

2019 Dryden Community Summer Camp

Dear Parents/Guardians,

Welcome to the 2019 Dryden Community Summer Camp! The campers spend their days with friends, active, and exploring new things that are focused around weekly themes and activities. For us, it is important to engage youths in new and exciting experiences that stimulate their minds, and keep their bodies moving.

The Camp is offering one-week sessions that run from July 8th through August 16th, 2019. The Dryden Community Summer Camp is held at the Dryden Elementary School and operates weekdays 8:00am until 4:30pm. This camp is available for any youth entering Kindergarten through the 5th grade. There is an option for campers to receive a free healthy lunch and snack through the Dryden Feeding Program.

We will be having various water activities quite often at camp. If your child would like to participate, please send them in with a bathing suit and towel. We ask that you also provide an extra pair of clothes and shoes for your child that can be kept at camp, just in case. Also, please send your child in wearing sneakers each day as they will not be able to play safely without them.

We would also like to remind you that camp ends at 4:30 pm. If an emergency arises, please call the Camp Director.

Payments must be made one week prior to the session your child is attending. There will be 10 scholarships for half priced camp, based on eligibility.

Applications are available online at drydenrec.com or may be picked up at the Dryden Town Hall. There is a limit of 40 children per week. If the week is full we can put you on a wait list.

If you have any further questions or concerns, please feel free to contact us at the Town of Dryden Recreation Department at 607-844-8888 (ext. 228)

Sincerely,

The Dryden Recreation Department

2019 Dryden Community Summer Camp

Information Sheet

Location: Dryden Elementary School

Age Group: Children entering Kindergarten – 5th Grade

Items to Bring:

- Lunch and Snacks or Summer Feeding Program
- Water Bottle (labeled with child's name)
- Sneakers
- Comfortable Clothing (additional outfit suggested)
- Sunscreen
- Swimsuit and Towel

Items to LEAVE:

- Electronics (handhelds games, music devices, cell phones)
- Toy Weapons (guns, swords, etc.)
- Clothing with inappropriate graphics or language

Field Trips: Field trips will be scheduled once a week. A scheduled will be in place before camp starts. The bus leaves camp at 9am, and returns at 2:30pm (unless noted before).

Payments: Registration and payment covers the entire week and is due one week in advance of camp. We apologize, but **NO REFUNDS** will be given, regardless of your child missing 1 or more days of camp.

Financial Assistance is available on a first come, first serve basis.

If you have any questions or concerns, please contact the Town of Dryden Recreation Department at 607-844-8888 ext. 228.

2019 Dryden Community Summer Camp Application

For children entering Kindergarten - entering 5th grade.

Camper Information

Name: _____

Grade Entering: _____ Age: _____

Parent Information

Name: _____

Home Phone: _____

Address: _____

Cell Phone: _____

Work Phone: _____

Email: _____

Please indicate camp sessions your child will be attending:
(Cost includes a field trip, lunch, and snacks.)

<input type="checkbox"/> Session 1 July 8 th – July 12 th \$85.00	<input type="checkbox"/> Session 2 July 15 th – July 19 th \$85.00	<input type="checkbox"/> Session 3 July 22 nd – July 26 th \$85.00
<input type="checkbox"/> Session 4 July 29 th – Aug 2 rd \$85.00	<input type="checkbox"/> Session 5 Aug 5 th – Aug 9 th \$85.00	<input type="checkbox"/> Session 6 Aug 12 th – Aug 16 th \$85.00
<u>Total:</u>		

Dryden Community Summer Camp

Camper Pick-Up Authorization Form

I give the following people permission to pick-up my child, _____, from the Dryden Community Summer Camp. I agree to give prior notification to camp staff if a change to the individual picking-up my child occurs.

Name:

Relationship:

I have notified the above individuals that **Photo Identification** will be required when picking up my child. Our staff will check for I.D.'s, please have them ready.

The following persons are not allowed to pick-up my child from camp:

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Dryden Community Summer Camp

Camper Health Certificate

Camper Name _____

Grade Entering _____

Parent/Guardian Name _____

DOB _____

Primary Care Doctor _____

Phone # _____

Dentist _____

Phone# _____

Insurance Carrier _____

Phone# _____

Health History:

Growth and Development (Please explain if not normal)

Physical normal not normal _____

Mental Normal not normal _____

Emotional normal not normal _____

Language normal not normal _____

Medical History:

Does this child have allergies? No Yes _____

Does this child take medication? No Yes _____

Does this child have a hearing problem? No Yes _____

Does this child have a vision problem? No Yes _____

Are there any conditions requiring special attention by DCSC Staff?

****Please attach a copy of your child's last physical with immunization records.**

Additional comments as necessary

Release Form

Child's Name: _____

Medical/Emergency Treatment

- I give permission for my child to receive basic first aid and/or Cardiopulmonary Resuscitation (CPR) from the staff of Dryden Community Summer Camp.
- I give permission for the attending physician to give emergency medical care to my child. I understand that I will be responsible for any and all hospital or insurance expenses that may result during my child's participation in Dryden Community Summer Camp.

Field Trips

- I give permission for my child to attend field trips with Dryden Community Summer Camp.
- A field trip schedule will be available on the first day of camp. There is no program for the campers not attending field trips.

Swimming

- I give permission for my child to participate in swimming and/or water activities when applicable.

My child's swim experience is;

- No previous swimming experience
- Limited experience (cannot tread water or float)
- Moderate experience (can tread water and float)
- Competent Swimmer (can float, tread water, swim full pool lap)

Swimming activities will not take place every week. Swim activities will be scheduled as field trips, and will be listed on the Field Trip Schedule.

Photo Release

- I hereby grant Dryden Community Summer Camp and/or the Town of Dryden Recreation Department my permission to use photographs taken of my child during Summer Camp for legal use in promotions. This includes, but is not limited to; publicity, copyright purposes, illustration, advertising, and web content. I understand that no royalties, fees or any other compensation shall become payable to me due to such use.

Sunscreen

- I give permission for Dryden Community Summer Camp staff to apply sunscreen to my child as needed.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

Dryden Community Summer Camp

Emergency Contact Form

Date: _____

Child's Name: _____

Parent/Guardian Name: _____

Phone number: _____

If emergency medical treatment is needed, your child will be transported to the nearest hospital.

Parents will be notified first in case of sickness or accident.

Emergency Contacts: (Contacted only if Parent/Guardian is unavailable)

Name	Relationship	Contact #	Work #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I hereby give my child permission to participate in the Dryden Community Summer Camp. I understand the Dryden Community Summer Camp does not participate in any Medical Insurance Program. Children attend at their own risk without liability to staff, the Dryden School District, or the Town of Dryden.

Parent/Guardian Signature: _____

Dryden Community Summer Camp

Summer Feeding Program

The 2019 Summer Feeding Program will be available to all students attending the Dryden Summer Community Camp at Dryden Elementary School this summer.

Any camper is welcome and can eat a free healthy meal and/or snack each day.

Lunch

Turkey with cheese on whole grain bread, carrots with ranch dressing, chips, fresh fruit, and milk

OR

Peanut butter and jelly on whole grain bread, carrots with ranch dressing, chips, fresh fruit and milk.

OR

Yogurt and muffin or bagel, string cheese, carrots with ranch dressing, chips, fresh fruit, and milk

Snack

Monday	cheese stick, poptart, and juice
Tuesday	cinnamon bun and milk
Wednesday	whole grain cookie and fresh fruit
Thursday	whole grain muffin and milk
Friday	half PB & jelly and juice

Camper's Name: _____

YES, my child will participate in the Summer Feeding Program

Food. Allergies _____

NO, my child will not participate in the Summer Feeding Program

Parent/Guardian's Name: _____

Parent/Guardian's Signature: _____

PARENTAL PERMISSION FOR NOTIFICATION OF ELIGIBILITY
Summer Camp Scholarship

Your child may be eligible for benefits for a reduced fee with Dryden Recreation Summer Community Camp. To determine if your child is eligible, program officials need information from your free and reduced-price meal application. Your written consent is required before any information may be released. We will only use this information to determine if your child is eligible for free or reduced programming. There are a limited number of scholarships open for camp. This is on a first come first serve basis.

I, the undersigned, give authorization for Dryden Recreation to obtain a current copy of my families NOTIFICATION OF ELIGIBILITY for the free or reduced lunch program. These records will be for professional use by authorized personnel of Dryden Recreation for the current school year. A new form will be required for each school year. I will notify Dryden Recreation if there is any change of eligibility within 30 days of notification.

Student's Name: _____ Current Grade: _____

Current School: _____

Parent/ Guardian Name: _____ Phone: _____

Parent/ Guardian Signature: _____ Date: _____