



OLMSTED DAY CAMP

JOIN THE FUN!

**DON'T MISS OUT –
REGISTER NOW FOR
SUMMER 2011!**

BOYS AND GIRLS AGES 6-13

****9AM – 5:45PM**

***EARLY DROP-OFF AND LATE PICK-UP AVAILABLE!*

A VARIETY OF ACTIVITIES TO APPEAL TO THE ARTIST, THE ATHLETE, THE CHEF, THE WRITER...

SAMPLE ACTIVITY SCHEDULE

9:00 AM ARTS & CRAFTS

10:00 AM HOBBY HUT (ARTS & CRAFTS)

11:00 AM INSTRUCTIONAL SWIM

12:15 PM LUNCH (USDA APPROVED)

1:00 PM REST PERIOD (LOW ENERGY ACTIVITIES)

2:00 PM ROPES CHALLENGE COURSE

3:00 PM KIDS' KITCHEN

4:00 PM FREE SWIM

5:00 PM COMPUTER LAB

5:45 PM PICK-UP

**FOR REGISTRATION
INFORMATION**

CALL: (845) 534-7900 EXT. 11

EMAIL: olmstedctr@aol.com

VISIT: www.campolmsted.org



CAMP OLMSTED

Summer Day Camp 2011

AGES 6 - 13

WEEK	CAMP DATES	REGISTRATION DEADLINE	FIRST CHILD	SIBLING RATE
1	June 27 – July 1	June 13	\$125	\$115
2	July 4-7 <i>No camp on Friday.</i>	June 20	\$100	\$95
3	July 11-15	June 27	\$125	\$115
4	July 18-22	July 4	\$125	\$115
5	July 25-28 <i>No camp on Friday.</i>	July 11	\$100	\$95
6	August 1-5	July 18	\$125	\$115
7	August 8-11 <i>No camp on Friday.</i>	July 25	\$100	\$95
TOTAL FOR 7 WEEKS			\$800	\$745

ADD \$25 REGISTRATION FEE PER CHILD

All forms and final payments are due the Monday two weeks prior to the start of the session.

Registration is not guaranteed until full payment has been received.

A refund (excluding the \$25 registration fee) is available for cancellation made a minimum of 14 days in advance.

REGULAR DAY CAMP HOURS: 9:00 AM – 5:45 PM **

**** EXTENDED-DAY OPTIONS**

~ **ADDITIONAL \$25 per CHILD per OPTION per WEEK** ~

EARLY DROP-OFF: 7:45 AM – includes BREAKFAST.

LATE PICK-UP: 6:00 PM to 7:00 PM – after 6:30 includes DINNER.

TO RECEIVE REGISTRATION MATERIALS

CALL: (845) 534-7900 EXT. 11

EMAIL: OLMSTEDCTR@AOL.COM

VISIT: WWW.CAMPOLMSTED.ORG

Camp Olmsted Day Camp 2011 Registration Form

Child's Last Name _____ First _____ MALE FEMALE

C/O Last Name _____ First _____ Child's Date of Birth _____

Address _____ City, State _____ Zip _____

Home Phone _____ Primary Language Spoken: _____

School _____ Current Grade _____ Education: Regular Special (type) _____

T-shirt Size (circle one) - Child: M L Adult: S M L XL

Camp Weeks Requested:

- Week 1: June 27 – July 1 Week 2: July 4 – July 7 Week 3: July 11 – July 15 Week 4: July 18 – July 22
 Week 5: July 25 – July 28 Week 6: August 1 – August 5 Week 7: August 8 – August 11

Special requests:

- Early Drop-off (additional \$25/week) Time _____ AM Late Pick-up (additional \$25/week) Time _____ PM

Who is responsible for bringing and picking up your child? _____ Relationship: _____

If you would like for your child to walk home or be picked up by someone other than the above named, you must give written permission.

FAMILY DATA - *For phone numbers, please circle Home, Work or Cell.*

Mother's Name _____ Phone (_____) _____ (H / W / C)

Check box if child lives with this person.

Phone (_____) _____ (H / W / C)

Father's Name _____ Phone (_____) _____ (H / W / C)

Check box if child lives with this person.

Phone (_____) _____ (H / W / C)

Foster Parent _____ Phone (_____) _____ (H / W / C)

Check box if child lives with this person.

Phone (_____) _____ (H / W / C)

Guardian's Name _____ Phone (_____) _____ (H / W / C)

Check box if child lives with this person.

Phone (_____) _____ (H / W / C)

EMERGENCY CONTACTS – *Two people who will be responsible for the child if the parent or guardian is not available.*

#1 Name _____ Relationship _____ Phone (_____) _____

#2 Name _____ Relationship _____ Phone (_____) _____

PUBLIC ASSISTANCE INFORMATION – *if applicable*

AFDC # _____ IM CENTER _____

HEALTH INSURANCE DATA

Insurance Carrier _____ Group/Plan # _____

ID or Policy # _____ Medicaid # _____

***PLEASE ATTACH A COPY OF CHILD'S MEDICAID CARD OR MEDICAL INSURANCE CARD TO REGISTRATION FORM**

Parent Comments

Is your child most comfortable speaking a language other than English? No Yes If yes, specify: _____

Is your child's appetite: light average hearty Any food allergies? _____

Is your child a vegetarian? No Yes Vegan? No Yes

Any allergies, besides food? _____

What are your child's favorite foods? _____

Can your child swim? No Yes If yes, where did he or she learn? _____

Does your child like: Art Swimming Reading Hiking Singing Dancing Nature Studies
 Cooking Drama Other: _____

Does your child: Have nightmares? Sleepwalk? Wet the bed?

Does your child fear: The dark? Heights? Water? Other _____

Has your child been away from home before? No Yes If yes, where? _____

What words would you use to describe your child? _____

Do you have any special recommendations for the care of your child? _____

How does your child handle conflicts with adults? _____

How does your child handle conflicts with other children? _____

Is there anything else you would like to tell us about your child? _____

Are you a member of the Methodist Church? (Optional) No Yes If yes, which one? _____

FOR THE PARENT

1. I have read and understand Camp Olmsted's activity list and fact sheet. I give my child permission to participate in these activities.
2. I understand that in order to remain at camp, my child must cooperate with the camp policies and activities.
3. I give consent for medical, surgical or dental treatment including hospitalization for my child, if necessary, while he or she is away.
4. I permit, Five Points Mission, in case of illness or accident, to use the proceeds of whatever hospitalization or medical coverage my child may have.
5. I give consent for medical personnel treating my child to release any medical records to Five Points Mission.
6. I give permission for my child to be transported in privately owned vehicles for out-of-camp activities in case of emergency.
7. I give permission for Five Points Mission to use pictures in which my child might appear to help publicize Camp Olmsted.

Signature of Parent/Legal Guardian: _____

Print Name: _____

Relationship to Child: _____ Date: _____



What You Should Bring To Day Camp



With your name on it, please!

- ✂ **2 Bathing Suits (Second suit optional, but we usually swim twice per day.)**
- ✂ **Towel**
- ✂ **Flip Flops (For Pool Only)**
- ✂ **Change of Clothes (just in case)-optional**
- ✂ **Sunscreen & Bug Spray(Optional to bring, but should at least be applied at home.)**
- ✂ **Sneakers or Comfortable Shoes (Should be worn to camp every day)**
- ✂ **Backpack or Bag (For Belongings)**

The following items should NOT be brought to camp:

- ✂ **Electronic Games, Trading Cards, Toys**
- ✂ **Money**
- ✂ **Jewelry**
- ✂ **MP3, i-Pods, etc.**
- ✂ **Cell Phones**
- ✂ **Any Items of Value**

Camp Olmsted is not responsible for any lost or stolen items.

