



Town of Newburgh Recreation Department
311 Route 32 Newburgh, NY 12550 (845)564-7815

WELCOME PARENTS AND CAMPERS!

Thank you for choosing Camp Chadwick for your child(ren) to attend this summer. We are looking forward to another fun-filled, memorable season. Camp Chadwick will again provide many activities, projects, games and outstanding field trips.

Camp will run for a seven week period (Mon-Fri) from July 1st to August 16th with the exception of Thursday, July 4th. We operate our camp daily from 8:30am -4:00pm with the option of early drop off or late pick up for an additional fee. Please make these arrangements at our Recreation Department.

We have a number of day trips planned for your children to enjoy this summer: Zoom Flume, Lake Compounce, Kruckers Picnic Grove, Mountain Creek and Brownstone Discovery Park. All campers are required to participate in all off-site trips. We ask that they stay home if you do not wish for them to attend.

It is imperative that your child comes to camp everyday **PREPARED** for activities. Campers will be involved in physical activities from the minute you drop them off to the minute you pick them up! Campers are expected to wear sneakers every day. We recommend that children are dressed in a single layer of light-colored clothing to protect from overheating. Hats, sunglasses, sunscreen, and plenty of water are also strongly recommended. Please remember that sunscreen should be applied before your child comes to camp. Please send your child with a healthy lunch/snack packed in a clearly labeled cooler.

It is recommended that campers do not bring toys or electronic devices to camp. The Recreation Department and its staff will not be responsible for any personal property that is brought to camp.

If you have any questions or concerns whatsoever about the Camp Chadwick Summer Program, please do not hesitate to contact me in the office at 564-7815 or by email:

Jason-recreation@townofnewburgh.org.

Sincerely,

Jason Szeli

Jason Szeli

Assistant Recreation Director

***Register for Notifications**- Rainedout.com,
Select Organization-Town of Newburgh Summer Camp, Category- Parks & Recreation, Enter your cell number, wait for validation code, Enter code. Call the Town of Newburgh Recreation Department if you have any questions 564-7815.

ATTENTION

CAMP PARENTS

(Young Camp Chadwick, Camp Chadwick, Teen Chadwick)

PARENT ORIENTATION

MONDAY, JUNE 24th

6:00pm

CHADWICK LAKE PARK

**Topics: Camp Rules, Pick Up & Drop Off,
Trips, Typical Day**

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*Return to the Recreation Department by 5/17/19

Camper Information Sheet 2019

Date _____

Child Name _____

Age _____ Date of Birth _____

Sex _____ Height _____ Weight _____

Allergies _____

Daily Medications _____

Existing Medical Condition _____

Father/Guardian Name _____

Address _____

Home Number _____

Cell Number _____

Work Number _____

Other _____

Mother/Guardian Name _____

Address _____

Home Number _____

Cell Number _____

Work Number _____

Other _____

Other authorized emergency contact persons and/or permitted to pick up child (Picture ID Must be Shown)

1. Name _____

Cell Number _____

Address _____

Relationship to Child _____

2. Name _____

Cell Number _____

Address _____

Relationship to Child _____

- Comments/Information _____
- _____

During normal camp activities & occasionally during special events, pictures are taken either by local newspapers or by camp staff. I give permission for these pictures to be used by the Town of Newburgh and local newspapers. YES _____ NO _____

All reasonable efforts will be made to contact you or your emergency contact. All information will be held in confidence and used only in an emergency. In the event of an injury to your child, you hereby grant permission to treat my child's injuries and/or grant permission for the Health Director or representative to approve ambulance or emergency room treatment. I will be notified of any injury and treatment.

Parent/Guardian Signature _____ Date _____

Camp Chadwick Health Director _____ Date _____



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Young Campers, Camp Chadwick & Teen Camp Permission Slip

Check all sessions your child is attending:

- _____ Session 1: 7/2 - Splashdown- Fishkill, N.Y.
(Your child will go swimming)
7/5 - Kruckers Picnic Grove- Pomona, N.Y.
(Your child will go swimming)
- _____ Session 2: 7/10 - Zoom Flume- East Durham, N.Y.
(Your child will go swimming)
- _____ Session 3: 7/17 - Lake Compounce Theme Park - Bristol, C.T.
(Your child will go swimming)
- _____ Session 4: 7/24 - Brownstone Exploration & Discovery Park-Portland, C.T.
(Your child will go swimming)
7/25 - Storm King Adventure Tours Kayaking- Cornwall, N.Y.
(TEEN CAMP ONLY) (Your child will go swimming)
- _____ Session 5: 7/31 - Tomahawk Lake Waterpark- Sparta, N.J.
(Your child will go swimming)
- _____ Session 6: 8/7 - Mountain Creek Water Park- Vernon, N.J.
(Your child will go swimming)
- _____ Session 7: 8/14 - Camelback Beach Water Park- Tannersville, P.A.
(Your child will go swimming)

Please sign and return:

My Child _____ has permission to attend all Off-site trips and activities, including swimming as noted above.

Parent/Guardian Signature



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Campers On-Site Medical Agreement

By filling out this form, you are allowing the Camp Health Director to keep your child's medications in a secure location for the duration of the camp season. In addition, you are granting them the ability to assist with this medication as documented below or in any emergency situations that may arise.

Camper Name (print): _____

Date of Birth: _____ Age: _____

Medication: _____ Amount Submitted: _____

Medical condition requiring medication: _____

Dosage: _____ Daily: _____ Weekly: _____

Time(s) of Day: _____ In emergency situations only _____

Medication needs to be refrigerated: Yes _____ No _____

Medication administration instruction:

_____ My child understands that they take medication, why they take it and how much they should take.

_____ My child understands that they take medication, however they are not completely sure why they take it or how much they should take

_____ I understand that the above instructions and criteria will be followed by the camp Health Director while assisting with medication administration.

Date: _____

Parent/ Legal Guardian Signature: _____

Camp Health Director Signature: _____



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2019 Camp Rules

1. I will have FUN! In order to have fun. I will follow the rules!
2. When I hear the whistle blow. I will stop what I am doing and look to my counselors.
3. I will keep my hands to myself. No hitting, pushing or shoving.
4. I will only use kind words when speaking to my fellow campers or counselors. NO bad words!
5. I will always stay where the rest of the camp is unless I am with a counselor. If I need to use the bathroom or get a drink, I will ask permission from one of the counselors.
6. I will respect other people's property. I will not touch anybody else's things without permission.
7. I will not ask anybody else for money. If I don't have any money. I can't buy anything.
8. I will take care of camp equipment. I will put back all the pieces to games and puzzles in the right box and the right place. If we ruin the camp equipment, we won't have anything to play with.
9. I will eat lunch at the tables, sitting on a bench until the counselors say it's ok to get up. I will not sit or stand on the tables. I will throw away all my garbage
10. I will not share food with anyone else! I will only eat what I have brought in my lunch. I will not ask anyone else to share food with me.
11. If I see anything wrong I will tell a counselor.
12. I will not go near the water at any time during camp!!!!!! (Without a counselor)
13. I will not pet any dogs that are in the park. They may bite me.

CAMP CALENDAR

*Calendar subject to change

| | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|------------------|--|--|--|---|--|
| SESSION 1 | 7/1 1 ST Day of Camp Yoga DEC Fishing | 7/2 <u>Splashdown</u> (Fishkill, NY) Departs: 9:30am Returns: 4:30pm | 7/3 Chilly Willy's Ice Cream Truck | 7/4 <u>NO CAMP</u> | 7/5 <u>Kruckers</u> (Pomona, NY) Departs: 9:00am Returns: 4:30pm |
| SESSION 2 | 7/8 Yoga | 7/9 Fitness Hike Dance Mixx | 7/10 <u>Zoom Flume</u> (East Durham, NY) Departs: 8:30am Returns: 6:00pm | 7/11 | 7/12 Chilly Willy's Ice Cream Truck |
| SESSION 3 | 7/15 Yoga DEC Fishing | 7/16 Fitness Hike Dance Mixx | 7/17 <u>Lake Compounce</u> (Bristol, CT) Departs: 8:30am Returns: 7:00pm | 7/18 | 7/19 Chilly Willy's Ice Cream Truck |
| SESSION 4 | 7/22 Yoga | 7/23 Fitness Hike Dance Mixx | 7/24 <u>Brownstone</u> (Portland, CT) Departs: 8:30am Returns: 7:00pm | 7/25 Teen Camp Only Kayaking 11:30am-4:00pm | 7/26 Chilly Willy's <u>Ice Cream Truck</u> |
| SESSION 5 | 7/29 Yoga DEC Fishing | 7/30 Fitness Hike Dance Mixx | 7/31 <u>Tomahawk Lake</u> (Sparta, N.J.) Departs: 9:00am Returns: 6:00pm | 8/1 | 8/2 Chilly Willy's Ice Cream Truck |
| SESSION 6 | 8/5 Yoga | 8/6 Fitness Hike Dance Mixx | 8/7 <u>Mt. Creek</u> (Vernon, NJ) Departs: 9:00am Returns: 5:30pm | 8/8 | 8/9 Chilly Willy's Ice Cream Truck |
| SESSION 7 | 8/12 Yoga DEC Fishing | 8/13 Fitness Hike Dance Mixx | 8/14 <u>Camelback Beach</u> (Tannersville, PA) Departs: 8:00am Returns: 7:30pm | 8/15 Color Wars | 8/16 Chilly Willy's Ice Cream Truck |

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