

TOWN OF SHAWANGUNK

SUMMER CAMP 2025

REGISTRATION PACKET

PLEASE COMPLETE AND MAIL REGISTRATION FORMS (one packet per camper) ALONG WITH CURRENT IMMUNIZATION RECORDS TO:

TOWN OF SHAWANGUNK

14 CENTRAL AVENUE

P.O. BOX 247

WALLKILL, NY 12589

Recreation Specialist/Medical Director: Gillian Batchasingh – (917)-848-8633

Summer Camp Assistant Director:

Town Hall: (845)-895-2611

Town Hall Fax: (845)-895-2162

TOWN OF SHAWANGUNK

SUMMER CAMP 2025

PARENT/GUARDIAN INFORMATION

CAMP LOCATION: Verkeerderkill Park, 3232 Route 52, Pine Bush, NY 12566

CAMP DATES: Monday, June 30, 2025 thru Friday, August 8, 2025

CAMP HOURS: 9:00 A.M. To 3:00 P.M.

DROP OFF: Verkeerderkill Park, 3232 Route 52, Pine Bush, NY 12566

PICK UP: Please pick up your child no later than 3:00 p.m. **If you are consistently late, your child may be removed** from the program. If a child needs to be picked up early, please provide a note at least one day in advance. The Parent or Guardian can only pick up campers, or those listed on the Camp Sign-Out Form.

LUNCH/SNACK/WATER: Breakfast and lunch will be provided by the school district for all campers who want it. Families will need to provide snacks and drinks. Campers should bring their own water bottle daily. Tap water will be available for refills. Please label all items with your child's name.

CAMP COST: Please make all checks payable to the **Town of Shawangunk**

Fee Includes Busing & Tickets for Three Field Trips

Residents: \$600 for 1st child, \$575 for 2nd child, \$550 for 3rd child, free for 4th child

Non-Residents: \$675 for 1st child, \$650 for 2nd child, \$625 for 3rd child, \$600 for 4th child

MEDICATIONS/MEDICAL CONCERNS:

Any concerns regarding your child should be discussed in person with the Camp Health Director prior to the first day of camp. Please call Gillian at (917)848-8633 to schedule an appointment.

If your child requires medication during camp hours, you must send a note from the physician as well as the medication itself in its original container. Campers who require medication during camp hours must be able to self-administer (including EPI-pens).

Prior to arrival, please remember to apply sunscreen and bug repellent on your child. Law prohibits us from applying these lotions.

WEATHER: In the event of heavy rain and/or thunderstorms, camp will close for the day. If extreme weather begins during camp hours, we request that you pick your child up as early as possible. We will attempt to call parents, but you can access weather related closings/concerns on our website,

www.shawangunk.org

TOWN OF SHAWANGUNK

SUMMER CAMP 2025

RESIDENT/NON-RESIDENT FORM

Camper Name: _____

Camper currently resides at:

Street Address: _____

City: _____ State: _____ Zip Code: _____

In the Town of: _____
(example: Shawangunk, Montgomery, Wallkill, Crawford...)

In the County of: _____
(Example: Ulster, Orange, Sullivan.)

With: _____
(Parent/Guardian name(s))

Parent/Guardian Signature _____ Date _____

Town of Shawangunk

SUMMER CAMP 2025

REGISTRATION FORM

Monday, June 30, 2025 – August 8, 2025

Your complete Registration Packet must include the following:

1. Completed Registration Packet: One per camper in all applicable areas.
2. A copy of current immunization record signed and dated by physician.
3. Non-refundable payment in full.

Camper Name: _____

Age: _____ Gender: _____ T-shirt size: _____ Date of Birth: _____

Parent/Guardian Name: _____

Home#: _____ Cell#: _____ Work#: _____

Email Address: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home#: _____ Cell#: _____ Work#: _____

Mailing Address if different from above: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

In the event of an emergency, should we be unable to reach you, please provide us with an alternative emergency contact:

Home#: _____ Cell#: _____ Work#: _____

FOR OFFICE USE ONLY: IMMUNIZATION FORM RECEIVED ON _____, 2025.

TOWN OF SHAWANGUNK

SUMMER CAMP 2025

AUTHORIZATION FORM

Camper Name: _____

AUTHORIZATION

I authorize my child to attend and participate in all activities organized by the Town of Shawangunk Summer Camp.

I authorize the Town of Shawangunk staff to administer my child with First Aid and/Emergency Medical Treatment and/or arrange for transport to and treatment at a local medical facility in the event of a medical emergency.

I authorize the Town of Shawangunk staff to take photographs of my child to be used for the purpose of camp newsletters and/or other camp related publications.

I give my child permission to be transported in the case of organized trips and special events.

If there are any custodial/guardianship restrictions, I will provide a copy of that paperwork along with this application.

Parent/Guardian Signature _____ Date _____

Discipline

Discipline is most effective when it deals directly with the problem at the time and place it occurs, and in a way that campers view as fair and impartial. Counselors and administrative staff are expected to use disciplinary action (in the form of time-outs from activities) only when necessary. Disciplinary action should be firm, fair, and consistent so as to be the most effective in changing the camper's behavior. We will always consider the following:

- A. The camper's age
- B. The nature of the incident
- C. The camper's prior disciplinary record
- D. The effectiveness of prior discipline (time-outs)

As a general rule, discipline will be progressive. This means that the camper's first infraction will merit a lighter penalty (shorter time-out) than subsequent infractions. Camp counselors must inform the Camp Director if any camper exhibits a regular pattern of misbehavior. The Director will speak with the camper and if the behavior continues after that, the Director will notify the parent/guardian to discuss possible options. In the case of extreme violent behavior, we reserve the right to dismiss a camper from the summer program without warning.

Parent/Guardian Signature _____ Date _____

TOWN OF SHAWANGUNK

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MEDICAL FORM

Camper Name: _____

IMMUNIZATIONS

- A. Immunizations are up to date: please see enclosed immunization documents along with completed registration forms and non-refundable payment for my child,

Parent/Guardian Signature _____ Date _____

- B. My child is due for immunizations between now and the start of camp date. Currently, I am enclosing the completed registration form and the non-refundable payment only. I will forward the required immunization documents to the Town of Shawangunk as soon as possible and no later than June 30, 2025. **I understand that my child will be unable to attend camp without this paperwork.**

Parent/Guardian Signature _____ Date _____

ALLERGIES

Please list any allergies your child has or write NONE if your child is not allergic to anything.

MEDICAL CONCERNS & MEDICATION

Please list ALL medications* your child is currently taking and any other medical concerns your child has.

*If your child requires medication during camp hours, you must send a note from the doctor as well as the medication itself in a current, original container. Any concerns must be discussed in person with the Camp Health Director no later than the first day of camp. Please call Gillian at (917)848-8633 to schedule an appointment. Campers who require medication during camp house MUST be able to self-administer.

Parent/Guardian Signature _____ Date _____

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SIGN-OUT FORM

Camper's Name: _____

The following people have permission to sign my child out of the Town of Shawangunk Summer Camp:

1. _____ Relationship: _____

2. _____ Relationship: _____

3. _____ Relationship: _____

4. _____ Relationship: _____

5. _____ Relationship: _____

Please notify everyone on this list to bring at least one form of identification with them when picking up a child from camp. **Pick-up is at 3:00 P.M. SHARP.**

If there are any custodial/guardian restrictions, PLEASE provide the Camp Director with copies of that paperwork, otherwise, we will be unable to enforce the restrictions.

Parent/Guardian Signature: _____ Date _____

TOWN OF SHAWANGUNK

Behavior Management Plan

At the Town of Shawangunk Summer Camp, we strive to provide a safe, fun and secure environment for all our campers. To ensure that our camp is always operating at the highest quality and that campers are being cared for in a positive environment.

Campers are encouraged to practice social skills that will allow them to peacefully resolve conflicts without the use of harmful or destructive behaviors. When disciplinary situations occur that require intervention, camp staff will provide the children with clear explanations as to why specific behavior is inappropriate. They then help the child find alternative ways to behave in a situation that fits within the camp guidelines.

In situations such as but not limited to bullying, threats, verbal or physical assaults, severe disobedience, the following protocol will be used:

1st Offense: VERBAL AND WRITTEN WARNING

The first consequence will be a verbal/written warning. Campers will be made aware of the rules they violated. This warning gives the camper a chance to correct their behavior or mistakes on their own. Parents will be notified.

2nd Offense: VERBAL AND WRITTEN WARNING WITH REMOVAL

The second consequence will be a verbal/written warning. Camper will be made aware of the rule they violated. Parents will be notified. This offense comes with immediate removal and possible suspension from camp for 1 -3 days.

3rd Offense: VERBAL AND WRITTEN WARNING WITH TERMINATION

The third consequence will be a verbal/written warning. Camper will be made aware of the ruled they violated. Parents will be notified. This offense comes with immediate termination from the camp. There will be no refund. The Town reserves the right to refuse registration for this camper in future programs.

The Town of Shawangunk Summer Camp reserves the right to suspend or expel any camper from the program who poses serious continual discipline problems, whether all of the steps in our Behavior Management Plan have been completed.

**TOWN OF SHAWANGUNK
SUMMER CAMP
2025**

I have discussed the Behavior Management Plan with my child, and they understand what is expected of them at camp.

Camper's Name (print)

Parent/Guardian Name (print)

Parent/Guardian Signature Date