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## Welcome to 2017 Summer Camp!

Dear Camper Parents & Guardians,

**Thank you** for trusting us with your child this summer! Please know that we'll make every effort to ensure that your child has a blast. Our goal is to provide you with a stress-free summer knowing your child is well and safely cared for and nurtured at the Y.

This summer we're offering six weeks of specialty camps. During these weeks, they will participate in some regular camp day activities, but will also have dedicated time to participate in special activities focusing on the week's specialty.

To help prepare you and your child for a wonderful camp experience, we've provided:

- Key List of Contact Numbers
- What to Bring to Camp
- Weekly Themes
- Camper Medication Form

Please contact me at any time with any questions you may have.

Thank you for choosing the Y!

Katie Eagan  
Camp Director  
Bethlehem YMCA  
518.439.4394 x 1420  
keagan@cdymca.org

**CAPITAL DISTRICT YMCA**

[www.CDYMCA.org](http://www.CDYMCA.org)

518.869.3500



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# Bethlehem 2017 Summer Camp

## What to Bring to Camp

**To help your child keep track of her/his belongings, please label items with Her/his name.**

- Water bottle
- Book bag or similar item
- Bathing suit and towel (goggles if your child needs them)
- Peanut-Free lunch and snack (please provide lunches that don't need to be refrigerated)
- Please send your child in sneakers every day (much safer than flipflops or open-toe sandals)
- Sunscreen
- Sweatshirt (it can get chilly during the day)
- Baseball hat or visor
- Bug spray

**So your child can take complete advantage of all the fun things there are to see and do at camp, please leave these items home:**

- Personal toys from home
- Electronic equipment (including cell phones, Nintendo DS, and other gaming devices)
- Trading or game cards (Pokemon/Magic)

Each camper receives one camp shirt on the day of their first field trip. For the safety of your child, we ask that all campers wear her/his camp shirt on all field trip days. We offer extra shirts for \$5. Please let us know what you need.

**Thank you for your time and kind cooperation.**



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## Bethlehem YMCA Summer Camp Contact & Billing Information

### CAMP CONTACTS

Camp Director	Katie Eagan	keagan@cdymca.org	439.4394 x 1420
Assistant Camp Director	Nikki Stevens	nstevens@cdymca.org	493.4394 x 1421
Champs Camp	Rusty Decker	rdecker@cdymca.org	439.4394 x 1450
Billing & DSS Questions	Billing Department	childcarebilling@cdymca.org	869.3500 x 9960

### EMERGENCIES

If you need to reach your child while she/he's at camp, please call our front desk at 439.4394.

### SCHOLARSHIP ASSISTANCE

Did you know we offer scholarships to help families who need help with the cost of summer camp for their children? To learn more, please call Shannon Vigars 439.4394 x 1410.

### BILLING SCHEDULE

Camp Week	Payment Due	Camp Begins
Week 1	June 19	June 26
Week 2	June 26	July 3
Week 3	July 3	July 10
Week 4	July 10	July 17
Week 5	July 17	July 24
Week 6	July 24	July 31
Week 7	July 31	August 7
Week 8	August 7	August 14
Week 9	August 14	August 21
Week 10	August 21	August 28

**GENERAL INFORMATION –  
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## **GENERAL INFORMATION**

### **Photos and Videos**

To help share the fun of summer camp, YMCA staff use photographs and videos that feature children from our camps for promotional materials.

### **Sibling Discount**

Our \$10 sibling discount applies to siblings who attend camp at the same time.

### **Camper Safety**

For the safety of all the children in our care, all campers need to follow appropriate standards of conduct. A camper who infringes on the rights of others may be removed from camp.

### **Refunds**

We cannot refund the cost of camp for the voluntary withdrawal of a camper due to illness, vacation, or other absence (temporary or permanent), or for the dismissal of a camper. Refunds minus the deposit will be issued if registration is canceled at least one week prior to the camp week beginning

### **Communication**

We will use e-mail to send reminders and weekly camp updates. Please be sure to provide us with a current e-mail address.

### **Weekly Themes**

Every week we will celebrate the end of the week by dressing up according to the theme.

### **Medication**

In order to dispense medication during the camp day, we must have a written Medication Consent form signed by both the medical provider and the parent/guardian. If your child requires medication during their time at camp please contact the camp director the week prior to your child attending camp.

### **Inclusion of Children with Individual Needs**

At the Y, we promote a diverse and inclusive environment for children to learn and grow. Please provide our staff with any information or strategies that can help us support your child during their day at camp.



# Bethlehem YMCA Day Camp

## Prescription Medication Administration

Name of Camper \_\_\_\_\_

Campers self-administer all medications under the supervision of camp health staff.

Name of Medication	Dosage	Frequency Times	Parent's Initials

To be completed by the parent/guardian:

I request that my child (name) \_\_\_\_\_ receive the medication(s) listed above while at Bethlehem YMCA Day Camp.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### Refusal of Medication Administration

I am the parent/guardian of (child's full name) \_\_\_\_\_

I understand that the following medication(s) appear on her/his health form: \_\_\_\_\_

It is my desire that the above-listed medication(s) be held from administration during camp. I take full responsibility for this action, and do not hold Bethlehem YMCA Day Camp responsible for not administering the medication(s).

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Staff Signature and Title \_\_\_\_\_ Date \_\_\_\_\_