Adventures in Healthcare Camp 2020

BJC HealthCare, through BJC School Outreach and Youth Development and participating hospitals, Barnes-Jewish Hospital, Barnes-Jewish St. Peters Hospital, Christian Hospital, and St. Louis Children’s Hospital, are pleased to invite incoming 7th or 8th grade children of employees to submit an application for a fun and educational week-long camp to be held the week of July 13th-17th, 2020. If accepted, your child will explore careers such as nursing, radiology, pharmacy, respiratory care, health information technology and many more through hands-on, interactive activities, tours and presentations.

A limited number of participants will be accepted at each site. Acceptance is based on:

- A completed application form.
- Your child must be going into the 7th or 8th grade for the upcoming 2020-2021 school year.
- An essay written by your child. Use space on the application form or a separate sheet. Essay topics are listed on the essay form.
- A letter of recommendation from a school teacher, counselor or principal. Please attach this recommendation to the application.
- A check or money order for the $40 fee, made payable to BJC HealthCare. This fee will cover lunches and other activities for the week.
- Return the completed application, essay, letter of recommendation and $40 fee by April 24, 2020. All required documents must be submitted together to complete your child’s application. Mail entry to:

BJC School Outreach and Youth Development
4590 Children’s Place, Suite 6401
Mailstop: 90-29-927
St. Louis, MO 63110
ATTN: Jackie Bernstein, Adventures in Healthcare Camp

Notification and Refund Policy

- If your child is accepted, an acceptance letter will be mailed or emailed to you. This letter will have more detailed information about the camp and may have additional forms to complete.
- Camp is held July 13th-17th, 2020 from 9:00 a.m. – 2:00 p.m. each day.
- Employees are responsible for making sure their child arrives and departs on time each day.
- Participants are expected to attend camp every day.
- If additional information is needed, the parent listed on the application will be contacted by phone or email. Please print contact information clearly on the application.
- If your child is not accepted, you will be notified and your check or money order for $40 will be returned to the address provided on your child’s application.

**Due to a high volume of applicants in years past, children of employees who have not yet experienced the camp will be considered first. If there are additional spots available, we will then consider children of non-BJC Employees and returning campers. Please contact us via email at schooloutreach@bjc.org for more information.**
Additional Information:

- Students accepted into the camp will be informed of their acceptance and the location of the camp by May 15, 2020. Unfortunately, we will not know the status of your child’s acceptance before the application deadline.

- Each camp location will have a camp director that will inform students of where to report and will send additional information about that particular location, once accepted.

- Students will report to their accepted location on Monday, July 13th through Thursday, July 16th from 9:00 a.m. - 2:00 p.m. On Friday, July 17th, all camp locations will be taking a field trip to Washington University School of Medicine (WUSM), so they may be asked to arrive at their meeting place earlier on this day to arrive at WUSM by 9:00 a.m. Transportation will be provided for the necessary locations.

- The $40.00 fee for camp will include: lunch, light snacks for the week and a T-shirt. Students may also receive a pair of scrub pants, courtesy of Phoenix Textile Corporation. Each location’s lunch options will vary. Please include any dietary concerns on this application. Students may also want to address any allergies or concerns with their camp director.

- On Friday, July 17th, lunch will be provided by BJC School Outreach and Youth Development. If your child has special dietary needs, please contact BJC SOYD at 314-268-0460 for additional information.

- Lunch order forms for Friday will be distributed to students on the first day of the camp.

- Camp directors can use their discretion regarding students who are unable to follow the rules. In some cases, students who break the rules may not be allowed to attend camp for the remainder of the week.
2020 Adventures in Healthcare Camp
Application

Child Information

Child’s Name: ____________________________________________________________
Home Address: __________________________________________________________
City: __________________________ State: __________ Zip Code: ________________
Home Phone: __________________________ Cell Phone: _______________________
Child’s Date of Birth: ____________________________________________________
Name of Child’s School: __________________________________________________
Grade for upcoming school year 2020-21: __________________________________
Name of school official providing recommendation: ____________________________
Child’s shirt size for a T-shirt if selected to participate: (circle one, adult sizes)  Sm Med  Lg  XL
Child’s pant size for scrubs if selected to participate: (circle one, adult sizes)  X-Sm Sm Med  Lg  XL
(scrubs tend to be larger than store-bought sized pants – consider selecting a size down)

Child’s special dietary or medical needs (if applicable): _______________________
Have you participated in the Adventures in Healthcare camp before? (please circle one) Yes or No
If so, please list the location: _____________________________________________

My camp site choice (please choose a first, second and third camp location choice, if possible):

_____ Barnes-Jewish Hospital
_____ Barnes-Jewish St. Peters Hospital
_____ Christian Hospital
_____ St. Louis Children’s Hospital

Parent/Relative Information

Name of parent/guardian(s): ______________________________________________
Name of parent/relative who is employed at BJC HealthCare: ____________________
Relationship to child (if not parent): ________________________________________
BJC Facility or Department Employed: _______________________________________
Parent/relative’s phone at work: ____________________________ Cell phone: _______
Parent’s e-mail address: _________________________________________________

I/We the parent(s)/guardian(s) of the above-named child give permission for him/her to participate in the
Adventures in Healthcare Camp. I/We and the emergency contact (BJC HealthCare employee) agree to be
available by phone during the times of the camp.

Parent/Guardian Signature: _______________________________________________
Tell Us About Yourself!
(Student Hand-Written Responses Only)

Area of Interest
*Please fill in the blank:*
I want to learn about _____________________________ during my camp experience.

Essay
*Please write an essay on one of the topics listed below. Please turn in the essay with all other materials to be submitted. Please limit your essay to 100 words or less.*  
Write in your own handwriting below.

Essay Choice 1: I want to go into a health care profession because:

Essay Choice 2: Tell us why you want to attend this camp:

____________________________________________________________________________________
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