



Boys & Girls Clubs of Greater Kalamazoo

Administrative Office

915 Lake Street
Kalamazoo, MI
269.349.4485

www.bgckalamazoo.org

Camp Director: Josh Campbell

joshc@bgckzoo.org

Camp

2451 Erway Rd.
Hastings, MI
269.818.0017

2014 Summer Schedule

Session #1 (Girls) - 6/17- 6/20

Session #2 (Boys) - 6/24 - 6/27

Session #3 (Girls) - 7/8 - 7/11

Session #4 (Boys) - 7/15 - 7/18

Session #5 (Girls) - 7/22 - 7/25

Session #6 (Boys) - 7/29 - 8/1

Our Mission

The mission of the Boys & Girls Clubs of Greater Kalamazoo, Inc. is to assure and enhance the quality of life of Kalamazoo youth through education, mentoring, arts programs, and recreational activities.

BOYS & GIRLS CLUB SUMMER CAMP— 2014

The Boys & Girls Club provides the opportunity for youth to enjoy nature, meet new people, and to experience the lasting memories of Summer Camp - all **free of charge to all youth**. Campers participate in all the traditional camp activities such as Hiking, biking, GA-GA, swimming in the pool and fishing. This overnight experience provides youth with transportation from our Lake Street Campus, as well as room and board . We would love to have your 8-13 year old attend.



Who?

Camp is open to youth 8—13 years of age. Camp sessions are not co-ed, so girls and boys sessions alternate during the summer. Campers must become Club members prior to attendance; however Club membership is free and allows youth to participate in the programs at the Clubs in Kalamazoo.

Where?

The Boys & Girls Club Summer Camp is located near Hastings, Michigan, approximately 40 miles north of Kalamazoo. Campers meet at the Clubs' Lake Street Unit and are transported to and from camp in the Boys & Girls Club bus. The camp sits on 200 acres of land that is flush with mature trees, a stream, hiking trails, lots of native plant and animal life, and open skies to view the amazing stars!



What?

Activities at camp include hiking, mountain biking, swimming, field sports, arts and crafts, fishing, nature education, stargazing, learning camp songs, making new friends, and, of course, roasting marshmallows over the campfire! The daily schedule allows for structured activities with each cabin, camper's choice, rest time, and all - camp activities.



GREAT FUTURES START HERE



**BOYS & GIRLS CLUBS
OF GREATER KALAMAZOO**

Frequently Asked Questions

Camper testimonials:

“At camp, I learned how to be me.”
- age 13

“ I learned that being respectful is awesome.” - age 10

“I learned about new types of trees” - age 8

“ I gave another camper courage.”- age 11

“I learned how fast your body can be gone by feeding it junk food, instead of healthy things”
- age 12

“ I learned manners.”- age 11

“I wouldn't change anything about Camp, I had so much fun”- age 9

“I learned how to ride a bike” - age 8

“ I learned how to make friends” age 9

“I learned the “American” way” age 10

“I loved the Wolverchuck hike”- age 11

“ I learned how to overcome my fears”
- age 11

“Everybody made me feel welcomed”
- age 9

“I used to not be able to swim, now I can.”
- age 11

“ I love this Camp.”- Age 9



What if my child is on medication or has special needs?

Any medications must be checked-in with the Camp Director at registration. The Camp Director is a certified Health Officer and will administer medication while the child is at camp. All medications are kept locked at camp, and all un-used medication will be returned to a parent or guardian (not child) on Friday. If your child has special needs, we recommend discussing these needs with the Camp Director prior to enrollment to ensure camp is a good fit and a positive experience for your child.



What if my child cannot swim?

Campers will be swimming in a pool that is no deeper than 5 foot in any spot. A certified lifeguard is present at all times, and all counselors are trained as aquatic observers. When not in use, the pool area is locked.

Where will my child be sleeping and what will they be eating?

At check-in, campers are assigned to a specific cabin. Each cabin can house up to 8 campers and is equipped with bunk beds. Shower and toilet facilities are in a separate building. Breakfast, lunch, and dinner are served family style in the main building and consist of well-balanced meals that meet USDA guidelines.



Is the camp licensed?

The Boys & Girls Club Camp is licensed by the State of Michigan Department of Human Services.



What if my child becomes hurt or ill?

There are 2 trained Camp Health Officers on staff to treat any injuries or illness should they occur. All counselors are certified in CPR and First Aid. The main building has 2 infirmary rooms for campers who are not feeling well.

More Questions?

Visit www.bgckalamazoo.org
or contact Camp Director, Josh Campbell,
at 269.349.4485 x112 or joshc@bgckzoo.org.

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Boys & Girls Club
Summer Camp 2014
Application



Camper Information

Child's Name _____ Nickname _____

Gender (circle): Male Female Age _____ Date of Birth _____

Parent or Legal Guardian's Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Employer _____ Work Phone _____

Email Address _____

Child lives with: Both parents Parent/Step-Parent Grandparent(s)
 Single Parent Foster Parent Other _____

Has your child previously attended the Boys & Girls Club Summer Camp? Yes No

Has your child attended any other camps? Yes No

Will any of your child's siblings or family members be attending the Boys & Girls Club Summer Camp?
 Yes No Names _____

Registration Information

EACH CHILD MAY REGISTER FOR TWO CAMP SESSIONS! Please check below which camp sessions your child would like to attend. Please mark first choice with a "1" and second choice with a "2".

Girls Sessions

_____ June 17 - 20

_____ July 8 - 11

_____ July 22 - 25

Boys Sessions

_____ June 24 - 27

_____ July 15 - 18

_____ July 29 - August 1

Emergency Contact Information

Please list 3 people other than parent/legal guardian that we could notify in case of an emergency. **In the event that the primary parent/legal guardian cannot be reached, the child may be released to one of the individuals listed below.** A picture ID may be required for release of the child.

Name _____ Relationship to Child _____

Cell Phone _____ Home Phone _____

Address _____ City _____ Zip Code _____

Name _____ Relationship to Child _____

Cell Phone _____ Home Phone _____

Address _____ City _____ Zip Code _____

Name _____ Relationship to Child _____

Cell Phone _____ Home Phone _____

Address _____ City _____ Zip Code _____

Health History Record

The following information is requested so that the Boys & Girls Club summer camp and the camper's parent/guardian can work together to best meet the physical, intellectual, and emotional needs of the child. Please provide All the information that is requested, including any health problems or allergies that your child may have and any medications that your child requires.

Please mark below any health problems from which your child suffers:

____ Hay fever, asthma, or wheezing

____ Shortness of breath

____ Eczema or frequent skin rashes

____ Speech problems

____ Convulsions/seizures/epilepsy

____ Menstrual problems

____ Heart issues/heart murmur

____ Dental problems

____ Diabetes

____ Current infectious diseases (i.e. head lice, strep throat)

____ Frequent colds, sore throats, earaches

____ Trouble with passing urine or bowel movements

____ Stomach problems

____ Frequent headaches

____ Eating disorder

____ High blood pressure

____ Allergies

____ Chronic condition not listed above _____

Please provide further detail on any health problems marked above:

Please explain any operations or injuries that your child has experienced:

Please list and explain any emotional or behavioral disturbances from which your child suffers:

When your child becomes angry or upset, how does he/she typically respond? What works best to calm them?

Does your child currently experience any of the following special conditions/behaviors:

Bedwetting Sleep walking Fainting Insomnia
 Fear of the dark Fear of being alone Depression Self-harming behaviors
 Stealing Destructive behaviors Major difficulty following directions
 Homesickness Major phobias or fears _____
 Other _____

If your child is a girl, has she been told about menstruation? Yes No

Has your daughter started menstruation? Yes No

Please list ALL medications that must be taken by your child while at camp:

Medication _____ Frequency _____ Dosage _____

Medication _____ Frequency _____ Dosage _____

Medication _____ Frequency _____ Dosage _____

Additional comments regarding my child's medication:

Please provide date of initial immunization and date of most recent booster for the following:

Polio _____

Hepatitis B _____

MMR _____

DPT _____

Should your child's activity be restricted because of any physical limitations or illnesses?

Yes (please explain) _____

No Please initial confirming that there is no need to restrict your child's activities.

I certify that the health history of my child, _____, listed above is accurate and true to the best of my knowledge.

Parent/Guardian _____ Date _____

Medical Provider and Insurance

Name of Primary Care Physician _____ Phone _____

Clinic or Practice Name _____

Is your child covered by medical insurance? ___ Yes ___ No

If yes, please list plan name, carrier, and group # _____

Release of Liability and Permission to Secure Treatment

As the parent or legal guardian of the child listed in this application, I agree as follows:

I hereby give permission to the Boys & Girls Clubs of Greater Kalamazoo to transport my child to and from the Boys & Girls Club at 915 Lake Street, Kalamazoo, MI to the Boys & Girls Club Summer Camp at 2451 Erway Road, Hastings, MI.

I hereby give permission for the Boys & Girls Clubs of Greater Kalamazoo to use my child’s image for the sole purpose of marketing the organization and further the mission of the Boys & Girls Clubs.

I understand that if my child does not adhere to the rules and expectations of the Boys & Girls Clubs of Greater Kalamazoo Summer Camp that he or she may be asked to leave camp early if deemed in the best interest of the child and the other campers.

I acknowledge that there are potential risks and dangers to participating in camp activities. I voluntarily assume this risk for myself and my child and release, indemnify and hold harmless the Boys & Girls Clubs of Greater Kalamazoo, its employees, directors, and volunteers from any and all liability claims, causes of action or damages, that result from injury, loss, or claims of any kind to me, my child or my property, sustained as a result of participating in any and all activities connected with or associated with the Boys & Girls Clubs of Greater Kalamazoo Summer Camp.

I hereby give permission to the Boys & Girls Clubs of Greater Kalamazoo’s Summer Camp to secure emergency medical and surgical treatment and to provide non-surgical medical care, for the minor child named below, while attending camp. If there is a religious objection to consenting to the receipt of emergency medical or surgical treatment, I understand that the authorized person shall submit a written statement to the effect that the camper is in good health and that the person signing assumes responsibility for the camper.

I have read and fully understand this entire application, including Health History, Release of Liability, and Permission to Secure Treatment. All the information I have provided on this application is true and accurate. My signature below indicates acceptance of all terms and conditions of the Boys & Girls Clubs of Greater Kalamazoo Summer Camp.

Child’s Name _____

Parent or Legal Guardian’s Name (please print) _____

Parent or Legal Guardian’s Signature _____ Date _____

Registration Checklist

- _____ Completed Camp Application
- _____ Copy of child’s immunization records
- _____ USDA Free Summer Meals Form
- _____ Detailed Health History