# PEACE Camp 2018

Who: Children who are entering 1st - 6th grades

(Shenendehowa School District)

What: Peace Camp promotes team work, cooperation, problem solving

and conflict resolution skills. It also encourages interpersonal skills and making new friends. Camp includes Tae Kwon Do,

music, games, arts and crafts, and weekly field trips.

When: July 9 - August 2

Monday - Thursday

8:30am - 2:00pm

Parent Nights - 7pm on July 5, July 18, and August 1

Where: Cheryl's Lodge - Halfmoon Heights, Halfmoon

Cost: PEACE CAMP is FREE but is limited to 40 children

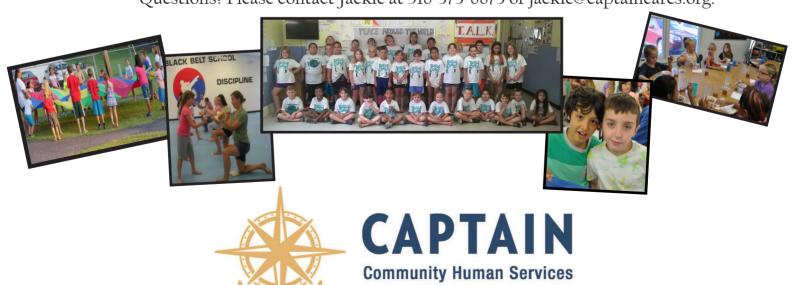
Please fill out an application and return it to CAPTAIN CHS at 5 Municipal Plaza, Clifton Park, NY 12065, or at Cheryl's Lodge at 25 Fern Lane, Clifton

Park, NY 12065.

Breakfast and lunch are served daily.

Questions? Please contact Jackie at 518-373-8873 or jackie@captaincares.org.

Lifting people up. Building brighter futures.



### **2018 PEACE CAMP APPLICATION**

## at Cheryl's Lodge CAPTAIN'S OUTREACH CENTER

25 Fern Lane, Halfmoon Heights July 9 – August 2, 2018 (Monday – Thursday ~ 8:30am - 2pm)

Child's 1	Name:		Age:	
Birth Da	ate:	Grade in Fall:	School:	
Name of	f Parent/Guard	lian:		
Home Address:Email Address:				
Name of	f alternate per	son in case of emergency:		
Address:			Phone:	
I underst	and that this ap	PEACE CAMP is a collaboration CHS and Shenender plication for my child	ehowa Central Schools does not §	guarantee
admissio following		Camp program. If my child is	selected to participate, I agree	to the
1.		ery effort to have my child atter y 9 – August 2.) <u>This commitm</u>	· · · · · · · · · · · · · · · · · · ·	•
2.	I agree to sup	port the PEACE CAMP progra	um and the staff.	
3.	3. I agree to participate in the three Parent Programs on THURSDAY, July 5, Wednesday July 18 and Wednesday, August 1 at 7:00 p.m. (Cheryl's Lodge will provide child care i needed.)			
4.	4. I give my child permission to participate in all activities of the program, including field trips off property and to receive medical treatment, if necessary.			
5.	I give permiss	ion to have my child's picture u	sed in CAPTAIN promotional	materials.
Pa	arent/Guardia	n's Signature	Date	





## 2018 PEACE CAMP AT CHERYL'S LODGE

CAPTAIN CHS Outreach Center ~ 25 Fern Lane, Halfmoon Heights

July 9 - August 2, 2018 Monday - Thursday ~ 8:30am - 2pm)

### **INFORMATION SHEET**

CHILD'S NAME:	
Does your child have a history of special needs (e	ducational or behavioral)?
Medical problems camp should be aware of:	
Allergies (Food/insect stings/medicine, etc.):	
Medications currently taking:	
Physical limitations staff should be aware of (i.e. v	rision, hearing):
Child's doctor (name/phone):	
Health insurance provider or medical coverage:	
Preferred hospital in case of emergency:	
I give the peace camp staff permission to authorize	e necessary medical treatment:
Parent/guardian signature	Date