



YMCA DAY CAMP ORATAM

YMCA of Greater Bergen County
360 Main Street
Hackensack, NJ 07601

Dear Parent /Guardian:

Congratulations and thank you for choosing the finest in day camping for your child. Here at Day Camp Oratam we pride ourselves in providing a program that is high in quality, fits your child's needs and interests and your budget. My staff and I are looking forward to working with your child to provide them with the best summer of their lives.

In order to provide you and your child the best experience it is important that you read through this entire packet. This packet contains:

General Information about Day Camp Oratam
Camper Personal Information Sheet
Doctor's Examination Form
Pick Up Form

Please note that the Camper Information Sheet, Medical form and the Pick Up form **MUST** be turned in **2 weeks prior** to your child's first day of camp. You can mail or drop off the forms at: YMCA Day Camp Oratam, 360 Main Street, Hackensack, NJ 07601.

You and your family are invited and encouraged to attend any of our informational Open Houses. During these sessions you can meet year round staff and have all your questions answered. You are also invited to attend our Camp Family Day in June to get a first hand experience of what your child will be doing this summer. More information is contained in this packet.

If you have any questions or concerns feel free to call me at **201-487-6600 ext. 226**. We know that you have many choices in day camps for your child, so thank you for choosing the YMCA.

See you this summer!

Darcie Vallant
Director of Camping Services



YMCA Day Camp Oratam General Information

Camp Open House Dates at the YMCA 7:30pm-8:30pm

April 15, 2010
May 12, 2010

Camp Family Day June 27, 2010 1-4pm

The Family Open House is a perfect chance for you to experience camp with your child. You can tour the facility, meet staff and participate with your child in some fun activities including: swimming, boating, arts and crafts and much more! Do you have a friend that is considering camp for their child? Bring them along as well.

Directions to YMCA Day Camp Oratam

Take Route 17 North to Sloatsburg, New York. At the second traffic light in Sloatsburg, turn right onto Seven Lakes Drive. Proceed approximately 5 miles; look for the entrance of Sebago Beach. Immediately past this entrance on the left is our camp road. This road is marked with a green sign with K-4 and Oratam on it.

Alternate Directions

Take the Palisades Interstate Parkway to Exit 14. Turn left and proceed on Route 106 West past Lake Welch to the Kanawauke Traffic Circle. Go directly $\frac{3}{4}$ around the circle and continue $\frac{1}{10}$ of a mile more on Seven Lakes Drive. Oratam entrance will be the 4th one on the right marked by a green sign that says K-4 Oratam.

****Note**** Camp roads are marked by small green signs with camp names on them.

Medical Packet

Attached is a medical packet. All campers must have their completed packet submitted to the YMCA **2 weeks prior** to the first day of your child's session. It is important for us to understand your child's medical and behavioral needs. We want our staff as prepared as possible to ensure your child's safety and to provide them with the best experience possible. No child will be allowed at camp without a completed medical packet. You can also download the packet at www.ymcagbc.org.

Medication (Prescription and Non-prescription)

All medications must be in their original container with the information clearly labeled on the container. All medication must be prescribed in writing by the physician either on the health form or dated prescription order. This must include the dosage and schedule. If this is a prescription drug, the doctors' orders must be the same as on the label of medication container. We can only follow the physician's written order. All medication (prescription or non-prescription) must be handed in at the check in table.

Drop off and Pick up Policy

In order to ensure the safety of your child we will be implementing a new Drop off and Pick up Policy. All campers must be signed in and out each day. No child will be allowed on the bus without being signed in. You will notice that part of the required **Medical Packet** is a **Pick up form**. You will need to list **anyone** that may be picking up your child from camp on this form. Counselors will be checking identification to verify the adult, therefore please remember to have your picture I.D. ready. Your child will not be allowed to go home with anyone who is not on the list. If you need to add anyone to the list please see the Director.

All Day Camp Oratam campers are to be dropped off in the Main Gym at the YMCA by **8:00AM** if they are not participating in the before care program. Parents **MUST** accompany their child inside the building and sign their child in with their child's counselor. The buses will leave at **8:15 AM** sharp. The buses will return to the YMCA between **5:00 PM and 5:15PM**. Campers can be picked up and signed out in the Main Gym. All campers that are not participating in the After Care program must be picked up by **5:30 PM**.

Late Pick Up Policy

Any camper picked up after 5:30 (or after 6 if you have after care) will be charged \$10 for the first 15 minutes then \$2 for every minute afterwards.

Before and After Care

If you need to drop off your child earlier or pick them up later you may register for before and after care prior to the first day of camp. Cost is an additional \$50 per session. Drop off time is 7:30am and pick up is at 6 pm

Discipline Policy

To ensure that all children have a good experience during camp, it is expected that each child be courteous and respectful of fellow participants and the staff. Our discipline policy includes verbal warnings, time outs and consultation with parents. A continuous pattern of negative behavior or any major incident is cause for removing a child from the camp with no refund. The YMCA staff will do everything possible to make your child's experience safe and enjoyable. Your cooperation and involvement is important to the success of camp.

Group Assignments & Requests

The Camp leaders will assign children to their groups based on their age and sex. Part of the camp experience is learning to make new friends, so if you are sending more than one child to the same camp, we suggest they not be in the same group. When two campers mutually request to be together, we will do our best to fulfill the request. **(There is a section on the medical form for these requests)**. We try to avoid grouping more than 2 friends together to prevent cliques from forming. Children should not come to camp expecting to be in a particular unit, since the makeup of each unit changes from year to year and session to session.

What to Bring Each Day

Clothes/Shoes – Exploring can be dirty and wet work so please provide your child with clothes and shoes that can get wet and dirty. For the safety of your child, please send them with 2 pairs of **closed toed shoes** that they can walk/run/hike.

Please Note: We do not allow open toed shoes because of the rocky terrain.

Bathing Suit/Towels- Each day your child will participate in swim lessons and free swim time. Please send your child with a bathing suit. You should also send them with a towel.

Lunch/Snack –Camp takes a lot of energy so please send them with a healthy lunch and several snacks. Due to allergy concerns, children are not allowed to share food.

Water –Children should come to camp each day with a filled water bottle. There are water fountains for them to refill. This is especially important on very warm, sunny days.

Sunscreen – Children should arrive already lathered up with sunscreen. Counselors will give “sunscreen” breaks to allow children to reapply. Children are not allowed to share sunscreen due to allergy concerns.

Insect Repellent – For the comfort of your child you may want to send your child with bug repellent. Please **do not send aerosol sprays**.

Ticks - We do our best to avoid exposure to ticks, however children may be exposed to ticks while participating in hikes, and exploring. Counselors will try to check children daily, but they should be checked again thoroughly for ticks each day after camp.

Camp T-shirt

Each camper receives a Day Camp Oratam T-Shirt on the first day of camp. Additional T-Shirts may be purchased at the front desk of the YMCA at \$10.00 each.

Do Not Bring

Do not bring personal listening devices, cell phones, computers, wheelie shoes, electronic games, knives or any inappropriate items of clothing to camp.

Lost and Found

Please allow time to check your camper's belongings on their return. We do our best to locate and return items that are left behind. Marking items with your child's name will help this process. We do not return items such as socks and underwear. We do bring unclaimed items to the YMCA at the end of day. The YMCA will keep items for one week following the end of each session. The camp is not responsible for damage, theft or loss of personal items brought to camp.

Visitors

Camp Oratam does not allow visitors at onsite during the session. Because we know you want to know what your child has been doing each day, at the end of the week we will send home information on that past week's schedule and highlights of the activities. We encourage you to speak to our staff each day to answer any of your questions about your child or the program.

Health Inspection Report

Day Camp Oratam is licensed by the New York State Department of Health. The camp is inspected twice yearly; once before and once during the camping season. The reports of these inspections are on file at:

New York
Department of Health
Monticello District Office
50 North Street, Suite 2
Monticello, NY 12701

Schedule

Below is a *sample* of a weekly schedule of camp.

8:15	Leave the YMCA
9:30	Assembly/Flag raising
10:00-10:50	Archery
10:50-11:40	Free Swim
11:40-12:30	Arts and Crafts
12:30-1:00	LUNCH
1:00-1:50	Swim Lessons
1:50-3:30	Challenge Course
3:30-3:45	Assembly/Flag
4:15	Head back to YMCA



2010 YMCA DAY CAMP ORATAM CAMPER FORM

This side is to be completed by a Parent or Guardian. The medical form is due **2 weeks prior** to your child's session. No child will be permitted on the bus without a proper medical form.

Personal History

Camper Information

Last Name _____ First _____ Middle _____

Address: _____ Town _____ State _____ Zip _____

Birth Date _____ Age _____ Sex _____

Name of Parent/Guardian(s) _____

Phone: Guardian 1 Day _____ Evening _____ Email _____

Guardian 2 Day _____ Evening _____ Email _____

Emergency Contact

Name _____ Relationship _____ Phone _____

Cell Phone _____

If you would like you child to be in the same group as another child, please list their name here and session attending (requests will be filled when possible): _____

Medical History

Please list any medical issues including emotional and/or behavioral issues your child may have in order to allow our staff to provide the best possible experience for your child.

Does your child have any Special Dietary Needs?

Operations, Injuries and Chronic Recurring Illness

Health Insurance Information

Health Insurance Plan _____ Account Number _____

Parent's Social Security Number _____

Parent's Authorization

I hereby give my son/daughter permission to be transported to the campsite in Harriman State Park, New York State and back to the YMCA each day on a contracted school bus. I also give my son/daughter permission to participate in all supervised camp activities, off-site trips and expeditions, except as noted here:

Also: This health history is correct so far as I know and the person herein described has permission to engage in all camp activities except as noted by me and the examining physician. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Camp Director to hospitalize, secure proper treatment for and to order injection, anesthesia or surgery for my child named above. The YMCA does not carry sickness and accident insurance for its campers. Coverage is based on individual charges as determined by the insurance carrier.

Signature of Parent or Guardian

Date



YMCA DAY CAMP ORATAM PICK-UP FORM

Please list all the possible people that may pick up your child. Please make them aware that YMCA staff will be checking I.D.'s to ensure your child's safety. YMCA *will not* allow your child to go home with anyone not on this list. Thank you.

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

PHOTO RELEASE

_____ By initializing this section I agree that photos of my child may be used in YMCA publications and advertising.

SUNSCREEN/INSECT REPELLENT PERMISSION

I give permission for my child to self-apply sunscreen/insect repellent that I have provided. YMCA staff will supervise children during this process. I will apply sunscreen/insect repellent to my child before arriving. YES NO

I give permission for YMCA staff to apply sunscreen/insect repellent that I have provided to my child. I will apply sunscreen/insect repellent to my child before arriving. **YES** **NO**

CAMPER'S NAME: _____



YMCA DAY CAMP ORATAM DOCTOR'S EXAMINATION FORM

This side needs to be completed and signed by a licensed physician.

This examination must have been performed within the 12 month period before arrival at camp. An examination for some other purpose within this period is acceptable. This examination is for determining fitness to engage in strenuous camp activities.

Height _____ Weight _____ BP _____ Hgb. Test _____

Urinalysis Eyes Nose Throat
 Teeth Heart Lungs Abdomen
 Hernia Posture Skin Spine
 Extremities Allergies _____

Code: S – Satisfactory **X** – Not Satisfactory **O** - Not Examined

Explain if not satisfactory: _____

Health History

Enter the dates of the last immunization for the following:

This information is required by law.

DTP _____ Last Tetanus Booster _____ MMR _____ Hepatitis B _____

Polio _____ Varicella(chickenpox) _____ Haemophilus Influenza Type B _____

Allergies: Check if child reacts to any of the following and explain below:

Poison Ivy Insect Stings Penicillin Foods
 Other Allergies _____

Recommendations and restrictions while at Day Camp Oratam:

Special Medicine (name) _____ Is parent sending it? _____

Swimming, Diving _____

Strenuous Activity _____

Other _____

I have examined the boy/girl herein described and have reviewed his/her health history. It is my opinion that he/she is physically able to engage in camp activities except as noted above.

Examining Physician

Address _____

Street

City

State

Zip

Telephone _____

Date _____

Area Code and Number