



Completed Kindergarten through 8th Grade

Town of Caroga

Summer Youth Program

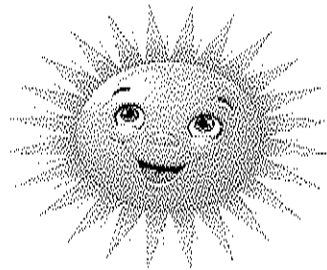
1st Session: July 6th-July 23rd

2nd Session: July 26th-August 13th

Town Hall Building & Grounds

**\*\*We will be following guidance from the CDC and the New York State Department of Health.\*\*\* There are a few changes this year to the program. Please read the entire packet .**

\*\*\*This year's program will be held in two sessions. The first session will run from July 6th through July 23rd. The second session will run from July 26th through August 13th. There are a limited number of spaces available. Priority will be given to children residing within the Town of Caroga and attending Wheelerville Union free School. If spaces do not fill up, those spaces will be opened to children with parents/guardians who reside within the Town of Caroga. If 2nd session doesn't fill up children could potentially attend both sessions. Due to the temporary placement of the Nick Stoner Municipal Golf Course Clubhouse, both sessions will be held at the Town Hall building and grounds. There will be no transportation provided and campers must be dropped off and picked up at the Town Hall. Campers will be asked a series of screening question and have their temperature taken prior to entering each day. Campers WILL have to wear a mask for the duration of program unless they are 6ft. Apart from each other. There will be 12 campers per counselor to ensure social distancing. Field trips will not be a part of the program this year and no swimming at Pine Lake.



**Town of Caroga Staff Directory 2021**

<b>Name</b>	<b>Position</b>	<b>Phone</b>
Colleen Ricciardi	Youth Director/Summer Enrichment	518-774-9945
Shelly Vosburgh	Counselor	518-224-2627
Adam Wilson	Counselor	518-774-1150
Dawn Perron	Counselor	518-705-0811
Shar Wager	Summer Enrichment	518-835-2078
Verna Meher	Counselor	518-604-4011
Town Hall		518-835-4211
Wheelerville School		518-835-2171

## Overview of 2021 Summer Schedule

### General Schedule

The 2021 Season for Summer Recreation 1st session will begin on Tuesday, July 6th through Friday, July 23rd & 2nd session will run from Monday, July 26th through Friday, August 13th. Camp will be held at the Town Hall building and grounds.

### Daily Schedule

Each day campers should arrive at the Town Hall no earlier than 8:50AM and picked up no later than 2:00PM. Attendance will be taken at 9:00AM. Children are then free to participate in games, crafts and other activities, including eating a snack/lunch at their discretion. Clean up will be announced at 1:40PM.



### Child's Responsibilities:

Please remind your child that in order to have fun and a safe experience, they must be respectful of and listen to all staff members' and program rules. Below is a list of several important rules you can review with your child. Please keep in mind that this list does not cover all our guidelines. These rules will be reviewed on the first day of program, and if necessary, throughout the course of the program.

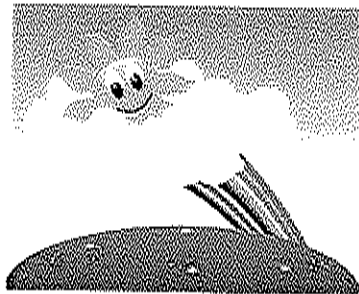
- Be respectful of all staff members
- Take care of your belongings and only your belongings. Your clothes, lunch boxes and bags are YOUR responsibility, not the counselors'. Also, you should not take belongings or move belongings that do not belong to you.
- Take care of the Town Hall. It is a privilege to use the Town Hall for our program. When packing your things each day, you must look around for any garbage to be thrown away, toys to be

to be picked up, and personal belongings to be brought home.

\* If you need to use the restrooms, a counselor must accompany you.

\* Be respectful of your peers. This includes being kind and fair. Bullying like name-calling and emotionally or physically injuring another child will not be tolerated.

\* Be respectful of all boundaries, including staying away from the roads. Further explanation of boundaries will be given on the first day of the program.



### Weather:

The program is held every day, Monday through Friday, rain or shine. In the event of severe weather, the program will be inside the gymnasium.

### Lunch/Drinks:

Most days the children spend the entire day outside playing. There are days when it can get extremely hot and it is the responsibility of the parents to send plenty of food and water (drink) with their child. It is then the responsibility of the children to eat lunch as there is no scheduled time for lunch. There is **NO** refrigeration available so please pack a lunch that contains **No** perishable food items or pack the lunch with an ice pack.

*Avoid packing any glass or knives.*

### Dress:

Send your child dressed appropriately for weather conditions. Please keep the following notes in mind:

\* Clothing depicting violence, profanity, or anything offensive is not permitted

### **Liability/Injury:**

**While attending the summer recreation program, if your child receives any kind of injury that requires medical attention, aside from first aid, you are responsible for any medical bills that may arise.**

### **Health:**

**If your child is sick or not feeling well, please send them to Summer Recreation. This is for the safety of your child and the other attending the program. Anytime a child is ill you will be contacted to pick them up. It is in the best interest of your child for you to keep them home if they are sick.**



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### **Medication:**

**Over the counter medication can no longer be distributed to campers without a physician's signed order of instructions. Under no condition will the Director or Counselors distribute over the counter medication to any camper without a signed, specific set of orders from the Physician.**

### **Do's**



- \*\*Be respectful of the Directors/Counselors**
- \*\*Be respectful to your Peers**
- \*\*Treat your Peers and Director/Counselors the way you want to be treated**
- \*\*Be on your best behavior at all times**
- \*\*Take care of your own belongings**
- \*\*Pick up after yourself**



**\*\*\*SUNSCREEN:** It's important that the children apply sunscreen every day. It is the responsibility of your child to re-apply sunscreen Throughout the day and your responsibility to provide it..

**Activities:**

Activities will be organized throughout the day for the children to participate in. Some activities are dependent on the weather.

**Discipline:**

It is at the discretion of the Director/Counselors when handling discipline, given the severity of the situation. Depending on the severity of the incident a child may face any one of the following consequences:

- \*\*Verbal warning**
- \*\*Verbal warning along with a time out**
- \*\*Verbal warning, time out and written warning notice to the parent**
- \*\*Verbal warning, time out, contact parent/guardian to pick up child along with a 2 day suspension**
- \*\*Dismissal from the program**

Rules and regulations will be reviewed with the children the first week of the program and at times throughout the duration of the program. The children will know what is expected of them.

Please make sure you have read this over with your child... sign the sheets and return to Ms. Ricciardi at the school.

"We appreciate your understanding with the changes we have to make this year and hope that we can work together to make this program an exciting, fun, and safe experience this year



**Town of Caroga Youth Program  
Emergency Contact Form**

**Child's Name:** \_\_\_\_\_

The named persons below will be contacted to pick up your child during the day due to emergency/illness, severe weather, or any other reasons your child may need to be sent home, in the event that we are unable to reach you.

**Person to contact in case of emergency** \_\_\_\_\_

**Phone#** \_\_\_\_\_ **Relation to child** \_\_\_\_\_

**Person to contact in case of emergency** \_\_\_\_\_

**Phone#** \_\_\_\_\_ **Relation to child** \_\_\_\_\_

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**Phone#** \_\_\_\_\_ **Relation to child** \_\_\_\_\_

**Person to contact in case of emergency** \_\_\_\_\_

**Phone#** \_\_\_\_\_ **Relation to child** \_\_\_\_\_

By signing below I hereby give permission to the staff of the Town of Caroga Youth Program to obtain medical care deemed necessary for my child in the event I cannot be reached in an emergency.

By signing below I acknowledge that I have read, understand, and reviewed the Parent/Child Handbook with my child and we understand the rules and regulations of the Town of Caroga Youth Program.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**



**Town of Caroga Youth Program  
Immunization Record Release Form**

I give permission for the Wheelerville Union Free School to release the immunization records for my child, \_\_\_\_\_  
to the Town of Caroga Youth Program.

\_\_\_\_\_  
**Parent/Guardian**

\_\_\_\_\_  
**Date**

***Please note: You must attach a copy of your child's immunization Records. These are required to be on file by the NYS Health Department. Your child's application will not be accepted without immunization record. You may obtain a copy from your child's doctor. If you child attends Wheelerville Union Free School, please sign this form and we will obtain the records from the school.***





**Town of Caroga Youth Program Application**

I give permission for my child \_\_\_\_\_ to attend the Town of Caroga Youth Program. I understand the program rules outlined in the parent/child handbook and realize that if my child receives any injuries while taking part in the activities, I alone am responsible for any medical bills (aside from first aid administered at the site).

\_\_\_\_\_  
**Parent/Guardian Signature**

Please circle one of the following:

Are you a: Summer resident or Year round resident

\*\*If you are a summer resident, please include immunization records along with this application.\*\*

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

Mother's Name: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Place of Employment: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_

Child's T-Shirt Size: \_\_\_\_\_

Child's allergies: \_\_\_\_\_

Child's medication: \_\_\_\_\_

Additional information about your child: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_