



**2010**



**4-H  
CAMP**

**SHANKITUNK**



**SHANKITUNK**



**4-H CAMP IS  
OPEN TO ALL YOUTH**





# 4-H CAMP SHANKITUNK



## ABOUT OUR CAMP:

At 4-H camp you will ...have fun...meet new friends... make things in the craft hall...learn about nature...cook and camp in the outdoors...swim in the camp pool...work in special groups...enjoy evening programs.

4-H Camp Shankitunk is located on 145 acres of county owned land along the west branch of the Delaware River between Delancey & Delhi The main campground is a large open meadow surrounded by naturally wooded hillsides. Campers are housed in cabins spaced among the trees and along the meadow's edge.

Camp is not just a week in the woods. It is what happens to campers, what they take home in their memories, in their new purposes, in their improved and newly acquired skills, in their friendships, in their appreciation of nature and out-of-doors.

## PHOTOS:

Each camper unit will be photographed Sunday evening. The 5x7 photographs will be available for sale Friday evening before the closing program.

## CAMP STORE:

On Sunday afternoon, during registration, we will offer our usual t-shirts and sweatshirts, as well as other items in our camp store. The camp store will not accept money from campers during the week and costs for crafts and snacks are included in the camp fee, so campers **should not bring money to camp with them.**

## BUNKMATES:

Campers may select a friend to bunk with. They must be of the same sex, age and grade in school. Name must be indicated on the application.

## HEALTH REQUIREMENTS:

Each camper must have a medical examination performed or submit proof from a doctor that the examination has been performed in the past year. In addition, all parents must complete a health record on their camper. **Forms are enclosed in this brochure.** We recommend that health examinations be performed as close to camp time as possible. **PLEASE MAIL THIS HEALTH FORM IN BEFORE CAMPSTARTS.**

## CAMP DATES:

All five weeks of camp are co-educational. Campers should register **between 2:00 and 4:00 pm on Sunday.** Campers leave after the Friday afternoon parents' program. All parents are encouraged to attend the Friday afternoon program, beginning at 5:00 pm. Campers must be **picked up by 6:00 pm**

- July 4 - July 9, Sunday-Friday--Week 1
- July 11 - July 16, Sunday-Friday--Week 2
- July 18 - July 23, Sunday-Friday--Week 3
- July 25 - July 30, Sunday-Friday--Week 4
- Aug 1 - August 6, Sunday-Friday--Week 5

## ACCOMMODATIONS:

Campers live in units with other campers their own age plus a counselor. Units have living responsibilities. Campers may elect to jog or swim early in the morning, play group or individual games during recreation periods, take part in rope courses and have other recreational opportunities.

Other facilities include a swimming pool, bath house with hot water and showers, dining hall, staff housing, recreational hall, craft hall, science center and health center.

## IN SEASON CAMPER MAIL:

Send in season camper mail to: 4-H Camp Shankitunk, 2420 Arbor Hill Road, Delhi, NY 13753

## IN SEASON CAMPER E-MAIL:

**Send your camper an e-mail (incoming only)!!**  
**Go to our website: [www.campshankitunk.org](http://www.campshankitunk.org)**  
**Click on the box - *Send an E-mail*. This is a commercial service provided by ecamp.**  
**We will supply the registration code when you sign-in on Sunday.**

## WEBSITES:

Visit our website at: [www.campshankitunk.org](http://www.campshankitunk.org) to see weekly pictures of camp and for e-mail information.

## CREDIT CARD PAYMENTS:

Want to pay your camp fees by credit card?  
Call (607) 865-6531 for details.

## NEW FOR 2010 - CAMP FEES:

### Camp Fees for Weeks 1-5:

**\$230** per week for Delaware County Residents; and  
**\$250** per week for 4-H members\* of Otsego, Schoharie and Sullivan Counties.

**\$270** for all other campers.

A camper may attend more than one (1) week, (but is limited to 2 weeks) and is **not allowed** to stay over the weekends. A \$130.00 deposit is required with your application.

\* 4-H membership for Otsego, Schoharie and Sullivan Counties will be verified.

## WHO MAY ATTEND:

Any boy or girl age 8-16 by January 1, 2010 is welcome to attend 4-H Camp Shankitunk. **All** applications will be ranked in the order they are received.

It is important to list your second choice of camping weeks. Deposit fees for those not accepted for camp will be returned. Most campers are ages 8-13. Older campers are encouraged to participate in the Counselor In Training(CIT) Program.

**Campers are limited to 2 weeks attendance per year.**

## CANCELLATIONS/REFUNDS

**There is a one time \$50 fee for any cancellation.**

Upon arrival, the camp medical staff will evaluate all campers. If determined that the camper is too ill to attend camp, the camper will be sent home immediately. **No refund** will be issued. In the event that a camper becomes ill at camp and is sent home at the discretion of the camp medical staff, there will be **no refund**.

In the interest of the health and welfare of all campers, those campers who cannot adjust to camp (e.g., severe homesickness, bed wetting, disruptive or dangerous behavior, non-compliance) may be sent home by the Camp Director and there is **no refund** for the remainder of that session.

The New York State Cooperative Extension 4-H Programs are conducted in compliance with the Civil Rights Act of 1964. All programs including clubs, activities, events, and special interest groups are provided to all youth on a non-discriminatory basis without regard to race, color or national origin. Cooperative Extension is an equal opportunity employer.

4-H Camp Shankitunk is required to be licensed by the New York State Health Department and is inspected twice yearly. Inspection reports are on file at the NYS Department of Health, 28 Hill St, Ste 201, Oneonta, NY 13820.

Office Phone: (607) 865-6531; In Season Phone (July-August): (607) 746-2004

## SCHOLARSHIPS:

### The LENNOX CAMBERSHIP FUND\*\*

is available to Delaware County residents who live on a bonafide farm. Check "Lennox Campership" box on the Camp application form. The Lennox Campership will pay \$100.00 of the camp fee for ONE WEEK ONLY.

Applications for this campership will be accepted in the order they are received and are subject to available funds.

**The GLADSTONE FAMILY CAMBERSHIP\*\*** has been set up so that all Delaware County 4-H members can attend camp at a reduced rate.

To be eligible you need to be:

\*\*\* A Delaware County 4-Her who has completed 4-H the previous year ( a 4-Her who didn't complete the previous year won't be considered for the campership).

\*\*\* New Delaware County 4-Her (must be enrolled by April 1);

Just check the "Gladstone Campership" box on the Camp application form. The Campership will pay \$100.00 of the camp fee for ONE WEEK ONLY.

**\*\*No one can be awarded both the Lennox Campership (for farm families) and the Gladstone Family Campership.**

**The PEG RUFF MEMORIAL CAMBERSHIP** will provide 5-7 full camperships to Delaware County youth 11-13 years old based upon need and desire to attend camp. This campership is provided by relatives of Peg Ruff. Forms are available by going to: [www.ccedelaware.org](http://www.ccedelaware.org) and clicking on 4-H Camp Shankitunk then Forms.

### The HANNUM FAMILY CAMBERSHIP

is available to Delaware County residents who send more than one child to camp. This campership will pay \$50.00 of the camp fee for the second camper. Applications for this campership will be accepted in the order they are received and are subject to available funds.

Cornell  
Cooperative  
Extension  
serving  
Delaware County  
for over 85 years



Building Strong and Vibrant New  
York Communities

Human Ecology  
4-H  
Agriculture

Phone: (607) 865-6531

Fax: (607) 865-6532

Email: [delaware@cornell.edu](mailto:delaware@cornell.edu)

[www.ccedelaware.org](http://www.ccedelaware.org)

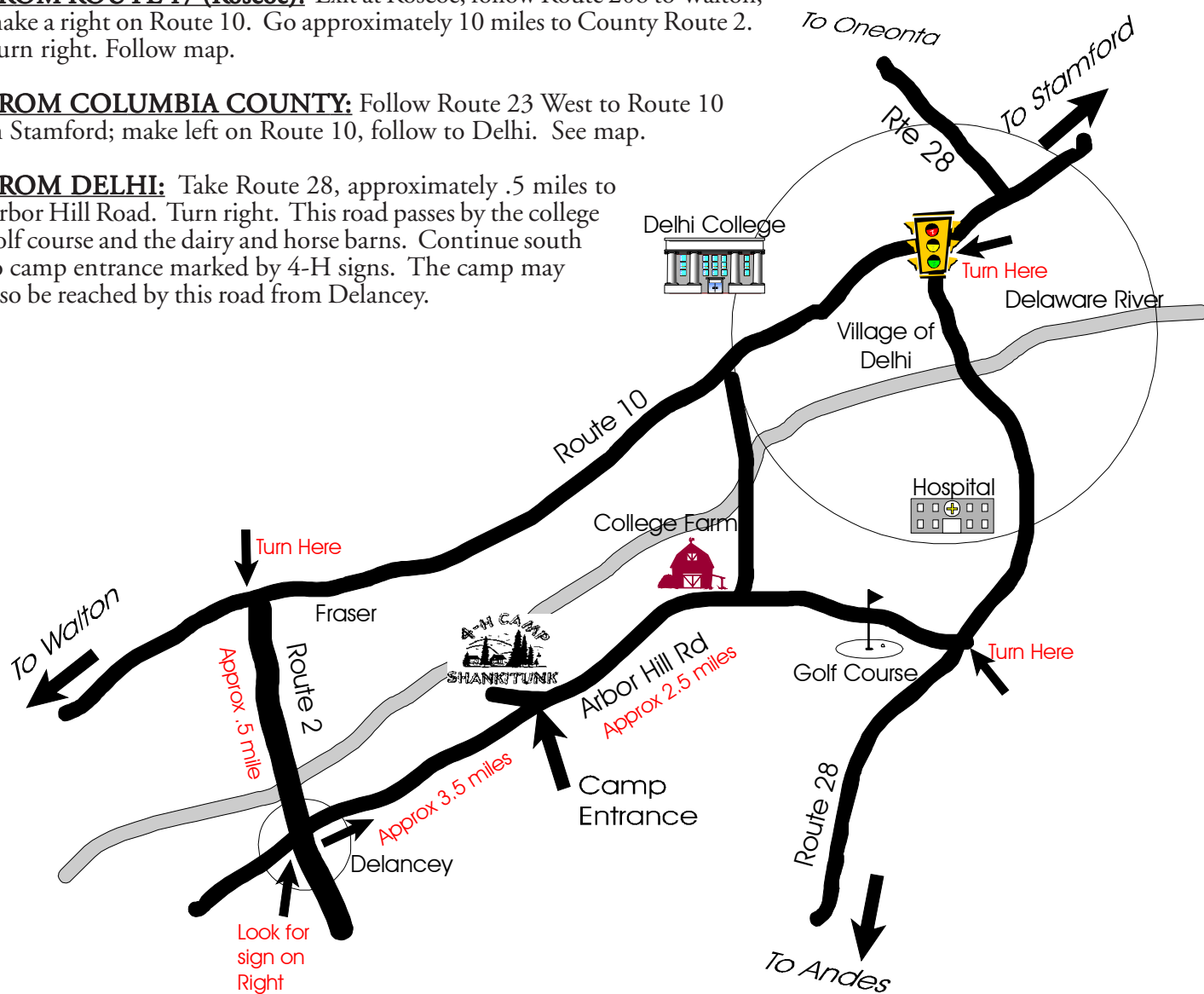
## DIRECTIONS:

**FROM ROUTE 88 (Oneonta):** Take Route 28 East toward Delhi and Kingston. From the traffic light in Delhi take Route 28 approximately .5 miles to Arbor Hill Rd. Turn right. Follow map.

**FROM ROUTE 17 (Roscoe):** Exit at Roscoe, follow Route 206 to Walton; make a right on Route 10. Go approximately 10 miles to County Route 2. Turn right. Follow map.

**FROM COLUMBIA COUNTY:** Follow Route 23 West to Route 10 in Stamford; make left on Route 10, follow to Delhi. See map.

**FROM DELHI:** Take Route 28, approximately .5 miles to Arbor Hill Road. Turn right. This road passes by the college golf course and the dairy and horse barns. Continue south to camp entrance marked by 4-H signs. The camp may also be reached by this road from Delancey.



### **OPEN HOUSE AT CAMP FOR 1st TIME CAMPERS**

WHEN: Sunday, June 6th  
TIME: 2:00 pm - 4:00 pm

- ◆ tour the camp
- ◆ meet key camp staff
- ◆ learn more about our camping program

**THERE IS NO VISITING DURING CAMP SEASON!!**



**THIS FORM NEEDS TO BE FILLED OUT ANNUALLY**

**4-H CAMP SHANKITUNK MEDICAL EXAMINATION & HEALTH HISTORY**

**ALL INFORMATION PERTAINING TO THE CAMPER MUST BE ON THIS FORM ONLY!!!**

**PLEASE SEND IN BEFORE CAMP STARTS.**

**CAMPER WILL NOT BE ALLOWED IN CAMP WITHOUT THE FORMS SIGNED.**

**This Side To Be Filled In By Parent or Guardian:**

Camper's Name \_\_\_\_\_ Sex \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Parent or Guardian \_\_\_\_\_

Home Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Town \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Address \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

If not available in an emergency, notify:

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_ Relationship \_\_\_\_\_

**Insurance Information:**

Insurance Carrier/Plan Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Insured: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Social Security # of policy holder/Insurance ID #: \_\_\_\_\_

Prescription Insurance Carrier: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist/Orthodontist: \_\_\_\_\_ Phone: \_\_\_\_\_

**IMPORTANT:** Please notify the camp if this camper is exposed to any communicable disease during the three weeks prior to camp attendance.

**PERMISSION TO PROVIDE NECESSARY TREATMENT OR EMERGENCY CARE:**

I certify that the information given in this form and on the attached immunization record is current and correct. I hereby give permission to the medical personnel selected by the Camp Director to order x-rays, routine tests, treatment, release any records necessary for insurance purposes, and to provide or arrange for necessary transportation for my child. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the Camp Director to secure and administer treatment, including hospitalization, for the person named above. This form may be photocopied for trips out of camp.

Signature of Parent/Guardian or Adult Camper/Staff: \_\_\_\_\_ Date: \_\_\_\_\_

# IMPORTANT INFORMATION-PLEASE READ, SIGN AND RETURN

Dear Parent/Guardian

This is to inform you about meningococcal disease, a potentially fatal bacterial infection commonly referred to as meningitis, and a new law in New York State. On July 22, 2003, the New York State Public Health Law (NYS PHL) was amended to include section 2167 requiring overnight children's camps to distribute information about meningococcal disease and vaccination to the parents or guardians of all campers. This law became effective on August 15, 2003.

4-H Camp Shankitunk is required to maintain a record of the following for each camper: A response to receipt of meningococcal meningitis disease and vaccine information signed by the camper's parent or guardian; AND information on the availability and cost of meningococcal meningitis vaccine (Menomune TM); AND ONE OF THE FOLLOWING:

- \* A record of meningococcal meningitis immunization within the past 10 years; or
- \* An acknowledgement of meningococcal meningitis disease risks and refusal of meningococcal meningitis immunization signed by the camper's parent or guardian.

Meningitis is rare. However, when it strikes, its flu-like symptoms make diagnosis difficult. If not treated early, can lead to swelling of the fluid surrounding the brain and spinal column as well as severe and permanent disabilities, such as hearing loss, brain damage, seizures, limb amputation and even death. Cases of meningitis among teens and young adults 15 to 24 years of age have more than doubled since 1991. The disease strikes about 3,000 Americans each year and claims about 300 lives.

A vaccine is available that protects against four types of the bacteria that cause meningitis in the United States – types A, C, Y and W-135. These types account for nearly two thirds of meningitis cases among teens and young adults.

Information about the availability and cost of the vaccine can be obtained from your health care provider and by visiting the manufacturer's web site at [www.meningitisvaccine.com](http://www.meningitisvaccine.com). 4-H Camp Shankitunk does not offer meningococcal immunization services.

Please complete the Meningococcal Vaccination Response Form below and return it with the camp health form to 4-H Camp Shankitunk. Note: Per public health law, no institution (camp) should permit any camper to attend the institution in excess of 30 days without complying with this law. The 30-day period may be extended to 60 days if a camper can show a good faith effort to comply.

To learn more about meningitis and the vaccine, please consult with your child's physician. You can also find information about the disease at the New York State Department of Health web site: [www.health.state.ny.us](http://www.health.state.ny.us) and [www.cdc.gov/ncidod/dbmd/diseaseinfo](http://www.cdc.gov/ncidod/dbmd/diseaseinfo).

## MENINGOCOCCAL MENINGITIS VACCINATION RESPONSE FORM

Return to: 4-H Camp Shankitunk, PO Box 184, Hamden NY 13782  
Phone: 607-865-6531, Fax: 607-865-6532

New York State Public Health Law requires the operator of an overnight children's camp to maintain a completed response form for every camper who attends camp.

### **Check one line and sign below.**

\_\_\_\_\_ My child has had the meningococcal meningitis immunization (Menomune TM) within the past 10 years. Date received: \_\_\_\_\_

(Note: the vaccine's protection lasts for approximately 3 to 5 years. Revaccination may be considered within 3-5 years.)

\_\_\_\_\_ I have read, or have had explained to me, the information regarding meningococcal meningitis disease. I understand the risks of not receiving the vaccine. I have decided that my child will **not** receive immunization against meningococcal meningitis disease.

Signed \_\_\_\_\_ Date \_\_\_\_\_  
Parent/Guardian

Camper's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_

(revised 2/16/09)

CAMPER NAME: \_\_\_\_\_

Both Sides To Be Filled In By Physician:

**MEDICAL EXAMINATION & HEALTH HISTORY**

This examination should be performed within 12 months of arrival at camp. Examination for some other purpose (ie: sports, school) is acceptable, please provide copy. Examination is for determining fitness to engage in activities. Code: (blank) - Satisfactory; X - Not Satisfactory; 0 - Not Examined

Height _____	Weight _____	Blood Pressure _____
Eyes _____	Glasses _____	Extremities _____
Ears _____	Posture (Spine) _____	
Nose _____	Skin _____	
Throat _____	Allergy: Please Specify _____	
Teeth _____	Lungs _____	
Heart _____	Hernia _____	
Abdomen _____	General Appraisal: _____	

**FOR GIRLS:** Has this person menstruated? \_\_\_\_\_ If not, has she been told about it \_\_\_\_\_  
If so, is her menstrual history normal? \_\_\_\_\_

**RECOMMENDATIONS AND RESTRICTIONS WHILE IN CAMP**

Special Diet _____	Food Allergies _____
Swimming _____	
Other _____	

**HEALTH HISTORY**

List any medical problems, behavior problems, operations, serious injuries or special considerations.

Allergies _____	Seizures _____	Diabetes _____
Drug Allergies _____	Insect Stings _____	ADD/ADHD _____
Asthma _____	Inhaler _____	Bedwetting _____

IMMUNIZATION RECORD	DPT					
	POLIO					
	MEASLES					
	MUMPS					
	RUBELLA					
	M/M/R					
	HEP B					
	TETANUS BOOSTER					
	Td BOOSTER					
	VARICELLA					
	INFLUENZAE Type b					

PLEASE LIST ALL DATES OF IMMUNIZATIONS SINCE BIRTH!  
  
THIS IS A MUST FOR YOUR CAMPER TO STAY AT CAMP!

**BOTH SIDES MUST BE COMPLETED BY PHYSICIAN.**

CAMPER NAME: \_\_\_\_\_

Both Sides To Be Filled In By Physician:

**MEDICAL EXAMINATION & HEALTH HISTORY - CONT'D**

**All Medications:** Prescriptions, or over the counter medications, must have a written script from your Healthcare Provider. All medications must be in the original container and be labeled with the campers name. Inhalers included.

This is State Law and our nurse cannot dispense without it.

-----  
I have examined the person herein described and have reviewed his/her health history. It is my opinion that he/she is physically capable to engage in camp activities except in those noted on prior page.

Date \_\_\_\_\_

\_\_\_\_\_ Healthcare Provider (MD,NP,PA)

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

Address:  
\_\_\_\_\_  
\_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_

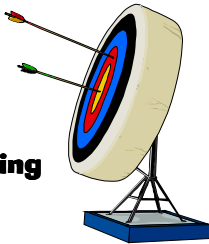
**BOTH SIDES MUST BE COMPLETED BY PHYSICIAN.**

## CLASSES:

**1. Swimming** - Join us for one of our most popular classes. Learn to swim or improve your swimming skills while having a lot of fun. Classes will be taught using the Red Cross guidelines.

**2. Arts and Crafts** - Take something home with you from camp. A creative atmosphere where kids will produce several projects using a variety of materials. Our emphasis is on the use of natural and recycled materials.

**3. Archery I** - Class for beginners and young campers. Learn how to shoot the correct way. Learn basic techniques, safety and have fun while doing. Participants will use Genesis bows in this class. **Campers may NOT bring their own bows.**



**4. Archery II** - For those campers 12 years old and up who have taken Archery I class and have some knowledge of archery. **Campers may NOT bring their own bows.**

**5. Sports and Recreation** - Come on out and play. Active sports such as softball, volleyball, kickball, basketball, soccer and games will be offered. Learn some rules and strategy for these sports. Camp has a lot of sports equipment that campers can use.

**6. Backyard Cookery** - Learn to build a fire and get to eat at the same time. Enjoy cooking and eating a variety of foods made over an outdoor fire.

**7. Science and Nature** - Don't be afraid to get dirty and have some fun. Explore your surroundings. Learn about plants and animals. Take a hike in the woods and check out the river shallows for small creatures. Do experiments and dissect an owl pellet. Bring some old shoes and join us for a good time.

**8. Photography** - Learn photography. You'll learn how to take, compose, manipulate, and print photos.

**9. Camp Newspaper** - Each camper will make their own page for the paper to be handed out at the end of the week. Learn to be a reporter. Interview counselors or make an art page.

**10. Team Challenge Course** - Camp Shankitunk has a wonderful low ropes course. The emphasis is on team work by overcoming obstacles as a group.

**11. Drama** - Would you like to have a part in a production? You may act, mime, or coordinate the costumes, set or make-up. Whatever your part, there will be fun for all, with a special event created by your group on Friday.

**12. Rocketry I** - For those age 10 years and over. This class teaches how to build and safely launch your own rocket. Rocketry I may be taken more than one year. Additional charge of \$15.00 for each class. Payable at registration or in advance.

**13. Rocketry II** - For experienced campers age 12 years and older and who have taken Rocketry I. Additional charge of \$20.00 for class. Payable at registration or in advance.



**14. Rocketry III** - Rocketry III will be offered for experienced campers age 14 and older. Additional charge of \$20.00 for class. Payable at registration or in advance.

**15. Woodworking I** - We have the tools to make it happen. The science center at camp has a camper workshop. You will use tools to make a take home woodworking project. Other 4-H wood working projects are also possible during the week. We will also spend a day learning how to use the various tools in the workshop and the proper safety procedures. There is a \$10.00 extra fee for this program.

**16. Counselor in Training I** - This class is for campers 14 years old and older. A first look at what it means to be a counselor. Self-awareness and cooperation skills will be stressed. Many camp activities will be observed from a counselor's viewpoint.

## CLASSES:

**17. Backpacking I** - A beginners program for campers ages 8 and 9. Learn about equipment used in backpacking. Set up a campsite close to camp and spend a night at the site. Enjoy evening snacks and breakfast cooked over your campfire. You need a sleeping bag. All other equipment provided by camp.

**18. Shooting Sports** - Introduction to air-rifle safety, fundamentals and marksmanship. Must be 11 years old or older. There is a \$10.00 extra charge for this program.

**19. Cooking Up Fun** - For those age 10 and over. Learn about kitchen safety, sanitation, measuring ingredients, reading recipes and eating tasty treats. Making your own food can be fun and healthy. Campers will plan and prepare their own delicious delicacies. Yum! Yum! Join in the Fun!

**Double class period.**

**20. Wilderness Survival** - For those age 13 and over. If you are up for some adventure, this may be the class for you. Campers will spend two nights camping out, cooking their own meals, building shelters, and learning how to survive in the woods.

**Double class period.**

**21. Fishing I** - This class is for beginning campers. Learn how to bait a hook and cast a spinning rod. Campers will fish in the meandering Delaware River near camp. Campers may bring their own pole, but it is not necessary. LET'S GO FISHING.

**Double class period.**



**22. Fishing II** - This class is for campers age 10 and up who don't mind taking a hike to get to a great spot. Campers will take a midweek day outing on the rails to trails to experience some untapped fishing holes and beautiful scenery.

**Double class period.**

**23. Woodworking II** - This class is for campers age 13 and older. Join us for a challenging project in the wood shop. Campers will learn about tools and shop safety while constructing their own Rock-Back chair. There is a \$30.00 extra fee for this program.

**Double class period.**



**24. Counselor In Training II** - For campers 15 years old and older. There will be opportunities to assist in the camp program. CIT numbers may be limited each week. Evaluations will be done. Course teaches philosophy of camping, counseling, differences of campers and leadership.

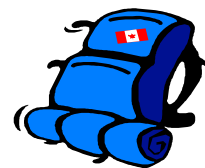
**Double class period.**

**25. Backpacking II** - A basic program for campers 10 years old and up. Learn about the equipment used for backpacking and experience backpacking. Build a better understanding of your abilities as a hiker and more appreciation of packing as a way to carry essentials for living with you.

Actually set up a campsite on the mountain overlooking camp.

Spend a night and prepare your own food. Good hiking shoes or sneakers required.

**Double class period.**



**26. Tennis** - (Week 1 or 3 only) A program for boys and girls age 10 years and over. There is a \$20.00 extra charge for this program that's payable at registration or in advance. The course will be taught each morning at the Delaware Academy courts. The camp will provide the necessary equipment except tennis shoes.

**Double class period.**

**27. Golf** - (Week 2 only) Introduction to the game of golf. Must be 10 years old or older. There is a \$20.00 extra charge for this program that's payable at registration or in advance. Learn basics of play, practice strokes, hitting the golf ball, putting and driving. Conditions permitting, participants will practice at local golf course, using driving range, pitching and putting area.

**Double class period.**

**28. Counselor In Training III**- By invitation only- Campers must have completed CIT I and II. This is the final class of the CIT series that prepares campers to be counselors.

**All Day.**

## 4-H CAMP SHANKITUNK APPLICATION

Return to: 4-H Camp Shankitunk, P.O. Box 184, Hamden, New York 13782

NAME \_\_\_\_\_  
 NICKNAME \_\_\_\_\_ BUNKMATE \_\_\_\_\_  
 BOX, RR, STREET \_\_\_\_\_  
 TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 COUNTY \_\_\_\_\_ PHONE ( ) \_\_\_\_\_  
 SCHOOL DISTRICT: \_\_\_\_\_  
 AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ SEX F M  
MM DD YY  
 Email: \_\_\_\_\_  
 4-H CLUB NAME: \_\_\_\_\_

<b>FOR OFFICE USE ONLY</b>		
	Prepaid	Balance
Registration	_____	_____
Rocketry I	_____	_____
Rocketry II	_____	_____
Rocketry III	_____	_____
Woodworking I	_____	_____
Woodworking II	_____	_____
Shooting Sports	_____	_____
Tennis	_____	_____
Golf	_____	_____
<b>Total</b>	_____	_____
Date	Check #	Amount
_____	_____	_____

Are you a 4-H member?  Yes  No Grade entering in fall \_\_\_\_\_  
 This will be my \_\_\_\_\_ year at 4-H Camp.

- This camper is a Delaware County 4-Her and meets the guidelines on page 2 for 2010. The **Gladstone Family Campership** will pay \$100.00 of the camp fee for ONE WEEK ONLY. Please enclose \$130 with your application.
- This camper meets **Lennox Campership** guidelines on page 2 for 2010. The Lennox Fund will pay \$100.00 of the camp fee for ONE WEEK ONLY. Please enclose \$130 with your application.
- Camp does NOT have my permission to use my child's photo to promote 4-H Camp.

Camp is filled on a first come, first serve basis. Please list first choice of week with a #1; second choice of week by a #2, etc.

\_\_\_\_\_ July 4 - July 9, Week 1  
 \_\_\_\_\_ July 11 - July 16, Week 2  
 \_\_\_\_\_ July 18 - July 23, Week 3  
 \_\_\_\_\_ July 25 - July 30, Week 4  
 \_\_\_\_\_ August 01 - August 06, Week 5

**Do you receive, or are you eligible for free, or reduced lunch?**  Yes

\_\_\_\_\_  
 Parents/Guardian Signature

There are for (4) class periods in each day's schedule. Therefore, campers may select four (4) single period classes to take part in each day or a combination of single and double period classes totaling four (4) class periods.

**Due to scheduling problems, please indicate your first six (6) choices. We will make every effort to give you your first four choices, but we cannot guarantee this.**

**Circle your first four choices and put an X next to your fifth and sixth choice.**

**Single Classes**

1. Swimming
2. Arts and Crafts
3. Archery I
4. Archery II
5. Sports and Recreation
6. Backyard Cookery
7. Science and Nature
8. Photography
9. Camp Newspaper
10. Team Challenge Course
11. Drama
12. Rocketry I - 10 years and older, **\$15.00 extra**
13. Rocketry II - 12 years and older, **\$20.00 extra**
14. Rocketry III - 14 years and older, **\$20.00 extra**
15. Woodworking I - **\$10.00 extra**
16. Counselor in Training I - 14 years and older
17. Backpacking I - 8 & 9 years olds
18. Shooting Sports - 11 years and older, **\$10.00 extra**

**Double Classes**

19. Cooking Up Fun - 10 years and older - Double class period
20. Wilderness Survival - 13 years and older - Double class period
21. Fishing I - Beginners - Double class period
22. Fishing II - 10 years and older - Double class period
23. Woodworking II - 13 years and older - Double class period - **\$30.00 extra**
24. Counselor In Training II - 15 years & older. - Double class period
25. Backpacking II - 10 years and older - Double class period
26. Tennis (Week 1 or 3 only) - 10 years and older - **\$20.00 extra - Double Class Period**
27. Golf (Week 2 only) - 10 years and older - **\$20.00 extra - Double Class Period**
28. Counselor In Training III - by invitation only- all day class

Ethnicity:	
<input type="checkbox"/> Hispanic/Latino	This information is used for Federal Reporting only
<input type="checkbox"/> Non-Hispanic/Latino	
Race	
<input type="checkbox"/> White	
<input type="checkbox"/> Black	
<input type="checkbox"/> Native American	
<input type="checkbox"/> Asian	
<input type="checkbox"/> Pacific Islander/Native Hawaiian	
<input type="checkbox"/> Other	

**PAYMENT:** This application must be accompanied by a \$130.00 pre-registration deposit. There is a one-time \$50 fee for any cancellation Balance & extra fee classes to be paid two weeks before attending camp. If registering for two (2) weeks, complete two (2) applications and send double deposit



Cornell University  
Cooperative Extension  
of Delaware County

**Resource Center**  
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PO Box 184  
Hamden, NY 13782

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Permit No. 2

*Give extra copy  
to a friend!*

CURRENT RESIDENT OR

**Delaware County  
4-Hers...You may be  
eligible to attend  
camp at 1/2 price.  
(See page 2  
for details)**

*Building Strong and Vibrant New York Communities*

