



# Jõekääru Kalev Võrkpallilaager

## 2024 Registration Package



In its 15<sup>th</sup> year of young athlete development, Jõekääru Suvekodu Selts (JSS) / Estonian Camp Udora, Inc. and Kalev Volleyball Club once again bring you an exhilarating week at...

### Jõekääru Kalev Volleyball Camp

#### Address

Estonian Camp Udora  
38 Viru Avenue  
Udora, ON L0C 1L0

email: [joekaaru@hotmail.com](mailto:joekaaru@hotmail.com)  
website: [www.joekaaru.com](http://www.joekaaru.com)  
Tel.: (705) 228-8173 (Emergencies ONLY)

#### Duration

**Arrival:** Saturday, July 20, 2024

**Registration:** 11:00 a.m. – 1:00 p.m.

**Opening Ceremonies:** 1:00 p.m.

**Tournament Day:** Friday, July 26<sup>th</sup>, 2024

**Departure:** Saturday, July 27<sup>th</sup>, 2024

**Closing Ceremonies:** 11:00 a.m.

#### Participation

Jõekääru Kalev Volleyball Camp accepts participants between the **ages 8-17** years of age. Our CIT (**Coaches in Training**) program is available to interested participants 18+ yrs. For more information/registration regarding the CIT program, please contact Taimo Ilves at [ilvest3@hotmail.com](mailto:ilvest3@hotmail.com).

#### IMPORTANT

**This camp is a highly active (approximately 6 hours of volleyball training a day) training camp for children WITH ALL ABILITIES! Beginners to advanced participants are ALL welcome. We cater to the children who just want to have fun (and LOTS of fun it is!) as well as to those who are seeking a greater skill development.**

**We try to maintain a 1:6 trainer to camper ratio to help the children develop their skills and learn to play great volleyball. We also have regular camp counselors available during this time.**

#### Registration

The Early Bird registration deadline for discounted rates is until May 15<sup>th</sup>, 2024.

#### The Participation Fees

The discounted rate of \$605.00 CAD (\$440.00 USD) per child is available until May 15<sup>th</sup>, 2024 (post-dated cheques are accepted. First cheque must be dated May 15<sup>th</sup>, 2024).

The full camp fee is \$655.00 CAD (\$475.00 USD) per child if received after May 15<sup>th</sup>, 2024.

As a result of costs and labour to maintain the Jõekääru ground facilities, we have implemented an additional fee of \$175.00 CAD (\$130.00 USD)/family OR a one 7-hr workday, per family. Pre-camp 2024 workdays are May 4<sup>th</sup>, May 11<sup>th</sup>, and June 22<sup>nd</sup> at Jõekääru Camp. We hope to see you there!

**NOTE:** If your family has any children that attend regular camp, there is no additional cost or workday required for JK Volleyball camp.

Camp fees include the cost of a volleyball camp t-shirt!

Participating campers are required to have their own volleyball at camp. If they do not yet own a quality volleyball, they will be available for purchase at a cost of \$70.00 CAD (\$50.00 USD) during registration.



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### JKVL - Competition, Games' Day and Awards Ceremony

Friday, July 26<sup>th</sup>, 2024 we invite all family and friends to come celebrate our 15<sup>th</sup> year, and watch their children demonstrate their skills in the Annual **Tournament of Champions**. Lunch and dinner on Friday can be purchased at Jöekääru, however, we do ask to RSVP with the Registrar.

### Donations

We gratefully accept all donations (money, labour, materials, and expertise) to help with rebuilding/renovating our facilities and to help improve our sports programs.

### Medical Form

The Medical Form needs to be completed **in full** and either mailed with Registration Forms or brought to the registration desk upon arrival. **Health Card numbers** and **Vaccination Summary** must be included on the Medical Form; if not, children **will not** be permitted to stay at the camp. Please ensure your child is in good health and does not have any communicable diseases, prior to coming to camp.

**NOTE: Please complete the new Head Check Form 72 hours before arriving at camp**

### Age Groups in each "Tare" Bunkhouse

(**Note:** placement in volleyball training groups is dependent on age AND skill, not "tare"/cabin placement)

Junior/Keskmised	8 – 13 years old
Senior/Suured	14 – 17 years old

### Summer Camp's Discipline

All campers must abide by the summer camp's discipline policy. If unwilling to do so, your child will be sent home. Malicious damage to camp property is to be repaid in full by parents. No personal food or drink items are allowed in the "tared"/cabins as per regulations set by the Ontario Ministry of Health.

### Upon Arrival

- 1) WELCOME TO JKVL!
- 2) Please sign-in with the camp Registrar at the main hall PRIOR to moving into cabins.
- 3) Provide the Registrar with any updated information pertaining to your child(ren).
- 4) Have your child(ren) pick up their t-shirt and any other camp "swag" for purchase.
- 5) Locate your child(ren)'s cabin and counselor and move in your child's belongings.
- 6) Parents prepare for your child(ren) to have a fantastic week!



# Jõekäärü Kalev Vörkpallilaager

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### Registration Form

Insert picture here OR Send as separate file	<b>Camper Name:</b>	
	<b>DOB:</b> (MM/DD/YYYY)	<b>Age (while at camp):</b>
	<b>Address:</b>	
	<b>City, Province:</b>	<b>Postal code:</b>
	<b>E-mail:</b>	
	<b>Home Tel:</b>	
	<b>Name of parent 1:</b>	<b>Name of parent 2:</b>
	<b>Email:</b>	<b>Email:</b>
	<b>Cell:</b>	<b>Cell:</b>
	<b>Work phone:</b>	<b>Work phone:</b>
<b>Custody: Y/N</b>	<b>Custody: Y/N</b>	

**We are registering our child for the 2024 Jõekäärü Kalev Volleyball Camp:** Saturday, July 20 – 27th, 2024.

#### REGISTRATION FEE

<b>***Early bird*** BEFORE May 15, 2024</b>	<b>\$605 CAD/\$440 USD</b>	
<b>AFTER May 15, 2024</b>	<b>\$655 CAD/\$475 USD</b>	
<b>Attending WORK DAY (select one date), OR</b> Please send payment in lieu of work day (\$175.00/family) <i>NOTE: If your family has any children that attend regular camp, there is no additional cost nor work day required</i>	Saturday, May 4, 2024 Saturday, May 11, 2024 Saturday, June 22, 2024	
<b>DONATION TO HELP IMPROVE PROGRAMS AND FACILITIES:</b> If a tax receipt is required, please make donation cheque payable to Eesti Sihtkapital Kanadas (ESK)	<b>\$175 CAD/\$130 USD</b>	
All campers require their own volleyball, available for pick up at registration:	<b>\$75 CAD/\$55 USD</b>	
<b>TOTAL ENCLOSED:</b>	<b>\$175 CAD/\$130 USD</b>	

Please describe your child's volleyball experience and ability below:

**T-SHIRTS:** Please select **one** size (Women's sizes are NOT available, please select appropriate men's size):

	<b>XS</b> <small>(if available)</small>	<b>S</b>	<b>M</b>	<b>L</b>	<b>XL</b>	<b>2XL</b>
<b>Mens</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please return all registration forms, together with payment made out to "Estonian Camp Udora" or "Jõekäärü Suvekodu Selts" **by May 15<sup>th</sup>, 2024** for **EARLY BIRD** registration to our volleyball camp registrar (there is a \$25.00 admin fee for cancellations).

#### JKVL Registrar

**Email:** Joekaaruregistrar@hotmail.com  
www.joekaaruu.com

This will certify that I will hold harmless the camp councellers and Jõekäärü Suvekodu Selts/Estonian Camp Udora/Kalev Sports Club from responsibility from any unforeseen accidents while my child is in camp. JSS will not be responsible for lost, stolen or damaged items. Electronics (cell phones, ipods, Nintendo DS, etc.) should be left at home.

\_\_\_\_\_  
Parent / Guardian signature

\_\_\_\_\_  
Date



# Jõekäaru Kalev Võrkpallilaager

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### Medical Form



Name of camper:		DOB (mm/dd/yy):		Age:	
Address:		City/PROV:		Postal code:	
Name of parent:		Home tel.:		Work tel.:	
Email:				Cell:	
Name of parent:		Home tel.:		Work tel.:	
Email:				Cell:	
(Ontario residents only) OHIP card #:					
Name of Insurance Carrier:			Insurance card #:		
Credit Card #: (if out of Country)			Expiry:		
Family Doctor:			Tel.:		
Emergency Contact: (other than parent)			Relationship to camper:		
Home tel.:		Work tel.:		Cell:	

**IMPORTANT:** In case of a visit to the hospital or local health clinic, parent(s) or emergency contact **WILL** be contacted. There may be a possibility that, if deemed pertinent by the health care provider, the child may need to be picked up from camp/hospital. Please ensure that either the parent(s) or emergency contact is available during the time the child is at camp.

#### Medically Diagnosed Allergies and Medication Information

<b>Foods:</b>	<b>Drugs:</b>	<b>Other:</b>
Is your camper bringing medications to camp? <input type="checkbox"/> Yes <input type="checkbox"/> No		
All medications (including vitamins and pain killers) must be given to the Camp First Aid person and stored at the First Aid station. Medication name, dosage, administration time(s), & reason for taking (please add separate sheet). Additionally, please inform us if your camper takes medication during the year that will not be sent to Camp this summer. * We strongly recommend that regular medication routines continue while your child is at Camp.		

1. Tetanus (DPTP) Immunization Date: **MANDATORY: (mm/dd/yyyy)** \_\_\_\_\_
2. Has your camper received **regular immunization** since birth?  Yes  No
3. Are there **immunizations you have chosen not** to give your camper?  Yes, please specify \_\_\_\_\_  No
4. Please check off any **medical conditions, physical limitations or other concerns** that may affect your camper's stay at Camp:
  - Anaphylactic Allergy** (please specify allergy) \_\_\_\_\_
    - Will your camper bring an epipen to camp?  Yes  No
    - My camper should carry his/her epipen with him/her at all times.  Yes  No
  - Asthma** - will your camper bring an asthma inhaler to camp?  Yes  No
    - I give permission for my child to keep in his/her cabin and /or on his/her person an inhaler, which the camper will administer as prescribed.  Yes  No
- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Diabetes          | <input type="checkbox"/> Had Chicken Pox?     | <input type="checkbox"/> Sports Related Injuries      |
| <input type="checkbox"/> Epilepsy          | <input type="checkbox"/> Bed Wetting          | <input type="checkbox"/> Operations for:              |
| <input type="checkbox"/> Digestive upsets  | <input type="checkbox"/> Ear Infections/Tubes | <input type="checkbox"/> Behavioural/Mental Diagnosis |
| <input type="checkbox"/> Throat Infections | <input type="checkbox"/> Migraine Headaches   | <input type="checkbox"/> Other                        |
5. **Head check** completed in the 72 hours before arrival?  No  Yes Date (mm/dd/yyyy): \_\_\_\_\_

**Additional Comments as applicable:**

If my child becomes exposed to an infectious disease prior to coming to camp, I will notify the staff. I hereby give permission that the aforementioned camper may be taken to an available medical doctor or hospital for treatment, should it be required. I agree to accept financial responsibility in excess of the benefits allowed by Ontario Health Insurance and/or Travel Health Insurance plans. My credit card will be used to pay for medical expenses, if needed, at the time of treatment. To the best of my knowledge the aforementioned camper is in good health, free from communicable diseases, and is fit to participate in camp activities, except as previously indicated. The undersigned covenants and agrees to indemnify, defend and save harmless The Estonian Women's Society of Toronto and/or its' employees from and against all claims, actions and suits whether groundless or otherwise and from and against all liabilities, losses, damages, costs, charges, counsel fees and other expenses of every nature arising directly or indirectly out of or in consequence of by reason of or as a result of any inadvertence, accident, oversight or neglect.

**Parent's/Guardian's**

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



# Jõekäärü Kalev Võrkpallilaager

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### General Summary Form



To be completed by parent or legal guardian, and given to your child's counsellor before first day of admittance into camp.

NAME: \_\_\_\_\_

AGE: \_\_\_\_\_

SWIMMING ABILITY: \_\_\_\_\_

**SUMMARY OF CAMPER NEEDS:**

	Please describe in detail
Food allergy	
Drug allergy	
Other allergy	
Medical condition	
Medications	
Dietary restrictions	
Behaviour issues	
Previous or existing musculoskeletal or sports injury	
Other	

### Head (Lice) Check Form

**DUE AT REGISTRATION**



# Jõekääru Kalev Võrkpallilaager

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**Camper Name:** \_\_\_\_\_

**72 Hours Before Departure to Camp**

Date: \_\_\_\_\_

I have check this child's head for lice.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

No live or dead lice or nits were found.

Lice or hits were found, and the following treatment took place:

\_\_\_\_\_  
 \_\_\_\_\_

I witnessed the head check and understand the Camp's policy regarding head lice and nits (below).

Parent/Guardian Signature: \_\_\_\_\_

**Policy Regarding Head Lice or Nits**

Please note:

- 1) No camper with head lice or nits will be allowed to stay at camp. Understand that we will send children home who have any evidence of head lice or nits in their hair. We will NOT treat children for head lice or nits. We will, however, treat your child with the utmost respect and care during this process.
- 2) Any child sent home during the Registration process for evidence of head lice or nits may not return to camp.
- 3) The camp is not responsible for any fees or payment lost due to a child being sent home from camp.

**At Check-In (FOR CAMP USE ONLY)**

Date: \_\_\_\_\_

I have checked this child's head for lice.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

No live or dead lice or nits were found.

Lice or hits were found, and the person transporting the child to camp was notified and shown.



# Jõekääru Kalev Võrkpallilaager

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### Release and Consent Form

#### FOR THE PARENT:

This will certify that I will hold harmless the camp counselors/trainers and/or Jõekääru Suvekodu Selts / Estonian Camp Udora from responsibility from any unforeseen accidents while my child is in camp.

#### MEDIA RELEASE

I, the undersigned, do hereby permit Estonian Camp Udora ("The Camp") to use the image of my child/ward. Such use includes the display, distribution, publication, transmission, or other use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the Camp web site ([www.joekaaru.com](http://www.joekaaru.com)).

*I have read and discussed the above policies with my child/ward, and I agree to abide by them.*

\_\_\_\_\_  
Parent/Guardian's Name

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

#### FOR THE CAMPER:

#### BEHAVIOUR

Estonian Camp Udora ("the Camp") gives young Estonians the chance to live together as a community. A strong community is built on respect, trust, and acceptance.

I understand that in this community, the use of slander, threats or any other method of demeaning others is unacceptable. I agree not to verbally, physically or emotionally harm community members.

With my signature, I will abide by the expectations set forth by the Camp Director, counselors and staff and will, with consult from my camp counselor, right any wrongs that have been committed.

Failing to follow the agreed upon contract will result in parental consultation and may result in dismissal from camp (*Note: any fees that remain on account will not be refunded, if the camper is dismissed*).

#### ALCOHOL, DRUGS & SMOKING (ages 11 and up)

One of today's society's biggest concerns with youth is the experimental use of alcohol, illicit drugs and cigarettes. Since smoking cigarettes, consuming alcohol and using recreational drugs is illegal for the children attending our camp, we are asking children and their parents/guardians to help ensure that we are not faced with a situation where a camper has to be sent home. Any camper found in possession of, or under the influence of illegal drugs or alcoholic beverages will be subject to immediate dismissal from camp. The child's parents/ guardians will be contacted, and will be asked to pick up their child at the earliest opportunity. If a camper is dismissed during the last week of their planned stay, they will not be allowed to return the following year.

#### LOST OR STOLEN ITEMS

The Camp will not be responsible for lost or stolen items. Internet-enabled electronics (cell phones, laptops, Nintendo DS etc.) are not allowed and should be left at home.

*I have read and discussed the above policies with my parent/guardian, and I agree to abide by them.*

\_\_\_\_\_  
Camper's Name

\_\_\_\_\_  
Camper's Signature

\_\_\_\_\_  
Date



# Jõekäärü Kalev Võrkpallilaager

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### Clothing and Accessories List

The following is a list of suggested clothing and accessories campers should bring to camp. The clothing should be durable, comfortable, and allow for sustained daily physical activity (rain or shine).

#### Daily Clothing

- 7 Athletic t-shirts and/or tank tops
- 3 long sleeve shirts
- 5 pairs of shorts
- 3 pairs of long pants
- 2 bathing suits
- 7 pairs of underwear
- 1 tracksuit/sweats
- outfit for Saturday night party!

#### Outer Wear

- 1 fleece jacket and/or windbreaker
- rain gear (optional)

#### Miscellaneous

- 1 labelled water bottle (for sale at camp)
- 2 hats
- 1 pair of sunglasses
- insect repellent
- sunscreen
- protective lip balm
- camera (optional)
- small flashlight
- 1 good outdoor volleyball (for sale at camp)

#### Sleeping Gear

- sleeping bag/warm blanket
- pillow and extra pillow case
- set of bed sheets
- 2 sets of pyjamas
- 1 outdoor blanket (optional)

#### Toiletries

- 2 large towels (swimming & showering)
- soap and container
- toothbrush and toothpaste
- shampoo
- laundry bag
- 2 sweat towels
- Anti-chaffing gel! (sweat + sand = not fun!)

#### Footwear

- 7 (at least) pairs of cotton socks
- 2 pairs of proper running shoes/sneakers
- 1 pair of sandals
- 1 pair of rubber boots (optional)

#### Additional Information for Parents

1. Please give all medications, vitamins and/or supplements to the camp nurse/doctor. Please ensure that you discuss your child's needs with his/her counselors and trainers.
2. It is strongly recommended that your child does not bring individual electronic devices (MP3 players, ipods, hand-held gaming devices, etc.) as they discourage socialization amongst other campers and may get lost.
3. On Friday night, there will be a final celebration with a dance. Campers are encouraged to wear appropriate dress-attire.
4. Campers are not permitted to bring any additional food or drinks.

**Please ensure all items are clearly labeled with the camper's name.**