



Spring 2023

Dear Families:

Children between the ages of 5 and 12 are eligible to attend the Unity House Traveling Day Camp. Please remember if your child is 5 years old, he/she must have completed Kindergarten and need to provide documentation. An application is enclosed (the child's immunizations **MUST** be with the application. We will not accept the application without the immunizations). Please complete both and return as soon as possible. Children with completed applications will be accepted first. Please fill out the application in its entirety. If you have difficulty with any part of the application, please contact our office for assistance. We are here to help!

A list of possible destinations for your child is included. Each day we will meet at 8:30 a.m. at **Unity House of Troy – 2431-6<sup>th</sup> Avenue, Troy**. Breakfast and lunch will be provided. From there, the children will take a bus to a fun destination. The camp staff will be offering a variety of activities including swimming, arts and crafts, and outdoor games. **Bathing suits, towels and sneakers are needed daily, as well as a backpack or bag**. It is important to arrive on time and pick up on time as our daily trips are scheduled and we are not able to delay departure or alter the times.

**Applications may be returned in person or by mail to 2431- 6<sup>th</sup> Avenue, Troy, NY 12180.**

If you have any questions, please do not hesitate to contact our office at 518.274.2607. We are excited for another fun-filled summer!

Sincerely yours,

*Claudette*

*Anesha*

Claudette Senior  
Director of Community Resources  
Unity House of Troy, Inc.

Anesha Randall  
Director of Summer Camp  
Unity House of Troy, Inc.

Enclosures

# UNITY HOUSE OF TROY TRAVELING DAY CAMP SCHEDULE FOR 2023

Each two-week session of the camp we will visit various parks in the Capital Region. A tentative schedule of activities is enclosed. A finalized schedule will be provided on the first day of each session.

## First Week of Each Session

**Day 1 – July 10:** Grafton State Park – Depart 9:30am  
100 Grafton Lakes State Park Way, Cropseyville, NY 12052  
Orientation to camp\*

**Day 2 – July 11:** Adirondack Animal Land – Depart 9:30 am  
3554 State Highway 30, Gloversville, NY 12078

**Day 3 - July 12:** Saratoga State Park – Depart 9:30 am  
19 Roosevelt Drive, Saratoga Springs, NY 12866

**Day 4 - July 13:** Cherry Plains State Park- Depart 9:30 am  
10 State Park Road, Petersburgh, NY 12138

**Day 5 - July 14:** Moreau State Park – Depart 9:30 am  
605 Old Saratoga Road, Ganessvoort, NY 12831

## Second Week of Each Session

**Day 6 - July 17:** Saratoga State Park – Depart 9:30am  
19 Roosevelt Drive, Saratoga Springs, NY 12866

**Day 7 - July 18:** Howe Caverns – Depart 9:30am  
255 Discovery Drive, Howes Cave, NY 12092

**Day 8 – July 19:** Million Dollar Beach – Depart 9:30am  
Beach Rd, Lake George, NY 12845

**Day 9 – July 20:** Grafton Lakes State Park – Depart 9:30am  
100 Grafton Lakes State Park Way, Cropseyville, NY 12052

**Day 10 – July 21:** Rotterdam Aquarium – Depart 9:30am  
Via|Port Rotterdam, 93 W Campbell Rd, Schenectady, NY 12306

## **Alternative Locations due to weather:**

1. New York State Museum – 222 Madison Avenue – Albany, NY 12230
2. Latham Bowl – 375 – Troy Schenectady Road – Latham, NY 12110
3. Uncle Sam Lanes - 600 – Fulton St. – Troy, NY 12180
4. Regal Colonie Center Stadium 13 – 131 Colonie Center, Albany, NY 12205

\* Francesca Tutunjian will be notified of ANY changes to itinerary – phone: 518-270-2695

\* Claudette Senior will be notified of ANY changes to itinerary – phone: 518-274-2607

\*Debbie Fleming (Rens. County Food Program) will be notified of ANY changes to itinerary – phone: 266-7550 or 266-7501

**UNITY HOUSE OF TROY  
TRAVELING DAY CAMP APPLICATION FOR 2023  
Required Information**

<b>Camper's Name:</b>			
<b>Address:</b>			
<b>Parent Phone Number:</b> (   )			
<b>Date of Birth:</b>	<b>Age:</b>	<b>Male:</b> <input type="checkbox"/>	<b>Female:</b> <input type="checkbox"/>
<b>Name of School:</b>		<b>Grade in Sept. 2023:</b>	
<b>Parent/Guardian's Name:</b>			
<b>Parent Email for Communication about Camp:</b>			

**FINANCIAL INFORMATION**

<b>Number of Children in Family:</b>
<b>Number of Adults in Family:</b>
<b>Family Source of Income:</b>
<b>Household Income:</b>

**Ethnicity**

White\_\_\_\_\_ Black or African American\_\_\_\_\_ Hispanic or Latino\_\_\_\_\_ Asian\_\_\_\_\_

American Indian or Alaskan Native\_\_\_\_\_ Native Hawaiian or Other Pacific Islander\_\_\_\_\_

Two or More Races\_\_\_\_\_

**BACKGROUND EXPERIENCES**

<b>Has your child ever been to camp before?</b>	<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>
<b>If yes, where and when?</b>		
<b>Are there activities that your child finds difficult?</b> <b>If yes, please explain:</b>	<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>
<b>What kinds of activities would your child like to do?</b>		
<b>What kinds of activities would you like to see your child participate in?</b>		
<b>Has your child had any swimming experience?</b>	<b>Yes:</b> <input type="checkbox"/>	<b>No:</b> <input type="checkbox"/>

**UNITY HOUSE OF TROY**

**TRAVELING DAY CAMP APPLICATION FOR 2023**  
**Camp Sessions**

**Camper's Name:** \_\_\_\_\_

Each camper may attend one, two or three sessions (depending on availability) from 8:30 a.m. to 3:30 p.m. Camp's home base is Unity House of Troy, 2431 – 6<sup>th</sup> Avenue, Troy, NY.

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Session One: July 10th through July 21<sup>st</sup>

Session Two: July 24th through August 4th

Session Three: August 7th through August 18th

What session(s) would you like to register for?

Please circle:      **1<sup>st</sup>**      **2<sup>nd</sup>**      **3<sup>rd</sup>**      or      **all**

Session dates for 2023 are: July 10<sup>th</sup> through August 18<sup>th</sup>.

**UNITY HOUSE OF TROY  
TRAVELING DAY CAMP APPLICATION FOR 2023  
Health Form – Part 1**

This health form (which consists of the next four pages) **must** be filled out completely and be on file with Unity House prior to camp attendance. Please notify the Camp Director if this camper is exposed to any communicable diseases during the three weeks prior to camp attendance to determine continued eligibility.

To be completed by parent/guardian:

**General Information**

**Camper's Name:** \_\_\_\_\_

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

Phone Number: (    ) \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Work Phone Number: (    ) \_\_\_\_\_

**Emergency Notification**

In case parent or guardian is not available during an emergency, please notify:  
*(Fill in both emergency contacts) – Required.*

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

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

Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**UNITY HOUSE OF TROY  
TRAVELING DAY CAMP APPLICATION FOR 2023  
Health Form – Part 2**

**Camper's Name:** \_\_\_\_\_

List any allergies: \_\_\_\_\_

Is your child allergic to any medications?      Yes:       No:

If yes, please list: \_\_\_\_\_  
\_\_\_\_\_

Please complete the following by circling "yes" or "no".  
If "yes", please note date and provide specific information.

Chicken Pox: Yes No Date: _____ Info: _____	Rheumatic Fever: Yes No Date: _____ Info: _____	Ear Infection: Yes No Date: _____ Info: _____
Measles: Yes No Date: _____ Info: _____	Diabetes: Yes No Date: _____ Info: _____	Tubes-Right: Yes No Date: _____ Info: _____
German Measles: Yes No Date: _____ Info: _____	Asthma: Yes No Date: _____ Info: _____	Tubes-Left: Yes No Date: _____ Info: _____
Mumps: Yes No Date: _____ Info: _____	Convulsions: Yes No Date: _____ Info: _____	Reaction to Insect Stings: Yes No Date: _____ Info: _____
Hay Fever: Yes No Date: _____ Info: _____	Poison Ivy: Yes No Date: _____ Info: _____	Other: _____ _____ _____

**UNITY HOUSE OF TROY**  
**TRAVELING DAY CAMP APPLICATION FOR 2023**  
**Health Form – Part 3**

**Camper's Name:** \_\_\_\_\_

Operations or serious injuries? Yes:  No:  If yes, please explain:

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Chronic or recurring illness: Yes:  No:  If yes, please explain:

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Does your child take any medications (prescription or over-the-counter) regularly?

Yes:  No:  If yes, please list below:

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Does your child have any special toileting concerns? Yes:  No:  If yes, please explain:

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Any specific activities to be limited? Yes:  No:  If yes, please explain:

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Are there other circumstances the camp should be notified of in order to support your child at camp?

Yes:  No:  If yes, please explain:

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**Immunization History**

This is a record of dates of basic immunizations and most recent booster doses. Please take the time to carefully fill in the (month, day and year) and check with your physician or school nurse if your home record is incomplete. These dates are needed to meet the requirements of the NYS Department of Health.

DPT Series	Date: _____	DPT Series Booster	Date: _____
Tetanus Booster	Date: _____	TINE Test	Date: _____
Other: _____	Date: _____	Other: _____	Date: _____
Polio OPV (Sabin)	Date: _____	Polio OPV Booster	Date: _____
Measles Vaccine (LIVE)	Date: _____	German Measles	Date: _____
Mumps Vaccine (LIVE)	Date: _____	MMR (three in one)	Date: _____



**UNITY HOUSE OF TROY  
TRAVELING DAY CAMP APPLICATION FOR 2023  
Health Form – Part 4**

Parent/Guardian’s Authorization

This Health History is correct to the best of my knowledge and the camper listed has my permission to engage in all camp activities except those noted by me. In the event of an emergency, I give permission to the Camp Director to hospitalize, secure proper treatment for and to order injections, anesthesia or surgery for my child.

\_\_\_\_\_  
Name of Camper

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

\_\_\_\_\_  
Date

Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please note the following:**

1. Unity House of Troy Traveling Day Camp is required to be licensed by the Rensselaer County Public Health Department.
2. Unity House of Troy Traveling Day Camp is required to be inspected by the Rensselaer County Department of Health at least twice annually.
3. Records of inspection of children’s camps made by the Rensselaer County Department of Health are filed in the office of:

Rensselaer Department of Health County Office Building  
1600 – 7<sup>th</sup> Avenue and State Street  
Troy, NY 12180

**UNITY HOUSE OF TROY  
TRAVELING DAY CAMP APPLICATION FOR 2023**

Dear Parents:

The Unity House of Troy Traveling Day Camp is underway. We hope all the kids have a fun and safe summer. During the season we would like to take pictures of the children during their activities. However, we need your permission to do so.



Thank you.

Sincerely,

Claudette Senior  
Director of Community Resources

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Camper's Name:

\_\_\_\_\_

\*I give permission for my child, \_\_\_\_\_,  
to be photographed by Unity House of Troy for the purpose(s) of:

- Brochures/pamphlets
- Displays
- Education
- Fundraising
- Public relations/media.

\_\_\_\_\_

Signature of Parent/Guardian

Date

\*I do not give permission for my child, \_\_\_\_\_,  
to be  
Photographed by Unity House of Troy for any purpose.