2019 Health Forms and Information

Thank you for choosing Long Lake Camp for the Arts. Please be sure to read both this PDF and the one titled "2019 Forms To Complete." Please return all forms to us within 30 days. Thank you.

Included in this PDF are the 4-page "Health History" and the "Doctor's Standing Orders" forms, they each must be printed and completed by both the **camper's parent and doctor** and returned to Long Lake within 30 days of enrolling. Please then either scan and email them to LongLakeForms@Gmail.com or fax them to 914-693-7684, or mail to:

Long Lake Camp 199 Washington Ave. Dobbs Ferry, NY 10522 USA

If mailing, please keep copies of all forms.

This PDF Portfolio includes the following pages to read or print:

- Welcome To Long Lake Camp For The Arts
- Medical Warning
- 4-page Health History to print and complete
- Doctors Standing Orders to print and complete
- Summer Essentials
- Activities
- Nearby Hotels List
- Options
- Suggested Packing List

Forms to print and complete

Please read all the pages to ensure the most amazing and safe summer for your camper. If you have any questions at all please call us on 914-693-7111. We look forward to meeting you this summer. Thank you,

Marc and Susan Katz

marc@longlakecamp.com



WELCOME FROM OWNERS MARC & SUSAN KATZ

Thank you very much for choosing Long Lake. We hope your camper is getting excited about joining us; we make every effort to provide a creative and fun summer for them.

For your camper's safety, please know that we will not allow them on camp without their medical forms properly signed by parents and doctors and sent into the office. All our forms are available on our website (longlakecamp.com) - click on Parents and then Forms and Documents.

ARRIVAL AND DEPARTURE All details about dates/times are arranged by session on the "Travel Questionnaire." Be sure to look up the details there before making your travel plans. If you wish to use our chartered bus up to camp, keep in mind that: *THERE ARE NO CHARTERED BUSES RETURNING HOME. THE FINAL DAYS OF CAMP ARE VISITORS' WEEKENDS FILLED WITH ACCOMPLISHMENTS, WHICH YOU SHOULD DEFINITELY ATTEND.* We know that for some of our campers who fly to us that this is not possible – don't worry – we'll make your camper feel special!

VISITORS' WEEKEND DATES AND TIMES FOR PARENTS TO BE AT CAMP

All times are exact and the owners will welcome parents at 10 am before the first show.

1st Three-Week Session

Begins on Saturday, July 13 at 9:30 am and ends on Sunday, July 14 at 3:00 pm More details will be sent in our July letter.

2^{nd} Three-Week Session and 1^{st} Six-Week Session

Begins on Saturday, August 3 at 9:30 am and ends on Sunday, August 4 at 3:00 pm. More details will be sent in our July letter.

3rd Three-Week Session and the 2nd Six-Week Session

Begins on Friday, August 23 at 2:30 pm and ends on Sunday, August 25 at 9:00 am. More details will be sent in our August letter.

* * * * * Please plan on being at camp for the entire Visitors' Weekend. * * * * *

Please see "Hotels" list for some suggestions of where to stay. For the First and Second Session, families should arrive in the area Friday night. Please note there is no visiting for 1st and 2nd Visitors' Weekends on Friday; for 3rd Visitors' Weekend, there is no visiting on Thursday. Thank you.

<u>CAMPERS WHO ARE FLYING HOME</u> If Long Lake is taking your camper to the airport for departure home, the actual air travel date should be the day after camp ends for the 1st or 2nd session. For the First Session, the fly home date is July 15 and for the Second Session it is August 5. For the Third Session the actual air travel date is the final day of camp, August 25. PLEASE CALL US TO GO OVER FLIGHT DETAILS ASAP <u>BEFORE</u> YOU FINALIZE THE FLIGHT. Thank you. We only pick up and drop off at Albany airport. See all travel details in the "Travel Questionnaire."

LUGGAGE You can bring <u>one</u> duffel bag or suitcase to the buses. Musical instruments, tennis racquet, sleeping bag, etc. can be carried onto the bus. <u>NO TRUNKS CAN BE TAKEN</u>. We recommend for your comfort and convenience having UPS pick up your camper's duffel bag at your door. Average cost is \$60 and cross-country delivery takes only 3-5 days. Please visit: UPS.com or call 1-800-PICK-UPS. Mailing Address to ship via UPS: Long Lake Camp (Your child's name), CAMPER, 83 Long Lake Camp Way, Long Lake, NY 12847. Make your life easy!

<u>RENTAL CARS</u> Please do not rent a ZIP car as there is no cell phone reception at camp which you need to open your car doors!

| WINTER: Tel 914-693-7111 Fax 914-693-7684 SUMMER: Tel 518-624-4831 Fax 518-624-6003 Email: <u>Marc@LongLakeCamp.com</u> | WINTER ADDRESS: 199 Washington Ave. Dobbs Ferry, NY 10522 | SUMMER ADDRESS FOR US POSTAL SERVICE: P.O. Box 248 Long Lake, NY 12847 | SUMMER ADDRESS FOR FED EX, UPS, DHL: 83 Long Lake Camp Way Long Lake, NY 12847 | |
|---|---|---|---|--|
| Please return all forms in one email to: LongLakeForms@Gmail.com | | | | |

<u>CLOTHING AND FOOD</u> A suggested "Packing List" is online. Long Lake Camp is not a dress-up camp; functional clothing is practical and desirable. You can mark clothing with initials using an indelible laundry marker if desired - much easier than name tags. We also have an "Apparel Order" form if you wish to order any apparel with our logo – this is optional. *Please do not mail any food, drink or money to camp, we will not give food to your children we have not prepared ourselves.*

MEDICAL All medical forms must be filled out accurately and completely. <u>The N.Y.S. Health</u> <u>Department requires immunizations and the dates to be noted</u>. This, of course, is for your child's protection. If your child is undergoing any special medical or therapeutic treatment it is essential that we are notified. Please note all the details on the "Parent Questionnaire." Long Lake Camp must also have a copy of the front and back of every camper's medical insurance card. All prescription and overthe-counter medications must be in their original containers and must be turned into infirmary upon arrival.

OPTIONAL LINEN SERVICE For your convenience we do have a linen service which will supply all the necessary linen items mentioned on the clothing list. Campers still need to bring a lightweight sleeping bag for overnight camping, a beach towel, and washcloths/face cloths if desired. The service fee will be \$60 for an entire 3- or 6-week stay. You can choose this option on the final invoice which we will send before March. This includes sheets, blankets, pillow cases, (pillows included with camp) and bath towels. This is separate from laundry - we do laundry for campers individually at no additional cost.

HORSES Long Lake has an excellent English riding program. We own the horses and they are on camp property. Instruction includes walking, trotting, cantering, jumping, posting and trail rides. This is the only activity for which there is an additional charge. You can select this on final invoice which we will send before March. **WE SUPPLY HELMETS. Campers must have over-the-ankle boots with a** cutaway heel (so that the boot sits securely in the stirrup like a cowboy boot does).

<u>CELL PHONES</u> Cell phones are not allowed to be used for calling or internet services while on camp. If your camper is flying, it is a good idea to pack the phone so they can call you when they arrive. We ask all campers to keep their phones on airplane mode during camp and to use them for music and pictures only. Cell phones can be easily damaged and lost and they cost \$500 to replace. We will not replace lost or damaged phones.

FORMS All forms are on our website (<u>www.longlakecamp.com</u>); click on "Parents," then "Forms & Documents." Please complete all forms within 30 days after enrolling and no later than 2 weeks before camp please. Email all completed forms in one attachment to: <u>LongLakeForms@Gmail.com</u>.

YEARBOOKS & SHOW VIDEOS For campers in the first two sessions, a yearbook will be mailed to the home address on file. For campers in third session, they will be given a yearbook before they leave camp. Show videos will be available to purchase in September when we email the video order forms.

PAYMENT SCHEDULE -- INVOICES ARE EMAILED MONTHLY

On the 1^{st} of each month after enrolling, please send us \$500; the balance is due in full by March 1^{st} 2019 please. All fees must be paid in full before March 1^{st} . If you enroll after March 1st, please ask us for details. Thank you.

If you need any help or information, please contact us. We will be glad to be of service. We are looking forward to a great summer together.

Cordially, Marc and Susan Katz

| WINTER: Tel 914-693-7111 Fax 914-693-7684 SUMMER: Tel 518-624-4831 Fax 518-624-6003 Email: <u>Marc@LongLakeCamp.com</u> | WINTER ADDRESS: 199 Washington Ave. Dobbs Ferry, NY 10522 | SUMMER ADDRESS FOR US POSTAL SERVICE: P.O. Box 248 Long Lake, NY 12847 | SUMMER ADDRESS FOR FED EX, UPS, DHL: 83 Long Lake Camp Way Long Lake, NY 12847 | | |
|---|---|---|---|--|--|
| Please return all forms in one email to: LongLakeForms@Gmail.com | | | | | |

WARNING.... WARNING.... WARNING....

CRUCIAL INFORMATION

YOUR CAMPER MAY NOT BE PERMITTED TO ARRIVE AT CAMP UNLESS WE HAVE RECEIVED BOTH OF THESE FORMS FULLY COMLPETED AND SIGNED BY BOTH PARENTS AND YOUR CHILDS DOCTOR BEFORE THE FIRST DAY OF CAMP.

IF YOU DO NOT PROVIDE THIS CRUCIAL INFORMATION YOUR CAMPER COULD BE CANCELLED WITH NO REFUND.

** A 4-PAGE, 2019 HEALTH HISTORY AND EXAMINATION FORM PROVIDED BY LONG LAKE CAMP. THIS MUST BE COMPLETED BY BOTH PARENT AND DOCTOR. THIS FORM MUST SHOW ANY MEDICATIONS TAKEN AND THE DOSAGE OR MEDICAL CONCERNS. WE MUST HAVE A NEW ONE COMPLETED EACH YEAR PLEASE.

AND

** 2019 DOCTOR'S STANDING ORDER FORM PROVIDED BY LONG LAKE CAMP MUST BE COMPLETED AND SIGNED BY BOTH PARENT AND DOCTOR.

If you have any questions please do call us on 914-693-7111 Thank you! Long Lake Camp For The Arts

| or 9 Use | Health History and Examination Form | | Dates of C | amp Atter | ndance | | |
|----------------|--|---|--|--|--|--|--|
| 030 | for Children, Youth an Attending Camps | d Adults FM 08N | Mail this | form to th | e address | below. | |
| | | | | | | | |
| | Suggested for resident cam | p use. | | | | | |
| | Developed and approved by <i>American Camping Associatio</i> American Academy of Pediatric | | | | | | |
| Year | The information on this form is acceptance process, but is gat appropriate care. Health history out by parents/guardians of m | hered to assist us in identifyir (first three pages) must be fille | ig completed ed every two | I by appro | | | back page) must b I personnel at leas |
| | Name | | Bi | rth date | | Age | at camp |
| | Last | First | Middle | | | | |
| | Home address | | | City | | State | Zip |
| | Social security number of partic | ainant | | , | | | |
| | | | | | | | |
| | Custodial parent/guardian | | | | _Phone | | |
| | (if different from above) Street Address | | | City | | State | 71- |
| | , , , | | | | | | |
| ď | Business address | City | State | Zip | _Phone | | |
| Cabin or Group | Second parent or guardian or | r emergency contact | | | | | |
| 5 | Address | | | | Phone | | |
| = | | | State | Zip | | | |
| an | Business address | | | | _Phone | | |
| | Address | | | City | | State | Zip |
| | Insurance Information | | | | | | |
| | Is the participant covered by fa | mily medical/hospital insuran | ce? 🗆 Yes | □ No | | | |
| | If so, indicate carrier or plan na | me | | (| Group # | | |
| | Photocopy of front and ba | | | | | | |
| | Importa | nt — These boxes m | ust be con | nplete 1 | or atter | idance* | |
| | This health history is correct an person herein named has permiss except as noted. | sion to engage in all camp activitie | es formation po to the Healt hereby agre | ursuant to t h Insuranc | the privacy r e Portability | egulations pr and Accoun | protected health in- omulgated pursuant tability Act of 1996. I) to the disclosure to |
| | I hereby give permission to the ca to routine health care, administrate emergency treatment for me/my ing, but not limited to x-rays, ro hospitalization. I also give permiss transportation. I agree to the rela- treatment, referral, billing, or insu | tion of prescribed medications, ar child, as may be necessary, inclu butine tests and treatment, and/ sion for the camp to arrange relate ease of any records necessary f | nt camp represent herein desc d- the camp re or in camp act ad information or child's healt | sentatives o ribed, as no presentativ tivities; and to the cam th status. | of the protect ecessary: (i) ves related to (ii) in the ca p represent | ed health info to provide re the person's ase of minors atives to keep | rmation of the person elevant information to s ability to participate s, to provide relevant p me informed of my cy, I hereby give per- |
| | It is my intention that the camp b if the person herein named is a n the appropriate representatives o | ninor. Further, it is my intention th | tis mission to th at ter treatmen | ne physicia nt, including | n selected b g hospitaliza | y the camp to tion, for the p | erson named above. rips out of camp. |
| | Signature of parent or guardian of | or adult camper/staffer | | | | | |
| | Printed Name | | | | | Date | |
| | | | | | | | |
| 1 | | | | | | | |
| | I also understand and agree to a | bide by any restrictions placed o | n my participatio | n in camp a | activities. | | |

*If for religious reasons you cannot sign this, contact the camp for a legal waiver which must be signed for attendance. Copyright 1983 by American Camping Association, Inc. Revised 1990, 1992, 1994, 1995, 1996, 1998, 1999, 2000, 2001, 2004.

Health History

The following information must be filled in by the parent/ guardian, or adult camper or staff member. The intent of this information is to provide camp health care personnel the background to provide appropriate care. Keep a copy of the

completed form for your records. Any changes to this form should be provided to camp health personnel upon participant's arrival in camp. Provide complete information so that the camp can be aware of your needs.

ALLERGIES List all known.

Describe reaction and management of the reaction.

| Medication allergies (list) | | | | |
|-------------------------------------|----------------------|--------------------|-----------------|--|
| | | | | |
| | | | | |
| | | | | |
| Food allergies (list) | | | | |
| | | | | |
| | | | | |
| Other allergies (list) — include in | nsect stings, hay fe | ever, asthma, anim | al dander, etc. | |

MEDICATIONS BEING TAKEN

Please list ALL medications (including over-the-counter or nonprescription drugs) taken routinely. Bring enough medication to last the entire time at camp. Keep it in the original packaging/

bottle that identifies the prescribing physician (if a prescription drug), the name of the medication, the dosage, and the frequency of administration.

| This person takes NO medicati This person takes medications | | |
|---|--------|---|
| | | On a sife time to have a she day. |
| Med #1 | Dosage | Specific times taken each day |
| Reason for taking | | |
| Med #2 | Dosage | Specific times taken each day |
| Reason for taking | | |
| Med #3 | Dosage | Specific times taken each day |
| Reason for taking | | |
| Attach additional pages for more r Identify any medications taken du | | ticipant does/may not take during the summer: |

RESTRICTIONS

The following restrictions apply to this individual.

Dietary

- □ Does not eat red meat
- Does not eat poultry
- □ Other (describe)

- Does not eat pork
- Does not eat seafood
- Does not eat eggsDoes not eat dairy products

Explain any restrictions to activity (e.g. what cannot be done, what adaptations or limitations are necessary)

General Questions (Explain "yes" answers below.)

| Has/does the participant: | Yes | No | | Yes | No |
|---|-----|----|---|-----|----|
| 1. Had any recent injury, illness or infectious | | | 17. Ever had problems with joints | | |
| disease? | | | (e.g., knees, ankles)? | | |
| 2. Have a chronic or recurring illness/condition? | | | 18. Have an orthodontic appliance being | | |
| 3. Ever been hospitalized? | | | brought to camp? | | |
| 4. Ever had surgery? | | | 19. Have any skin problems (e.g., itching, | | |
| 5. Have frequent headaches? | | | rash, acne)? | | |
| 6. Ever had a head injury? | | | 20. Have diabetes? | | |
| 7. Ever been knocked unconscious? | | | 21. Have asthma? | | |
| 8. Wear glasses, contacts or protective | | | 22. Had mononucleosis in the past 12 months? | | |
| eye wear? | | | 23. Had problems with diarrhea/constipation? | | |
| 9. Ever had frequent ear infections? | | | 24. Have problems with sleepwalking? | | |
| 10. Ever passed out during or after exercise? | | | 25. If female, have an abnormal menstrual | | |
| 11. Ever been dizzy during or after exercise? | | | history? | | |
| 12. Ever had seizures? | | | 26. Have a history of bed-wetting? | | |
| 13. Ever had chest pain during or after exercise? | | | 27. Ever had an eating disorder? | | |
| 14. Ever had high blood pressure? | | | 28. Ever had emotional difficulties for which | | |
| 15. Ever been diagnosed with a heart murmur? | | | professional help was sought? | | |
| 16. Ever had back problems? | | | | | |

Please explain any "yes" answers, noting the number of the questions.

Please give all dates of immunization for: Which of the following has the participant had? Vaccine: Dates: Mo/Yr Mo/Yr Mo/Yr Mo/Yr Mo/Yr Mo/Yr □ Measles DTP □ Chicken pox TD (tetanus/diphtheria) □ German measles Tetanus _ _ _ _ _ □ Mumps Polio _____ Hepatitis A MMR ____ ____ □ Hepatitis B or Measles _ _ □ Hepatitis C or Mumps _____ or Rubella **TB** Mantoux Test Haemophilus influenza B _ _ ____ Date of last test Hepatitis B Result: D Positive Varicella (chicken pox) Negative

Use this space to provide any additional information about the participant's behavior and physical, emotional, or mental health about which the camp should be aware.

| Name of family physician | Phone | |
|-------------------------------------|-------|--|
| Address | | |
| Name of family dentist/orthodontist | | |
| Address | | |
| | | |

Health Care Recommendations by Licensed Medical Personnel

| | | | exams within 24 months of camp attendance. | | | |
|--------------------------|--|---|--|--|--|--|
| BP | • | ns. A new exam is not necessarily requi Height | red for camp attendance.) | | | |
| In my opinion, the abo | P Weight Height n my opinion, the above applicant I is I is not able to participate in an active camp program. The applicant is under the care of a physician for the following conditions | | | | | |
| | | | | | | |
| | | | | | | |
| Recommendations | and Restrictions | s at Camp | | | | |
| Treatment to be contir | nued at camp | | | | | |
| Medications to be adn | ninistered at camp (i | name, dosage, frequency) | | | | |
| | | | | | | |
| Any medically-prescril | oed meal plan or die | etary restrictions | | | | |
| Known allergies | | | | | | |
| Description of any limit | tation or restriction of | on camp activities | | | | |
| Additional information | for health care staff | at the camp | | | | |
| | | | | | | |
| Signature of Licens | ed Medical Person | nel | | | | |
| Printed | | Title | | | | |
| Address | | | | | | |
| Phone | | | Date | | | |
| For camp use only | | | | | | |

| Screening Record Date screened Meds received | am pm |
|--|----------|
| Updates/additions to health history noted □ Yes □ No □ None required | |
| Observational notes | |
| Screened by | |

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2019 INDIVIDUAL DOCTOR'S STANDING ORDERS FOR LONG LAKE CAMP

Please complete and return to LongLakeForms@Gmail.com

CAMPER'S NAME......SESSION.....

DOCTORS and PARENTS: PLEASE SIGN OR STAMP BELOW IF YOU ARE OK WITH EVERYTHING.

Below are the over the counter medications we hold in our infirmary that can be dispensed by our registered nurses if BOTH the campers DOCTOR and PARENT/S sign this form. The medications shall be administered by registered nurses per these standing orders and the dosage/ usage information as on the medication's instructions. The nurses will check this form first to make sure the camper has specific authorization to be giving the medication and will ask the camper if they are allergic to the medication. Please return to LongLakeForms@Gmail.com

**** Long Lake Camp must have a copy of the front and back of every camper's medical insurance card.**** IMPORTANT: NO MEDICATIONS WILL BE ADMINISTERED WITHOUT THIS FORM.

| | CONDITION | OTC MEDICINE | | D THE FOLLOWING OTC DO NOT WANT GIVEN. |
|-------------|------------------------|---|--------|---|
| | | | PARENT | DOCTOR |
| | ALLERGIES | BENADRYL | | |
| | RUNNY NOSE | AIRBORNE | | |
| | STUFFY NOSE | SUDAFED | | |
| S | SORE THROAT | HALLS, SUCRETS, CHLORASEPTIC | | |
| Y | COUGH | MUSINEX /ROBITUSSIN | | |
| S | FEVER/PAIN | TYLENOL | | |
| Т | MENSTRUAL PAIN | ADVIL OR MIDOL | | |
| E | HEARTBURN/INDEGSTION | TUMS OR PEPTO BISMOL | | |
| M I | CONSTIPATION | MILK OF MAGNESIA | | |
| C | HEADACHE | IBRUPROFEN | | |
| | ALLERGY RELIEF | CLARINEX FOR CHILDREN 12+ | | |
| | VITAMINS | AS SUPPLIED BY PARENTS | | |
| | DIARRHEA | IMODIUM AD | | |
| | TAKEN WITH ANTIBIOTICS | ACIDOPHILUS | | |
| | COLD SORES | ABREVA | | |
| | MOUTH SORES | ORAJEL | | |
| T O P | MINOR WOUNDS | HYDROGEN PEROXIDE, BETADINE, BACITRACIN, TRIPLE ANTIBIOTIC, BACTINE, SALINE | | |
| I C | ITCHY SKIN IRRITATION | CALAMINE LOTION, HYDROCORTISONE OINTMENT, BENADRYL CREAM | | |
| A | ATHLETE'S FOOT | LAMISIL AT | | |
| L | SUNBURN/BUG BITES | SOLARCAINE, ALOE VERA, BUG SPRAY | | |
| | MOTION SICKNESS | DRAMAMINE | | |
| | SUN BLOCK | ANY OTC FACTOR 15 HIGHER | | |
| | EYE IRRITATION | EYE WASH | | |

MUST BE COMPLETED BY PARENT & MD DR'S STAMP BELOW

| | (PARENT'S SIGNATURE) | (date) | (Doctor name and Title Printed) (date) |
|------------|-----------------------------|--------|--|
| | | | Address |
| OK WITH ME | (Doctor's Signature) | | City, State Zip |
| | ir | 1 | () |
| | License/ Certificate number | State | (Telephone Number) |

2019 LONG LAKE CAMP FOR THE ARTS – SUMMER ESSENTIALS

Summer Mailing Address June 15th to August 25th

| US Mail | FedEx - Airborne – UPS – DHL |
|----------------------------|------------------------------|
| Long Lake Camp For Arts | Long Lake Camp For The Arts |
| (Your child's name) CAMPER | (Your child's name) CAMPER |
| P.O. Box 248 | 83 Long Lake Camp Way |
| Long Lake, NY 12847 | Long Lake, NY 12847 |
| | |

Food and gum will be confiscated; please inform Grandparents as well. Please do not send any money.

Summer Phone numbers June 15th to August 25th

| Office | Fax | Infirmary | |
|---|--------------|--------------|--|
| 518-624-4831 or $914-693-7111$ | 518-624-6003 | 518-624-5361 | |
| Your Unit Leader is your primary contact; they know your child the best and can help you the soonest. | | | |

Winter address and phone September to June 15th NOT IN USE DURING SUMMER

199 Washington Avenue, Dobbs Ferry, NY 10522 USA. Phone 914-693-7111, Fax 914-693-7684

Email - We only respond to email quickly during the winter months, not during the summer camping season when every second counts. Please only call us during the summer, if you do email and do not get a response please call us.

Medical Forms - Please insure you have sent all of the medical forms to us before the beginning of camp; without them your camper may be cancelled with no refund.

Shy Campers - Long Lake offers our campers a tremendous number of opportunities, which can be overwhelming. If your child is shy, please encourage them to speak up and tell us if there is anything we can do to help. Our Unit Leaders excel at helping campers if they tell us what they need or if there are any problems. When talking to your child's Unit Leader please tell them of any concerns regarding your child participating or that your child may appear happy and busy but may need to be motivated further to take full advantage of everything. We want every camper to have the best summer of their life, but we cannot achieve this without your help and your child's willingness to speak up. We need both you and your child to fully commit to the summer: trying new activities, making friends and telling us if there is anything your child or you do not like, or are not getting. Summer camp is a great place to develop confidence and self-advocacy, especially for our younger campers.

Visitors' Weekend dates - Parents are expected to attend our Visitors' Weekends (if possible) to enjoy camp and take their children home. Six-week parents' official visiting weekend is the last weekend of your camper's stay. Do not be worried though if your child says a six-week parent came after three weeks; some parents live nearby. Visitors' Weekend days are:

 $1^{\rm st}$ Session: starts Sat., July $13^{\rm th}$ @ 9:30 a.m.; ends Sun., July $14^{\rm th}$ @ 3:00 p.m.

 2^{nd} Session & 1^{st} 6 wks: starts Sat., Aug. 3^{rd} @ 9:30 a.m.; ends Sun., Aug. 4^{th} @ 3:00 p.m.

3rd Session & 2nd 6 wks: starts Fri., Aug. 23rd @ 2:30 p.m.; campers depart Sun., Aug. 25th 8:30 - 9:00 a.m.

Bus Pickup Times - Arrive 30 minutes or more before the bus is scheduled to leave to avoid missing it. We will not wait for campers arriving late to the bus as this delays the entire schedule for the day.

8:00 a.m. – West Orange 10:00 a.m. – Queens 11:00 a.m. – Yonkers 2:00 p.m. – Clifton Park

Thank you very much for entrusting your child to us! Please call us at 914-693-7111 if you need anything.



Long Lake Camp for the Arts Activities

914-693-7111 www.longlakecamp.com

Theater - *Perform in a* Musical / Play / Comedy / Short One Act *Take classes in*: Acting / Improv / Audition Technique / Stand Up Comedy / Character Development / How to learn your lines *Learn about back stage theater*: Lights / Sets / Sound / Props / Costumes / Stage Management / Assistant director / Wrangling / Make Up

Music - *Perform in a* Jazz Band / Orchestra / Pit Orchestra / Chorus / Strings Ensemble / Brass ensemble / Drumline / Woodwind Ensemble / Guitar Ensemble / Percussion Ensemble / Solo Vocal / Solo Instrumental. *Take Private Classes in*: Vocals / Woodwinds / Brass / Strings / Drum Set / Composition / Song Writing / Digital Music Composition / Electric Bass / Classical Guitar / Electric Guitar / Piano / Keyboard

Fine Arts - *Create in the following studios:* Painting / Drawing / Printmaking / Sculpture / Tie Dye / Silk Painting / Weaving / Welding / Fashion / Photography / Darkroom / Digital Arts / Dungeons and Dragons / Rocketry / Installation Arts/ Jewelry / Silversmithing / Body Art / Time Based Art / Ceramics / Illustration / Graphic Design

Film - *Make your own film and learn about the following:* Sound / Editing / Cinematography / Special Effects / Animation / DVD authoring / Screen play writing / Storyboarding / Location Scouting / Directing / Casting / Censorship / Soundscaping

Dance - *Perform in* Ballet / Modern / Hip Hop / Jazz / Tap / Contemporary / Swing / Pointe / Partnering *Take Classes in:* Ballet / Modern / Hip Hop / Jazz / Tap / Contemporary / Swing / Pointe / Partnering

Circus - *Perform in the circus show*: Aerial acts / Ground Acts / Clowning /Become a Circus A.C.E. (spend most of your day at Circus). *Help technically with circus as a:* Rigger / Runner / Make Up / Costumes / Set Painting

Rock Bands - *Perform in a* Rock Band / Blues Band / Reggae Band / Ska Band / Heavy Metal Band / Modern Rock / Instrumental Rock / Record Your Songs / Make a Rock Video *Take Private Rock lessons in:* Guitar/ Bass/ Vocals / Keyboards / Recording Studio / Band Management

Magic – *Perform close-up magic*, card tricks, mind-reading, slight-of-hand, mentalism, illusions and learn misdirection.

Water Front - *Enjoy the lake:* Swimming / Tubing / Wakeboarding / Water Skiing / Sailing / Jet Ski / Cruises / Swim Lessons / Paddle Boarding / Canoeing / Paddle Boats / Fishing / Relaxing

Sports — Enjoy the following: ATV's / Tennis / Horseback Riding / Soccer / Climbing / High Ropes / Tetherball / Ping Pong / Fitness / Paintball / Fencing / Jogging / Hiking / Volleyball / Basketball / Rubgy / Kubb / Badminton / Archery / Martial Arts

NEARBY HOTELS AND MOTELS 2019

SUMMER ADDRESS FOR GPS: 83 Long Lake Camp Way, Long Lake, NY 12847

| LONG LAKE CAMP FOR THE ARTS 2019 VISITORS' HOTEL RESERVATIONS SHOULD BE FOR THE EVENINGS OF: | | | | |
|--|--|--|--|--|
| 1 st 3 Weeks – July 12 & 13 | 2 nd 3 Weeks – August 2 & 3 1 st 6 Weeks – August 2 & 3 | 3 rd 3 Weeks – August 23 & 24 (22 possibly) 2 nd 6 Weeks – August 23 & 24 (22 possibly) | | |
| *** To book a hotel to drop off your camper, please note that campers arrive on the first day of the session. *** *** 1 st & 2 nd Session Visitors' Weekends begin Saturdays @ 9:30 am; 3 rd Session begins Friday @ 2:30 pm *** | | | | |

--- TIMES ARE SUBJECT TO CHANGE ---

HOTELS- MOTELS- COTTAGES- ROOMS - some may be closed for Winter until April 1. Many places require a 3-day minimum. Get confirmed written reservations. All are clean and tidy. You're not spending any time in the motels as you are at camp for most of your waking moments. Pricing is from \$125-\$250 per night. The hotels fill up quickly and you will not be able to book a room upon arrival in Long Lake. If you are interested in staying longer, please call Long Lake Real Estate at 518-624-2999 to inquire about cabins and lodges. For information about other hotels in the area, please go to mylonglake.com or call them at 518-624-3077 or email them at longlake@mylonglake.com. <u>All motels listed are good – there are no better or worse ones on this list- get the first one that has rooms available please!</u>

INDIAN LAKE, NY (22 Miles South of Camp) Closer during your drive up for the weekend.

| Adirondack Trail Motel | 518-648-5044 |
|------------------------|--------------|
| Indian Lake Motel | 518-648-5859 |
| Point Breeze Motel | 518-648-5555 |
| Snowy Mountain Inn | 518-648-5995 |

BLUE MOUNTAIN LAKE, NY (11 Miles South of Camp)

Blue Mountain Rest The Hedges La Prairie Lakefront Cottages 518-352-7006 518-352-7325 518-352-7323 Weekly rentals only, with very few weekend rooms which are usually booked by November.

LONG LAKE, NY (closest hotels to Camp) Very few rooms will actually be available.

| Adirondack Hotel | 518-624-4700 |
|-----------------------------|--------------|
| Blueberry Hill Motel | 518-624-5824 |
| Camp Zamp Bed & Breakfast | 518-624-2351 |
| Donnelly's Sunset Point | 518-624-6551 |
| Journeys End Cottages | 518-624-5381 |
| The Lodge on Long Lake | 518-624-2862 |
| Motel Long Lake | 518-624-2613 |
| Sandy Point | 518-624-3871 |
| Shamrock Motel and Cottages | 518-624-3861 |

TUPPER LAKE, NY (18 miles North of Camp) Has many units.

| 518-359-9040 |
|-----------------------------|
| 518-359-3600 / 800-382-3603 |
| 518-359-9209 |
| 518-359-3384 |
| 518-359-3995 |
| 518-359-2320 |
| 518-359-3381 |
| |

SARANAC LAKE, NY (40 miles North of Camp)

| Best Western | 518-891-1970 |
|---------------|--------------|
| Hotel Saranac | 518-591-2200 |

Options Available for Long Lake Camp For The Arts 2019

Tuition for camp includes all the activities, individual lessons, supplies, food, and lodging your camper needs. There are a few options you can choose if you wish.

How to let us know which options you wish

On the final invoice we will email you before March, please check off any options you wish and include the amount in your final payment. Options must be selected by March 1, 2019. If you need to make changes after that, please call us. If you wish to rent an instrument after March 1st, please know that we need to know at least two weeks before your child arrives at camp.

Linens \$60: Includes pillow case, sheets, blankets, and bath towels. We do laundry individually each week (that's included in tuition) and make sure our campers are comfortable. If you do choose linen rental, please also be sure to pack a sleeping bag, beach towel, and washcloths/face cloths if desired.

Buses To Camp \$80: We charter modern, comfortable coaches with professional and trusted drivers. Our own staff accompany the campers. We do not have any buses back home due to our Visitors' Weekend.

Airport Pick Up and Drop Off \$80: We can meet your camper at Albany airport and take them back there to fly home. The cost is \$80 total for either one way or both.

Instrument Rentals \$60 to \$100: You are welcome to bring your own instruments with you, but if you prefer you can rent one though us. We have drums and pianos already at camp so there is no need to rent those. We can rent you guitars (electric, acoustic), electric basses, woodwind and brass instruments. Other instruments may also be rented – please call us with your specific needs. The cost depends on the instrument and covers a 3-week or a 6-week stay.

Horseback Riding \$25 per lesson or \$125 Unlimited: We ride English-style and campers who wish to ride must bring appropriate footwear (over-the-ankle boots with a cutaway heel like a cowboy boot has). We supply helmets.

Long Lake Camp Apparel \$15 to \$45: Please see the Apparel Order Form if you would like to purchase anything.

If you have any questions please do call us on 914-693-7111 Thank you! Long Lake Camp For The Arts

Long Lake Camp For The Arts 2018 Suggested Packing List

Please do not over pack. Laundry is <u>done once a week **individually**</u> for our campers and <u>returned the same evening</u>. Shorts and short sleeves are worn during the day; long pants and long sleeves at night.

- Do not send sensitive, expensive clothing or expensive items that you cannot lose or get damaged.
- This list is only a recommendation and it is not necessary to purchase all these items new.
- We strongly recommend for your comfort and convenience having UPS pick up your camper's duffel bag at your door. Average cost is \$50 and cross-country delivery takes only 3-5 days. Please visit: UPS.com or call 1-800-PICK-UPS. UPS Ship it to: Long Lake Camp (Your child's name), CAMPER, 83 Long Lake Camp Way, Long Lake, NY 12847. *Make life easy for yourself!*

Clothing

4-6 short-sleeve shirts
5 pr. shorts
2 long-sleeve t-shirts
4 pr. jeans/long pants (and belts if desired)
2 sweatshirts
10 pr. socks
12 pr. underpants
2 pr. pajamas
2-4 bathing suits
Bathrobe
Heavy jacket (like a fleece jacket)
3 white tee shirts
Dressy outfit (Night Club activity *3rd session only*)
Raincoat/hat or poncho

Linens

2 sheets, 54" x 90" (twin flat)*
2 heavy blankets*
3 bath towels*
Pillow case* (pillow is provided)
Face cloths/washcloths (if desired)
Beach towel
Lightweight sleeping bag for overnight camping
* Unless linen service is chosen on the final invoice.
It includes: pillow case (we provide a pillow),
2 sheets, bath towel, heavy blanket)

Footwear

Sneakers Rain boots Slippers/flip flops Hiking boots (optional for hiking) Over the ankle boots with cutaway heel* **needed if they wish to horseback ride*

Camp Life

Flashlight & batteries Large laundry bag marked with name Digital camera/disposable camera Reusable water bottle Writing paper/envelopes/stamps/pens Books to read Voltage converters (if you are from overseas) Inexpensive watch Musical instrument* *unless rented – see Options on final invoice

Toiletries

Sun block cream Soap/container Comb/brush Shampoo/ Conditioner Deodorant Toothbrush & ample toothpaste Make-up remover Chapstick If desired, nail polish (and remover) Cotton balls & Q-Tips CUTTER band insect repellent (Cutter is the most effective)

For Performing Arts

Black tights girls/ black pants boys Character shoes **(**

For Dancers

Black tap shoes (if you like tap) Pink ballet slippers, toe shoes if en pointe Black, flesh, pink convertible tights Black camisole leotard Hip hop shoes (if you like hip hop) Black jazz pants, jazz sneakers/shoes Foot ndeez for modern (if you like modern) Regular class apparel, like leg warmers, toe pads, ballet skirts, make-up and hair accessories