regulations sheet

All of these forms need to be filled out, signed and returned to me, no later than September 1.

Katherine Puckett-Record | 256-962-0558 Camp Bluebird Director Ascension St. Vincent's Bruno Cancer Center 2728 10<sup>th</sup> Ave South, Suite 100 Birmingham, AL 35205



### A camp for cancer survivors.

#### **Camper Registration Form | Please print clearly**

Name:	DOB:	Gender:
Address:		
Cell phone:	Home phone:	
Email address:	Cancer diagnos	is:
Hospital where you were treated:		
Emergency contact information: Name:	Phone number	:
Additional information:  Are you a new camper? Yes No	T-shirt size:	
I have completed the above information and responsibility for myself and further agree to officers, employees, agents or volunteers from cause by or arise out of any omission, defautionnection with this participation.	o indemnify and hold harmless As om any and all losses, damages, o	scension St. Vincent's, its costs and expenses that are
I understand that the medical information I is but may be accessed in the event that I need taken to safeguard the health and safety of a soon as possible in case of an emergency. It camp to acquire medical treatment for meand agree that I am solely responsible for meand agree that I am solely responsible for mean appropriate facilities to care for me.	d medical care. I understand that all participants and that emergen in the event they cannot be reached If I bring any personal medication aintaining and taking these medication	reasonable measures will be cy contact will be notified as ed, I hereby authorize the n to the Camp, I understand cations as prescribed. If
I hereby grant Ascension St. Vincent's and it photographs or news stories about me for p illustration, television, or scientific publication or filmed for the purpose of public information written expressions by me (such as letters)	publication in any form, but not lim on. Camp activities in which I part ion about Camp Bluebird. My perr	nited to, advertising, icipate may be photographed
Camper signature:	Date	e:



### A camp for cancer survivors.

**Camper Health History Form | Please print clearly** 

Birmingham, Alabama

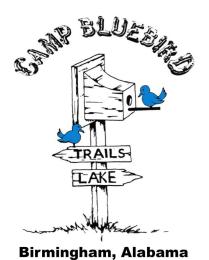
Date:	
Insurance information:	
Name:	DOB:
Insurance carrier:	Insurance phone #:
Policy holder's name:	DOB:
Contract number:	Group number:
Camper health information:	
Primary Care Physician:	Phone number:
Oncologist:	Phone number:
Date last seen by a physician:	
Date of cancer diagnosis:	
Do you have any known food and/or medication	on allergies? Yes No If yes, please list:
Do you have any dietary restrictions?	No If yes, please list:
Do you need assistance with medications?	☐Yes ☐No
Do you require special assistance? Yes	No If yes, please explain:



### A camp for cancer survivors.

#### **Camper Medication Form | Please print clearly**

Name:		DOB:			
Doctor's name:		Doctor's phone #: Pharmacy phone #:			
Pharmacy name:					
Medication	Dosage	How often taken?	Reason for taking		



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#### **Camp Rules and Regulations**

Dear Bluebird campers.

We are excitedly anticipating our next camp and, as always, our goal is that each of you has a great time while you are here. To provide for the safety and well-being of our Bluebird campers, we ask that everyone – campers, volunteers, guests and committee members – follow our rules and regulations. These rules aren't meant to hinder anyone's enjoyment of camp; rather, they have been established so **everyone** can have a great time.

- If you are sick or running a fever, please do not attend camp. If you begin feeling sick or start running a fever once you get to camp, please let the camp nurse know and make plans to go home.
- Any damage to camp property caused by a guest will be subject to charges at current contracted replacement fees. Please be sure and leave camp in the same condition that you found it.
- Camp Bluebird is not responsible for any personal items that are lost and stolen. Please leave all valuables at home or locked up in your car. You will not have a key to your room.
- Cell phones are permitted, but please place them on silent during camp activities.
- We are a non-smoking camp. This includes cigarettes, vapes, e-cigs, pipes or dipping on any camp
  grounds. You will be sent home and will no longer be allowed to attend Camp Bluebird. You will also
  be subject to any and all fumigation or clean up required to remove any odor.
- We ask our campers to show respect for other. Please speak softly between the hours of 11p.m. and 6 a.m.
- Report all accidents to the camp nurse immediately.
- If a camper is injured or becomes ill and is taken to the hospital, upon release, the camper must be picked up by a family member or friend to be taken home.
- Campers are not allowed to drive the golf cart or to hang onto the golf cart. They must remain seated.
- Firearms, other weapons, fireworks and incendiary devices are prohibited. Any camper who violates this rule will be asked to leave the premises immediately.

Please treat one another with respect and dignity. Disorderly conduct will not be tolerated. We reserve the right to ask a camper to leave camp, at their expense, based on violation of camp rules.

Please read these rules carefully and sign below that you understand and agree to abide by the rules.

Signature: Date	:
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