2025 SHANDAKEN SUMMER RECREATION PROGRAM

Camp Dates: July 9th – August 15th Wed, Thurs. Fri. 8:00am to 4:00pm

Location: Pine Hill Lake

Applications, Immunization Records & Field Trip Money due Immediately.

Applications received after July 8th, 2024 may not be able to attend camp on the first day. Applications are not accepted at bus stops. Field trip money for **NY Yankee Stadium and Zoom Flume are due immediately.**

Participants must be at least <u>5 years of age and graduated from Kindergarten to attend</u>. All campers, past and present, must provide immunization records to attend. If your child has not been immunized – please send lab work showing immunity; otherwise, they will not be able to attend the camp. <u>Camp is now open for kids who reside outside of Shandaken for a fee of \$20</u>.

NO CHILD WILL BE PERMITTED TO ATTEND WITHOUT COMPLETE DOCUMENTATION

You need to supply your camper with a bagged lunch, bottled water, a towel, and sunblock (**Please remind them to drink their water and to apply sunblock every hour**).

Applications are now being accepted, and **must be turned in no later than Wednesday, July 3rd, 2025**. Applications will <u>NOT</u> be accepted at the bus stops or the lake. If campers are **registering late** they will not be able to start until the Camp Director speaks to the camper's Parent or Guardian.

General Information

The Shandaken Summer Recreation Program is required to be licensed by the New York State Department of Health. Therefore, we are required to be inspected twice yearly. The following address is where inspection reports concerning the program are filed:

Ulster County Department of Health Division of Environmental Sanitation Annex Office 300 Flatbush Ave. Kingston, NY 12401

Disciplinary System

We maintain a **Zero Tolerance Policy** for any form of bullying, including physical, verbal or emotional. The following disciplinary system will be in effect for all participants for the duration of the recreation program:

Incident may received-

1-Verbal warning 2- A note home 3- A Phone call home 4- Day(s) suspension 5- Dismissal from the program

(Any incident deemed severe or dangerous to other participants may call for more severe consequences, even if it is the first incident; such as dismissal from the program.)

BUS SCHEDULE

Shandaken rec. will be using a yellow school bus this summer There will be a counselor present at each bus stop. **Parents may drop off or pick up at Pine Hill Lake between 8:30am–3:00pm.**

3:40 3:30 3:25 3:20 3:10 3:05 3:00

Campers/Children who will be dropped off and picked up from Pine Hill Lake must have a parent/guardian inform a counselor (In person or writing). Campers/Children must be supervised at bus stops by their parents/guardians until a camp counselor arrives.

All campers will be tested for swim levels even if they attended the Shandaken camp the year before. Swimming lessons will be offered once a week.

Shandaken's Got Talent

For the last 17 years we've had a talent show at the end of the year to showcase the various talents of our campers. We encourage you to help your child to get an "Act" together and help them prepare for the big event.

<u>Trips</u>

We will be taking two off location field trips. The first trip is to the NY Yankees Stadium to watch a game (New York Yankees VS Tampa Bay Rays) Thursday, July 31st; <u>Money is due by 6/2/25</u>. Pay by CASH at the Town Hall office or at <u>www.shandakenpayments.com</u>. Each ticket comes with a Yankees drawstring bag and a \$15 food voucher. Due to the nature of the game, Shandaken Pick Up time will start at 9AM. The game time is 1:05 PM. We are departing from the stadium at 4:30 PM approximate arrival to Shandaken 7 PM. NO OUTSIDE FOOD PERMITTED.

Second field trip is to **Zoom Flume** on **Wednesday August 13th**. Pick up at 7:30 am, return is at 2:30pm. (Availability is based on a first come first serve). NO OUTSIDE FOOD PERMITTED. We ask that only one chaperone per family sign up and only registered campers.

Campers must wear camp t-shirts that will be provided for trip days. Having the campers wear the shirts is easier and safer for counselors and chaperones to determine which child is part of the Shandaken Summer Recreation program. ***Chaperones are not to bring, buy or consume alcohol or use illicit substances (Legal or otherwise) while on field trips.** If you have any questions or concerns please feel free to leave me a message at **Town Hall at (845) 688-7165 or 917-916-9845.**

Please have all paperwork and money (for trips) handed in on time. When paperwork and money are handed in on time, things are organized and less hectic. Thank you so much!!

~Manny

CHILD INFORMATION AND EMERGENCY CONTACT

И/F: А	ge: Date of Birth_	Shirt Size(Adult or Youth)	
lealth History: Plea	se check all that apply		
Frequent Ear I	nfections	Heart Defect/Disease	
Epilepsy		Allergies (Explain)	
Diabetes			
Asthma			
Other (Explain)		
		Please be sure to also include any medications your child is	
lease notify the D	irector if your child is exposed	d to any communicable disease prior to attending the rec	reation p
lease notify the D arent/Guardian N	irector if your child is exposed		reation p
lease notify the D arent/Guardian N mail	irector if your child is exposed	d to any communicable disease prior to attending the reci	reation p
Please notify the D Parent/Guardian N Email Parent/Guardian N	irector if your child is exposed ame: ame:	d to any communicable disease prior to attending the reco Home # Work #	reation p
Please notify the D Parent/Guardian N Email Parent/Guardian N	irector if your child is exposed ame: ame:	d to any communicable disease prior to attending the reco Home # Work # Home # Work #	reation p
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lease notify the D arent/Guardian N mail arent/Guardian N mail mergency contact Name	irector if your child is exposed ame: ame: if parent/guardian cannot be	d to any communicable disease prior to attending the reco Home # Work # Home # Work # reached (must have two) Phone# Address	reation p

Immunization Records or Lab work are required with the Application

Parent/Guardian authorization: This health history is correct and complete. The child herein described has permission to engage in all prescribed camp activities unless otherwise noted. I hereby give my permission for the Shandaken Recreation Director, or designee, to act on my behalf in case of a medical emergency. I give my permission for my child ______ to attend the Town of Shandaken's Summer Recreation Program. She/he will be boarding the bus at ______ (Bus stop)

Parent/Guardian Signature

SHANDAKEN SUMMER RECREATION PERMISSION SLIPS 2025

Camper Name:	
	Parent/Guardian Initial
My child will be attending the 7/31 trip to NY Yankees Stadium	
(\$30.00 Camper)	
I am interested in Chaperoning (one chaperone / family)	
(\$45.00 Chaperone)	
My child will be attending the 8/13 trip to Zoom Flume	
(\$20.00 Camper)	
I am interested in Chaperoning (one chaperone / family)	
(\$20.00 Chaperone)	
*Name & Cell# of Chaperone for NY Yankees Stadium/Zoom Flu	me
Please initial next to each activity your camper can take part in. Permi application for camp. Each camper needs his/her own permission slip. into one.) If additional family members would like to attend any of the at the location.	(Families cannot be combined trips, please purchase your tickets
Parent/Guardian Signature	_
Contact Number:	-
Do you wish to receive electronic communications from Shandaken Rec Email	e. in the future? Y N
Follow us on Facebook: @ Town of Shandaken.	
Join our Facebook Group for timely updates: @ Shandaken Rec. Parer	its.
OFFICE USE ONLY: Application Checklist:	
Application?	
Immunization Record/ Lab work?	
Money for field Trip(s)?	

SHANDAKEN SUMMER RECREATION

Photograph and Social Media Release Permission Form

Dear Parent/Guardian,

Throughout the course of the Shandaken Summer Recreation Program, we often take photographs and videos of campers participating in various activities. These images may be used in promotional materials, social media posts, the town website, local news articles, or camp presentations to highlight the fun and educational experiences we provide.

Please complete the form below to let us know whether or not you grant permission for your child's image to be used in this way.

Child's Full Name:	
Parent/Guardian's Name:	_

Phone Number: _____ Email Address: _____

Please check one:

• [] YES, I give permission for photographs and videos of my child to be taken and used by Shandaken Summer Recreation for promotional and social media purposes, including but not limited to the town's website, Facebook page, Instagram, flyers, and news articles. I understand that my child's name will not be used in any caption or publication unless additional permission is granted.

• [] NO, I do not give permission for any photographs or videos of my child to be taken or used for any purpose.

I understand that these images may be used for public view and that no compensation will be given for their use. I also understand that I may revoke this permission in writing at any time.

Signature of Parent/Guardian: _____

Date: _____

SHANDAKEN SUMMER RECREATION

Free Swimming Lesson Permission & Registration Form

We are pleased to offer free swimming lessons as part of the Shandaken Summer Recreation Program. Lessons are taught by a certified instructor (Rayla Hart) and will be held at our designated facility. These lessons are designed to teach water safety and improve swimming skills in a safe, supportive environment.

Please complete the form below if you would like your child to participate in swimming lessons

Child's Full Name:						
Age: Date of Birth:						
Parent/Guardian's Name:						
Phone Number:	_ Email Address:					
Emergency Contact (if different from above):						
Name:	Phone Number:					

Does your child have any medical conditions, allergies, or physical limitations we should be aware of (especially related to swimming or physical activity)?

[] No [] Yes – Please explain: _____

Swimming Experience (Check all that apply):

- [] My child is a beginner and cannot swim.
- [] My child can float and/or paddle but is not confident in deep water.
- [] My child can swim independently.
- [] My child has had formal swim lessons before.

Permission Agreement:

I give permission for my child, named above, to participate in the free swimming lessons provided by Shandaken Summer Recreation. I understand that every reasonable effort will be made to ensure the safety of my child during these lessons. I also acknowledge that my child must follow all water/pool safety rules and instructions from the swim instructors and recreation staff.

Signature of Parent/Guardian: _____

Date: _____