

Texas Junior Orienteering Camp (TJOC)

TJOC is an orienteering camp for experienced junior orienteers. Our goal is to field competitive junior orienteers from the Southwest who can compete and win at the National and International levels! The camp is a joint effort by the North Texas Orienteering Association (NTOA) and the Boy Scouts of America (BSA) Longhorn Council.

The camp will be from 2-7 June 2019 at Sid Richardson Scout Ranch (SR²) near Bridgeport, Texas.

The camp is for any experienced junior orienteer (ages 13-19 years) in excellent health and physical condition, who has competed on/completed at least one orange, brown or green orienteering course. See the prerequisites for each level of training. Applicants will be categorized based on their orienteering experience and coach's recommendation.

The cost for the camp is \$300. The camp fee includes lodging, meals, a TJOC T-shirt, training materials and maps, all orienteering training, as well as other adventure training activities. **Want to pay less for TJOC? Speak to your coach or local club about scholarship opportunities.**

You (and/or your coach) must provide:

1. Transportation to and from TJOC
2. A vehicle and driver/coach/chaperone that can remain with you during camp
3. Individual orienteering equipment and supplies (see equipment list)
4. Personal clothing and equipment

Junior orienteers: You are expected to participate in all training and to assist with cleaning, laundry and similar duties. This is not a relaxing, laid-back camp. You are going to work your tail off—and you are going to have a **TEXAS-SIZED** adventure you'll always remember!

Coaches: You are responsible to prepare your orienteers to be successful at TJOC and to arrange any necessary transportation, vehicles to remain on site, chaperones, orienteering equipment, or other requirements.

If you want to know more, contact the TJOC Camp Director: Lt Col William Malpass, wmalpass@pasadenaisd.org.

Prerequisites, Individual Equipment and Skills

All Levels:

Prerequisite: Positive attitude! And no couch potatoes! Be physically active, as demonstrated by running 5K in 28 min (male); 34 min (female). (Certified by coach.)

Clothing & Equipment: All participants must bring at least 4 complete changes of clothes, and an extra pair of closed-toe shoes (3 total pairs of shoes). All clothing must be school-appropriate. Check with your coach if you have questions. T-shirts, shorts and running shoes are appropriate for most non-orienteeing activities. (NOTE: Shorts are NOT RECOMMENDED for orienteeing events. See the orienteeing equipment list below.) CONSERVATIVE swimsuit (Boys: no speedos; Girls: one-piece suit). Wet weather gear (poncho, ball cap, etc.) recommended. Sandals, flip-flops (shower shoes), wraps, pajamas, and other casual clothing are permitted for some after-hours activities but are not required.

General Equipment: Insect repellent, sun block, glasses and/or sunglasses, duct tape, toiletries, aspirin or ibuprofen (check with your coach before bringing), small first aid kit, soap, shampoo, laundry detergent, mesh laundry bag, sleeping bag/pillow, washcloth, at least 2 towels, flashlight or headlamp, extra batteries. Pencils, pens, colored pencils, markers, pencil sharpener, spiral notebook, 3-ring binder, notebook paper, etc. recommended.

Orienteering Equipment:

- Hands-free water carrier (required on all courses)
- Whistle (required on all courses)
- Watch w/ lap timer (required on all courses)
- 2 compasses (1 spare)
- E-punch (A limited number will be available at camp if you don't have one)
- Running/Trail/O-shoes; 2 pairs
- Eye protection
- Gaiters
- Thornknickers, running pants, long-sleeve t-shirts and other protective clothing
- Punch card holder
- Clue card holder

Other Equipment: Cell phones, devices, charging cords, cameras, etc.: Check with your coach before bringing. (Note: There is typically very limited 4G LTE signal strength at Sid Richardson Scout Ranch and no WiFi access for junior orienteeers.) Scissors, pocket knives, etc.: Check with your coach before bringing.

Intermediate Level:

Prerequisite:

Experienced Orange Level or higher
Competed at Orange level in at least one meet the past year

Sample Skills:

- Read Clue cards in IOF symbols
- Map folding
- Taking a bearing
- Know basic IOF map symbols
- Pace count (walk/run/uphill, etc.)
- Applying “a system”
- Understand O-jargon/vocabulary

Advanced Level:

Prerequisites:

Experienced Brown Level or higher
Competed at Brown level in at least one meet the past year

Sample Skills:

- Route choice strategies
- Navigation techniques
- Able to stay in contact w/map
- Be able to Mentor/Teach

TJOC starts Sunday, 2 June 2019 at 12:00 noon and ends Friday, 7 June 2019 at 4:00 pm. If your group would like to arrive or depart early/late, please contact the TJOC Camp Director: Lt Col William Malpass, wmalpass@pasadenaisd.org.

Location is Sid Richardson Scout Ranch (SR2) near Bridgeport, Texas. See http://www.longhorncouncil.org/wp-content/uploads/2014/10/sid_large2004.gif.

We will be located at **Lakeview Lodge**.

Application Checklist and Timeline

Application Deadline: Pages 5-10 of this application must be completed, signed, witnessed, SCANNED AND EMAILED (preferred), faxed, or postmarked no later than 10 May 2019.

1. Scan and email to wmalpass@pasadenaisd.org. If not emailed,
2. Fax to Lt Col William Malpass at 1-713-740-4158. If not faxed,
3. Mail to payment address:

TJOC Payments
 c/o Mary Lynn Genovesi
 883 St James Dr
 Fairview, TX 75069

Payment Deadlines: \$300.00—checks/money orders ONLY made out to “TJOC” (*DO NOT SEND CASH through the mail!*) according to the following payment schedule:

Payment in full of \$300 or \$100 deposit.....Postmarked no later than 12 April 2019.
 Remaining payment of \$200.....Postmarked no later than 10 May 2019.

Mail ALL PAYMENTS to this payment address:

TJOC Payments
 c/o Mary Lynn Genovesi
 883 St James Dr
 Fairview, TX 75069

PLEASE NOTE: ALL PAYMENTS MUST BE MAILED TO THIS PAYMENT ADDRESS. OTHER ADDRESSES FROM PREVIOUS CAMPS WILL NO LONGER WORK!

Pages 5-10 are these forms:

- Application - Texas Junior Orienteering Camp (2 pages)
- Parent/Guardian Agreement/Release/Permission
- Covenant Not to Sue
- Consent to Medical Treatment Form
- Individual Health and Medical Record

Check your application package before sending:

- If you are under 18 years old, a parent or guardian must sign the appropriate forms!
- There is ***no requirement for a Notary Public***. The witness can be any adult.
- ***You must have a coach, instructor or adult group leader certify*** that you meet the prerequisites for attending TJOC.
- All forms must be legible, complete and properly filled out.

Application - Texas Junior Orienteering Camp (TJOC)

Full Name: _____ "Go-By" Name: _____

Address: _____ City, State: _____ Zip Code: _____

Cell Phone Number: _____ 2nd Phone: _____

E-mail address: _____

Name of School/Club/Organization and Location: _____

Gender: M F Year of birth: _____

T-shirt Size: XS S M L XL XXL E-punch number: _____

Are you a swimmer? Non-swimmer weak medium strong Red Cross certified lifeguard

Parent Contact: Name: _____ Cell Phone: _____

E-mail: _____

Coach Contact: Name: _____ Cell Phone: _____

E-mail: _____

Coach or adult club leader, please certify that this applicant meets the physical prerequisites for TJOC:

I certify that the applicant meets or exceeds the physical prerequisites for TJOC

5km time: _____

Signature of Coach: _____ Title: _____

Orienteering Training and Experience:

How many years have you been orienteering? _____

What is the highest level you have competed in? White Yellow Orange Brown Green Red

Please list your orienteering experiences during the past 12 months below. If you previously participated in TJOC, please include that information also, including the year(s) you participated. Here is what you need to list:

Date(s), Meet Name, Sponsoring Club, Course Level (W,Y,O,B,G,R)

Which experience from the list above are you most proud of, and WHY?

**Texas Junior Orienteering Camp (TJOC)
Parent/Guardian Agreement/Release/Permission**

I give my permission for my son/daughter _____ to participate in the Texas Junior Orienteering Camp. I understand activities will include orienteering training (70% of the camp), physical fitness activities, rappelling, aquatics and other physically demanding activities. I understand that if my participant is unable to meet the physical requirements of camp that I may be notified to come and pick up my participant.

I understand that a Zero Tolerance policy on participant conduct and behavior (conduct, drugs, tobacco, public displays of affection, etc.), similar to most school districts, will be in effect at all times during this camp. It will remain in effect until the participants are released from camp. If a participant should violate the rules, the parent/guardian may be notified to come and get their participant.

I understand that I may be charged for any damage to the camp facilities and I accept full responsibility for my participant's actions during this camp.

I understand that all participants will share in common camp tasks such as cleaning of common areas. The Camp Director and Staff will make these assignments and all participants are expected to do their share.

To the best of my knowledge, my son/daughter is in good physical condition. Participation in TJOC, in my opinion, will not have an adverse effect on his/her health and well-being. I will inform the Camp Director of any changes.

Medical support on site will be first aid provided by Camp Staff which includes a registered nurse or EMT. Any participant requiring medical care beyond first aid will be sent to local hospitals and clinics. Participants will be financially responsible for any medical requirements beyond that provided by camp staff.

All medications that the participant is taking should be given to the camp medical officer for appropriate dispensation according to the instructions from the parents and/or doctor.

I understand that my child will be unable to attend the camp without this signed agreement/ release form and agree to the provisions outlined above.

Signature of participant: _____

Signature of parent: _____

COVENANT NOT TO SUE
OFF-CAMPUS TRAINING AND PRACTICAL FIELD/HIGH RISK TRAINING
Texas Junior Orienteering Camp

(1) PRINCIPAL PURPOSE: To release the host institutions and the state in which said institutions are located from liability for injury, death, or damages for participants in Texas Junior Orienteering Camp participating in voluntary off-campus training programs, practical field, and high risk training.

(2) ROUTINE USES: Normal personnel actions. Disclosures of information may be provided to proper authorities in actions regarding law enforcement, legal actions as a result of injury or death, and investigations of accidents resulting from such voluntary off-campus training programs, practical field, and high risk training.

(3) MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION: Voluntary. Failure to complete form will disqualify applicants from participating in Texas Junior Orienteering Camp.

I _____, residing at _____, _____
 (Print full name) (Address) (City and State)

do hereby agree that in consideration for being allowed to participate in Texas Junior Orienteering Camp, conducted by the Texas Junior Orienteering Camp association (consisting of the North Texas Orienteering Association and the Boy Scouts of America Longhorn Council) supervised activity, and whereas I am doing so entirely on my own initiative, risk, and responsibility; and being fully aware of the risk adhering to this type of training, I hereby RELEASE AND DISCHARGE FOREVER, the State of Texas and the Texas Junior Orienteering Camp association and all of its officers, agents, and employees, acting officially or otherwise from any and all claims, demands, actions or causes of action, on account of myself OR on account of any injury to me which may occur from any cause during said activity or continuances thereof, and I do further covenant and agree to hold the State of Texas and the Texas Junior Orienteering Camp association and all of its officers, agents, and employees, acting officially or otherwise, blameless for any and all damages which I may cause either intentionally or through my negligence.

 Printed Name of Parent or Guardian if
 Participant is a minor

 Signature of Parent or Guardian if
 Participant is a minor

 Relationship to Participant

 Date

WITNESSED BY:

Period Covered: 2-7 June 2019

 Signature of Witness

 Signature of Participant

CONSENT TO MEDICAL TREATMENT

STATEMENT REQUIRED BY PRIVACY ACT OF 1974

(1) PRINCIPAL PURPOSES: A statement authorizing medical care in civilian or government medical facilities while attending Texas Junior Orienteering Camp.

(2) ROUTINE USES: Normal personnel actions: Disclosure of information may be provided to proper authorities in actions regarding medical treatment, legal actions as a result of injury or death, and investigation of accident resulting from Texas Junior Orienteering Camp.

(3) MANDATORY OR VOLUNTARY DISCLOSURE AND EFFECT ON INDIVIDUAL NOT PROVIDING INFORMATION: Voluntary. Failure to complete form will disqualify applicants from participating in Texas Junior Orienteering Camp.

I _____, consent to be treated in any government or civilian medical facility, near or enroute to the Texas Junior Orienteering Camp near Bridgeport, Texas during the period 2-7 June 2019. This consent encompasses all procedures and treatments as are found to be necessary or desirable, in the judgment of the professional staff of any of the above-named medical facilities. I understand that this consent is of a general nature and accordingly list the following exceptions to this consent (if no exceptions, please write "No Exceptions")

I (am) (am not) on medication. (List type, if on medication)

I (am) (am not) allergic to medication. (List type, if allergic)

It is understood that this consent can be withdrawn in writing or orally at any time.

Signature of Witness

Signature of Participant

Print Name of Witness

Print Name of Participant

PARENT OR GUARDIAN: (When participant is a minor or unable to give consent), I

_____, parent/guardian of _____ have read and understood the above consent to treatment and hereby expressly consent to the above-described treatment.

Signature of Witness

Signature of Parent

Print Name of Witness

Print Name of Parent

Individual Health and Medical Record: TJOC							
Please PRINT all information LEGIBLY. Use back of form if necessary.							
IDENTIFICATION				Date:			
Full Name and Birthdate							
Name of Emergency Contact							
Work Address and Phone #							
Home Address and Phone #							
ALTERNATE EMERGENCY CONTACTS							
1	Relationship:				Phone:		
2	Relationship:				Phone:		
Name of Family Doctor:					Phone:		
Name of Dentist:					Phone:		
PERSONAL INSURANCE CARRIER							
Name of Insurer:					<i>Provide copy of Front & Back of Insurance Card</i>		
Address:							
Phone:		Policy #:					
Name of Insured:							
MEDICAL HISTORY							
Circle all items that apply, past or present, to your health history. This will NOT effect your TJOC eligibility.							
ALLERGIES:		Plants	Insects	Medicines	Food		
ADHD		Back Pain/Injury		Digestive Problems			
Asthma/Wheezing		Chest Pain		Dizziness/Fainting			
Bleeding Disorder/Nosebleeds		Convulsions/Seizures		Headaches/Migraines			
Bone Fracture/Joint Injury		Diabetes		High Blood Pressure			
Skin Problems		Other					
Explain any circled items:							
MEDICATIONS							
Please list ALL medications taken in the 30 days prior to arriving at TJOC:							
List any medications, dosage and schedule to be taken at camp:							
List any physical or behavioral conditions that may affect or limit full participation in swimming, running, hiking long distances, or playing strenuous physical games:							
List equipment needed such as supports, braces, glasses, contact lenses, etc							
IMMUNIZATIONS		(Give date of last inoculation.)					
Diphtheria, Pertussis, Tetanus (DPT)				Tetanus Booster			
Measles, Mumps, Rubella (MMR)				Hepatitis B Vaccine			
		Polio		Other (Specify)			