

# Be A Healthy Hero

**Healthy, Enriching Summer for Rochester's Kids**

## 5 WEEK SUMMER CAMP

**at Monroe Community College**

**Monday, July 7th - Friday, August 8th, 2014**

**8:00 am - 3:30 pm**

*Transportation: pick-up 7:30 am, drop-off 4 pm*

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***Your \$25 registration fee\* covers the entire camp!***

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**Active Play:**

Wide variety of sports (basketball, swimming, tennis, etc.), fun games, fitness coaching, Zumba and more!

**Engaged Learning:**

Academic enrichment programs to help reduce summer learning loss; reading, mathematics, health education, nutrition, bullying education and more!

**Healthy Breakfast and lunch provided each day!**

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**This camp is offered to students, 1st through 6th grades (ages 6-12 years old), who attend the following Rochester City School District Schools:**

School #2 – Clara Barton

School #10 – Dr. Walter Cooper Academy

School #12 – James P.B. Duffy

School #19 – Dr. Charles T Lunsford

School #43 – Theodore Roosevelt

School #33 – John James Audubon

School #46 – Charles Carroll

School #58 – World of Inquiry

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**Onsite registration dates will be announced shortly.**

*\*A registration fee waiver option may be available based on financial need.*

*\*\*Registration fee will be refunded if the child attends summer school.*

**Sponsored by:**



Monroe  
Community  
College  
STATE UNIVERSITY  
OF NEW YORK



## Camp Objectives:

- ✓ Reach Underserved youth between ages 6-12
- ✓ Provide a healthy start through good nutrition and physical fitness, along with reading and math activities designed to zero summer learning loss
- ✓ Teach youth-centered activities in a safe, positive and enjoyable college environment
- ✓ Provide youth-centered activities that nurture the dreams and aspirations of youth
- ✓ Promote respect, citizenship and sportsmanship in a diverse society
- ✓ Provide quality service and reward excellent performance

## What do I need to Register:

Checklist:

- \_\_\_ A completed application form
- \_\_\_ Health form completely filled out (back of application)
- \_\_\_ A copy of immunization records
- \_\_\_ Camper Waiver and Release form (back of application)
- \_\_\_ Birth certificate
- \_\_\_ Application for USDA Meals

## The Program:

Campers will participate in a wide variety of sports activities. All campers will participate in age appropriate activities including:

- Softball
- Basketball
- Flag Football
- Zumba
- Soccer
- Volleyball
- Ropes course
- Lacrosse

**Campers will also participate in swimming/fitness, health related education (nutrition, drugs and anti-bullying) and reading/math activities daily**

\*7-8 year-olds will be enrolled in the Exclusive Entry Program, designed to develop their cooperation skills while exploring a variety of sports.

## Dates & Times:

The program will run 5 weeks (Monday-Friday) from Monday, July 7th through Friday, August 8th. Hours are 8:00 a.m. to 3:30 p.m. There will be a cold breakfast in the morning and a hot lunch for all participants.

## Insurance:

Liability insurance and complete medical coverage is provided for all participants.

## Eligibility & Cost:

***Your \$25 registration fee\* covers the entire camp!***

This camp is offered to students, 1st through 6th grades (ages 6-12 years old), who attend the following Rochester City School District Schools:

- School #2 – Clara Barton
- School #43 – Theodore Roosevelt
- School #10 – Dr. Walter Cooper Academy
- School #33 – John James Audubon
- School #12 – James P.B. Duffy
- School #46 – Charles Carroll
- School #19 – Dr. Charles T Lunsford
- School #58 – World of Inquiry

*\*A registration fee waiver option may be available based on financial need.*

*\*\* Registration fee will be refunded if the child attends summer school.*

## What's Included:

- ✓ Bus transportation (pick-up & return daily)
- ✓ USDA Breakfast & Lunch is provided
- ✓ Health Education program
- ✓ Academic Enrichment Program
- ✓ Professional sports instruction
- ✓ Official Camp tee-shirt
- ✓ Lots of Fun!!!

## The Facilities:

The entire facilities of Monroe Community College's Physical Education Complex will be used, including three first-rate basketball courts; one of the newest, remodeled, state-of-the-art weight training rooms; project adventure ropes course; and one of the finest softball diamonds in the area!

## CAMP Application Registration:

There will only be **1 - ONE day** for Registration at each site.

- |                        |                |
|------------------------|----------------|
| School #2 – April 8    | 5:00 - 7:00 pm |
| School #10 – March 31  | 3:45 - 5:45 pm |
| School #12 – March 27  | 2:30 - 4:30 pm |
| School #19 – March 20  | 5:30 - 7:00 pm |
| School #33 – March 26  | 4:15 - 6:15 pm |
| School #43 – March 26  | 4:30 - 6:30 pm |
| School #46 – March 26  | 4:00 - 6:00 pm |
| School #58 – April 3rd | 3:30 - 5:30 pm |

**Only the first 325 children who qualify will be accepted into the camp. MUST** be accompanied by a parent/guardian and have proof of age with a **COMPLETED PHYSICAL FORM** signed by a doctor. Children must show proof of physical exam from their doctor within the last year. Must have a copy of their immunization record also.

At registration, every child must have a completed application form. Any application that is not completely filled out and/or not signed by a parent/guardian **will not be accepted and the child will not be able to participate. Please bring the following documents to registration:**

- \_\_\_ A completed application form
- \_\_\_ Health form completely filled out (back of application)
- \_\_\_ A copy of immunization records
- \_\_\_ Camper Waiver and Release form (back of application)
- \_\_\_ Birth certificate
- \_\_\_ Application for USDA meals

If your child is accepted into the camp, please understand that absolutely no rude or disruptive behavior will be tolerated on the bus and/or on the campus of MCC. This is not a babysitting service, it is an educational healthy activity and sports camp that all children are expected to participate fully everyday they attend. Children will be dropped from camp if they demonstrate any rude or disruptive behavior or refuse to participate. Children need to wear sneakers, shorts or sweats and a tee shirt **NO jeans please.**

## Bus information

Please note: Bus pick up is at 7:30 a.m. Campers must have a current camp bus pass to board the bus. Proper conduct is expected.

**Please check one pick-up point:**

- \_\_\_ #12 School
- \_\_\_ Boys and Girls Club (Genesee Street)
- \_\_\_ Clinton and Braden Rec. Center
- \_\_\_ Jefferson High School (Edgerton Park)
- \_\_\_ Carter Street Creation Center
- \_\_\_ #33 School
- \_\_\_ Flint Street Recreation Center
- \_\_\_ #43 School

**At least 20 campers must select a bus stop for it to be available. We reserve the right to change bus stops prior to the start of camp to better serve the majority of camper's families.**

NOTE: Transportation is available to and from Camp at **ONLY** the sites listed on the application.

**Do not bring valuables to camp. Healthy Hero Camp or MCC will not be held responsible for any items lost or stolen.**



## Healthy, Enriching Summer for Rochester's Kids

## at Monroe Community College

# Be A Healthy Hero

Please print clearly. Read all information in this brochure carefully. Provide all information requested in all 7 sections of this application. Not valid until signed by the parent or guardian on both the front and back of this application.

### 2014 Official Application Form

#### 1. CHILD INFORMATION:

RCSD I.D. NO. \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Street: \_\_\_\_\_ ☐ Male ☐ Female Age\*: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of Birth\*: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

*\*Please note: Due to insurance regulations, participants must be between the ages of 7 and 12 must attach a birth certificate to this application.*

Name of school attended this year \_\_\_\_\_ Grade \_\_\_\_\_

#### 2. PARENT INFORMATION:

Parent/Guardian Name: \_\_\_\_\_

Address (if different from child's): \_\_\_\_\_

Phone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_

#### 3. IN CASE OF EMERGENCY:

Emergency Contact (other than parent/guardian)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Numbers: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

#### 4. FINANCIAL INFORMATION:

Yearly Income: \$ \_\_\_\_\_

Number of People in Household: \_\_\_\_\_

During the school year,

does the child receive:

☐ Free Lunch

☐ Reduced Lunch

☐ Pays Full Price

#### 7. PARENT/GUARDIAN SIGNATURE:

Read the statement below and sign on the line below.

I, \_\_\_\_\_, certify that my child will follow all camp rules and will attend all fifteen (15) days or will forfeit participation in future camp activities. I understand that there is always a risk of injury that may occur in any physical activity, therefore, in the event of an emergency or injury to my child, the Healthy Heroes host institution is authorized to obtain any medical care or treatment deemed necessary. I also understand that there is a ZERO-TOLERANCE policy for misbehavior, and that campers may be expelled from the Camp at any time.

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

#### OFFICE USE ONLY

Eligible Target Area Medical Exam  
Yes ☐ No ☐  
☐ ☐ ☐

#### 5. ACTIVITY INTERESTS:

Please Rank

\_\_\_\_ Soccer

\_\_\_\_ Volleyball

\_\_\_\_ Softball

\_\_\_\_ Basketball

\_\_\_\_ Flag Football

\_\_\_\_ Dance/Zumba/Hip Hop

\_\_\_\_ Lacrosse

\_\_\_\_ Golf

\_\_\_\_ Field Hockey

#### 6. BUS INFORMATION:

*Please Note: Buses pick up campers at 7:30 a.m. Campers must have a current NYSP bus pass to board the bus. Proper conduct is expected.*

Please check one pick-up point:

☐ #12 School

☐ Boys and Girls Club (Genesee Street)

☐ Clinton and Braden Rec. Center

☐ Jefferson High School (Edgerton Park)

☐ Carter Street Creation Center

☐ #33 School

☐ Flint Street Recreation Center

☐ #43 School

*Note: At least 20 campers must select a bus stop for it to be available.*

#### ETHNIC IDENTIFICATION (Check one)

☐ African-American

☐ Caucasian

☐ Hispanic

☐ Asian

**MONROE COMMUNITY COLLEGE**

**1000 East Henrietta Road, Rochester, NY 14623**

**CAMPER WAIVER AND RELEASE FORM**

**NAME OF CAMP:** Summer Youth Sports Program

**LOCATION:** Brighton Campus 1000 East Henrietta Road, Rochester NY, 14623

WHEREAS, Monroe Community College has arranged a program which includes transportation between various locations (by bus, automobile or any other form of transportation, public or private): and

NOW THEREFORE, in consideration of the foregoing, and in consideration of the mutual relationship of others participating in said program, and of my participation therein, I do hereby, for myself, my heirs, executors, administrators and assigns, forever remise, and release and discharge said Monroe Community College, its administration, and their heirs, executors, administrators and assigns from any and all manner of action, causes of action, suits, debts, accounts, controversies, damages, claims and demands whatsoever, in law or in equity, which I or any legal representatives, by reason of my death or personal injuries not covered by Campus Center policy, or by reason of any loss or damage to my baggage or any other personal property belonging to me, which may occur during or by reason of my participation in said program. I will take full responsibility for breakage and/or damage to rented equipment and/or facilities; further, I agree that there will be no refunds for whatever reasons.

**I agree that Monroe Community College shall have the right at its discretion to enforce established rules of conduct and/or terminate my participation for failure to maintain these standards, or for actions or conduct detrimental to or incompatible with the welfare, comfort, harmony or interest of the group and its program as a whole.**

I hereby grant Monroe Community College and/or its administration, faculty, directors, officers, members, agents and other representatives full authority to take whatever action they consider to be warranted regarding my health and safety, and I fully release all of them from any liability for such actions taken on my behalf.

I have hereunto subscribed this Waiver and Release for \_\_\_\_\_ on: \_\_\_\_\_  
\_\_\_\_\_ Participants Name Date

Signature of Parent/Legal Guardian: \_\_\_\_\_

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

Telephone No.: \_\_\_\_\_ Emergency No.: \_\_\_\_\_

I certify that I am the parent or legal guardian of the participant named above; that I have read the foregoing release; and that I join in the release without reservations, granting my full consent to all actions provided for therein.

**(for persons OVER the age of 18, the information below must be filled out)**

Signature of Participant: \_\_\_\_\_

Home Address (if different): \_\_\_\_\_