



# 4-H camp overlook

**Administrative Office  
and Registration**  
Franklin County Courthouse  
355 West Main Street, Suite 150  
Malone, NY 12953

**Location of Camp**  
70 Beach Road  
PO Box 10  
Mountain View, NY 12969  
[www.4hcampoverlook.org](http://www.4hcampoverlook.org)

## 2012 Summer Camp Registration Booklet



**DON'T WAIT! APPLY NOW!**

For the past 5 years camp has filled to capacity so PLEASE apply early to ensure your first choice of weeks.

Spaces are filled on a first come/first serve basis.

A \$75 deposit will reserve your spot at camp.

**NEW THIS YEAR!**

All campers must choose **one** environmental class. They are listed as classes 1, 2, 3 & 4. If you do not choose one of the environmental classes we will remove one of your class choices and fill it with an environmental class.

### **Register now for 2012 camp sessions**

Cloverbud Camp Thursday, June 28 — Saturday, June 30

Traditional Week 1 Sunday, July 1 — Friday, July 6

Traditional Week 2 Sunday, July 8 — Friday, July 13

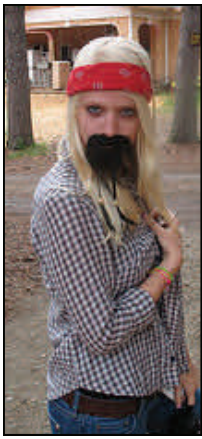
Traditional Week 3 Sunday, July 15 — Friday, July 20

Traditional Week 4 Sunday, July 22 — Friday, July 27

Traditional Week 5 Sunday, July 29 — Friday, August 3

Traditional Week 6 Sunday, August 5 — Friday, August 10

**Cornell Cooperative Extension Franklin and St. Lawrence Counties**



# TRADITIONAL OVERNIGHT CAMP

For Traditional Overnight Camp please complete **Part A** of the Camp Application

**For Ages 8 to 19 years**  
**Cost is \$340 per camper**

Traditional camp sessions provide youth between the ages of 8-19 with an in-depth six-day, five-night residential camp experience. Campers participate in a variety of classes (see descriptions enclosed), camp activities, cook-outs, sporting events, games and evening programs that include a talent show and a dance. Our programs are designed to provide youth with a beneficial summer experience that emphasizes good clean fun! Camp is an excellent opportunity for youth to try new activities that are exciting and challenging. In addition to our senior staff, campers are provided excellent supervision from our well-trained counselors, who are positive role models. Older campers should keep in mind that the Counselor-In-Training 1 and 2 will be held weeks 3, 4 and 5. Counselor-In-Training 3 is available weeks 1 and 2 only.

## Traditional Camp Session Dates

<b>Week 1</b>	July 1 <sup>st</sup> - July 6 <sup>th</sup>	<b>Week 4</b>	July 22 <sup>nd</sup> - July 27 <sup>th</sup>
<b>Week 2</b>	July 8 <sup>th</sup> - July 13 <sup>th</sup>	<b>Week 5</b>	July 29 <sup>th</sup> - August 3 <sup>rd</sup>
<b>Week 3</b>	July 15 <sup>th</sup> - July 20 <sup>th</sup>	<b>Week 6</b>	August 5 <sup>th</sup> - August 10 <sup>th</sup>



# CLOVERBUD CAMP

For Cloverbud Camp please complete **Part B** of the Camp Application

**For Ages 6 to 8 years**  
**Cost is \$165.00 per camper**  
**Arrive on Thursday, June 28<sup>th</sup> at 10:00<sup>am</sup>**  
**Depart on Saturday, June 30<sup>th</sup> at 1:00<sup>pm</sup>**

Cloverbud Camp is specifically designed for younger campers 6-8 years old. It's a two-night, three-day camping experience, that provides the ideal opportunity for a young child to develop independence and experience an overnight camp for the first time. Our counselors are specially trained to meet the needs of 6-8 year old campers and our kitchen staff will love spoiling your child with nutritious meals every day. Classes and activities are modified to meet the younger campers' abilities so that they have fun while making new friends. Children will be participating in nature, craft, recreation and waterfront activities, a teddy bear parade, and a variety of fun presentations.

## Non-Refundable Deposit:

A non-refundable \$75.00 per week per child deposit must accompany **ALL** applications. Your deposit is non-refundable once the applicant is offered one of their chosen weeks.

**All final payments are due in full by June 1<sup>st</sup>.**

There will be a \$25.00 fee for checks returned to Camp Overlook.

## Scholarship Information:

**All scholarship applications must be submitted by April 1<sup>st</sup> to qualify for assistance.**

**Scholarships** are awarded based on financial need and date received by the Camp Office. To apply for assistance you must complete and sign the Scholarship Form and submit it with your completed camp application. Scholarships are limited so be sure to submit your application before the **April 1<sup>st</sup>** deadline.



**All 4-H members are eligible for some scholarship assistance regardless of income.**

**Active 4-H members are encouraged to submit a scholarship form with their application.**



# 4-H Camp Overlook

## 2012 Summer Camp Application

355 West Main Street, Suite 150, Malone, NY 12953  
 Questions? Email [campoverlook@cornell.edu](mailto:campoverlook@cornell.edu)  
 Phone: (518) 483-4769 or Fax: (518)483-6214  
[www.4hcampoverlook.org](http://www.4hcampoverlook.org)

Office Use Only			
Postmark Date		Invoice #	
Name on Check		Check #	Amt
Sponsored by:		Scholarship	F SL

Please print  
**Camper Name** \_\_\_\_\_ **Sex:** F M **Date of Birth** \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
**Age upon arrival at camp:** \_\_\_\_\_ **Parent/Guardian Names** \_\_\_\_\_  
**Street/P.O. Box #** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Home Phone:** (\_\_\_\_) \_\_\_\_\_ **Cell Phone:** (\_\_\_\_) \_\_\_\_\_ **Work Phone:** (\_\_\_\_) \_\_\_\_\_  
**Email** \_\_\_\_\_ **Ethnic Identity:** (optional) \_\_\_\_\_  
**How did you hear about 4-H Camp Overlook?** Parents are Alumni / Friend / Newspaper / Radio / School / Website / Other  
**4-H Club Member?** Y N **If Yes, club name:** \_\_\_\_\_  
**This will be my** \_\_\_\_\_ **year attending 4-H Camp Overlook.** **COUNTY of Residence** \_\_\_\_\_

**Bunkmates:** All cabin assignments are first come, first served.  
 I would like to bunk with: **(limit: 2 bunkmates)** \_\_\_\_\_ / \_\_\_\_\_

Fill out **ONLY** the part that pertains to you. Call the 4-H Camp Overlook Office at 518-483-4769 if you need help completing this application.

Indicate your 1 <sup>st</sup> choice w/1 2 <sup>nd</sup> choice w/2  Circle the MW if you are applying for multiple weeks	Week and Dates	Cost	Choose Your Classes Classes are listed on the back of this application. Choose 4 periods. Some classes have 2 periods. New this year! One of your classes must be an environmental class. See class list. In case one of your classes is not available list an alternate class choice in shaded column. Class descriptions can be found in this brochure.	Class Fees See additional class fees on back of application	Total Camp Fees Add your columns across for your total	TRIBE	CABIN
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Part A	Traditional overnight camp							Ages 8 to 19	List your environmental class here	Office Use			
	MW	1	July 1 – 6	\$340					Alt. Class	\$	\$		1
	MW	2	July 8 – 13	\$340					Alt. Class	\$	\$		2
	MW	3	July 15 – 20	\$340					Alt. Class	\$	\$		3
	MW	4	July 22 – 27	\$340					Alt. Class	\$	\$		4
	MW	5	July 29 – Aug. 3	\$340					Alt. Class	\$	\$		5
	MW	6	Aug 5 – 10	\$340					Alt. Class	\$	\$		6

**Total Traditional Camp Fee** \$

Part B	cloverBUD camp				Ages 6 to 8	Office Use	
	CB	June 28–June 30	\$165	Cloverbud campers do not choose classes		\$	

Yes! I would love to make a contribution to support summer and winter programs.  
 or/and  Yes! I would love to make a contribution in support of cabin and ground maintenance.

+\$

**A \$75 deposit must accompany ALL applications; Total Amount Enclosed**  
 even if you are applying for a scholarship

-\$

**Balance Due** \$

Please read and sign the other side of this application.

Unsigned applications will be returned for signatures and may jeopardize acceptance in your first choice of sessions.

**Final Payments and Health Forms are due by June 1<sup>st</sup>, 2012**

**Payment:** A minimum deposit of \$75.00 per week per camper must accompany this application (full payments will also be accepted). Deposit is **non-refundable** once a camper is offered one of their chosen weeks. You will receive an acceptance packet that will include an invoice with balance due and a newsletter containing all the information you will need to attend camp. All payments are due **June 1<sup>st</sup>, 2012**.

Make checks payable to: "4H Camp Overlook" and include your child's name on the check.

I give permission for my child to participate in 4-H Camp Overlook activities and have completely read the 2012 brochure and will cooperate with all regulations. I release Cornell Cooperative Extension, 4-H Camp Overlook, its staff, and Board of Directors from all liability for any actual or alleged injury to me including death or damage to or destruction of property arising out of any act or omission on part of myself or my child in connection with the 4-H Camp Overlook Program. I give permission for any photos of my child to be used in promotions (brochure, website, slides, newspapers, ads, posters, etc.) concerning 4-H Camp Overlook.

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_  
**Parent/Guardian Signature**

**Please remember...**

1. To sign and date your completed application.
2. To list your classes on the front of application.
3. To complete your section of the Health Form and bring it to your physician so they can fill out their section. **Please** allow your physician ample time to complete this form. **Health Forms are due by June 1<sup>st</sup>, 2012**. A few ideas: They can fax it to us at 518-483-6214 or you can give them an envelope with our address on it so they can mail it directly to us. **WE CANNOT HAVE CAMPERS AT CAMP WITHOUT THIS FORM.**
4. Include a minimum deposit of \$75 per camper with the camper name on the check.
5. Final payment and Health Forms are due **June 1<sup>st</sup>, 2012**

**Scholarship Info (Deadline April 1<sup>st</sup>)**

To qualify for a scholarship we must have a completed Scholarship Form submitted with your camp application by **April 1<sup>st</sup>**. Forms must be **COMPLETELY** filled out to qualify. All active 4-H members are encouraged to apply for a scholarship regardless of income.

**Class Choices for Summer 2012**  
**Environmental Classes are #1, 2, 3 & 4. You must choose ONE of these classes.**  
 See page 9 for class descriptions.

Class #	Class	Periods per Class Choose 4 periods	Week Class is Available	Age Limits	Class Size Limit Per Week First Come First Served	Class Fee
<b>NEW</b> You must choose one	1	Outdoor Cooking & Wild Edibles	1	All ←	<b>All campers must choose <u>one</u> of these four environmental classes.</b>	
	2	Celebrating Birds	1	All ←		
	3	Renewable Energies	1	All ←		
	4	Wonders of Weather	1	All ←		
5	Fishing	2	All		30	
6	Adventure Course 1	1	All	8 years and up		
7	Adventure Course 2	2	All	12 years and up or 11 years with Adventure Course 1 experience		
8	Adventure Course 3	2	Weeks 4-6	13 and up with 3 years Adventure Course experience		
9	Archery – Novice	1	All			
10	Archery – Advanced	1	Weeks 4-6	Previous archery experience		
11	Drama	1	All			
12	Sailing	1	All			
13	Canoeing and Kayaking	1	All			
14	Team Fun & Fitness	1	All			
15	Rocketry	1	All			\$ 14
16	Camp Crafts	1	All			
17	Air Gun Marksmanship	1	All			
18	First Aid	1	Week 3 Only			
19	Quilted Pillow	2	Weeks 3 & 5 Only	10 and up	10	\$10
20	Basketry	2	Week 4 Only	10 and up Sorry ... If you have taken this class in the past you will not be accepted this year.	10	\$20
21	Build a Bench	2	Week 5 Only	12 and up	10	\$25
22	CIT Part 1	1	Weeks 3-5 Only	14 by June 20		
23	CIT Part 2	1	Weeks 3-5 Only	15 by June 20		
24	CIT Part 3	4	Weeks 1+2 Only	16 by June 20	15 each week	

# 4-H CAMP Overlook Health Form

Due June 1<sup>st</sup>, 2012

Week	CB	1	2	3	4	5	6
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**Please allow your health care provider ample time to complete the physician section on the back of this form and return it to us.**

This form needs to be completed every year. Health Forms are not carried over from previous years. Campers cannot attend camp without this form. Health forms are due with your final payment on **June 1<sup>st</sup>**. Your health care provider can send the completed form to us at: **4-H Camp Overlook, 355 West Main Street, Suite 150, Malone, NY 12953** or by fax at **518-483-6214**.

Please Print

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

Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ Sex: M F Weight: \_\_\_\_\_ lbs.

Phone: Home (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

**If not available in an emergency, notify:**

1. Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

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

2. Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

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

Please Print

Name of camper's physician: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Date of last physical examination: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Family Insurance Coverage

Name of Plan: \_\_\_\_\_ Health Insurance Company: \_\_\_\_\_

Name of Employer (if group): \_\_\_\_\_

Name of Policy Holder: \_\_\_\_\_ Policy Number: \_\_\_\_\_

**Health History** (check if appropriate):

<input type="checkbox"/>	ADD/ADHD	<input type="checkbox"/>	Bed Wetting	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	Heart Defect / Disease	<input type="checkbox"/>	Sinusitis
<input type="checkbox"/>	Asthma	<input type="checkbox"/>	Bleeding / Clotting	<input type="checkbox"/>	Frequent Earaches	<input type="checkbox"/>	Hypertension	<input type="checkbox"/>	Sleepwalking
<input type="checkbox"/>	Athlete's Foot	<input type="checkbox"/>	Convulsions	<input type="checkbox"/>	Frequent Colds / Sore Throat	<input type="checkbox"/>	Menstrual Problems	<input type="checkbox"/>	MRSA

## Allergies

<input type="checkbox"/>	Penicillin	<input type="checkbox"/>	Food: Please Specify	<input type="checkbox"/>	Environmental: Please Specify	<input type="checkbox"/>	Other Drug Allergies:	<input type="checkbox"/>	Other Allergies:
<input type="checkbox"/>	Hay Fever	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
<input type="checkbox"/>	Insect Stings	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____
<input type="checkbox"/>	Poison Ivy	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____

**Additional Information:** To ensure a successful summer for your child and other campers, please provide any information about the participant's behavior and physical, emotional, or mental health which the camp should be aware of:

\_\_\_\_\_

## Current Condition or Special Needs:

Please describe any recent illness, injury, existing medical condition, restriction or special need that your child has.

\_\_\_\_\_

## Special Dietary Needs:

\_\_\_\_\_

## Emergency Authorization

This health history is correct so far as I know, and the person herein described has permission to engage in all prescribed activities, except as noted. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the adult leader in charge to hospitalize, secure proper anesthesia, or to order injection or surgery for my son or daughter.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Camper's**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Weight \_\_\_\_ lbs.

Immunization Record				
Please fill in the following immunization chart or attach a copy of the campers immunization record.				
Vaccine	Mo/Day/Yr	Mo/Day/Yr	Mo/Day/Yr	Mo/Day/Yr
Diphtheria, Pertussis (Whooping Cough), Tetanus (DPT)				
Tetanus, Diphtheria (TD)				
Diphtheria				
Tetanus				
Oral Polio (Sabin) TOPV				
MMR				
Measles (Hard Measles, Red Measles, Rubella)				
Mumps				
Rubella (German Measles, 3 day measles)				
Haemophilus Influenza B (HIB)				
Varicella (Chicken Pox)				
Hepatitis B				
Other				
TB Mantoux Test: Date of last test _____ Result (positive or negative)				

**Physician's Section**

**NOTE: If a licensed health care provider does not sign this form, the camper will not be given any prescription or over the counter medication.** Please allow your health care provider ample time to complete this form and return it to us.

**Health Care Recommendations:** Please complete with patient's current regimen for both scheduled and prn medications – use 2<sup>nd</sup> page if needed. Please bring all regularly taken medications (prescription and over the counter) to the camp nurse when registering.

Drug Name	Route <small>Please circle preferred formulation</small>	Dosage	Schedule and Indications	Health Care Provider Order	Comments
<b>Prescription Medications</b>					
<b>Over The Counter</b>					
Tylenol	PO - Chewable tabs, elixir or tabs	Per label instructions by age/weight	Q 4 hr prn for pain or fever > ____°F	Yes No	
Ibuprofen	PO - Chewable tabs, suspension, or tabs	Per label instructions by age/weight	Q 6 hr prn for pain or fever > ____°F	Yes No	
Robitussin	PO - Syrup	Per label instructions by age/weight	Q 4 hr prn for cough	Yes No	
Pepto-Bismol	PO - Chewable tabs, or liquid	Per label instructions by age/weight	Q 30 min to 1 hr prn for diarrhea (no > 8doses/24hr)	Yes No	
Children's Mylanta	PO - Chewable tabs	Per label instructions by age/weight	TID-QID prn for stomach upset	Yes No	
Tums	PO - Chewable tabs	Per label instructions by age/weight	BID-TID prn for stomach upset	Yes No	
Dimetapp	PO - Chewable tabs - 50 mg	Per label instructions by age/weight	Q 6-8 hr prn for nasal congestion/drainage	Yes No	
Benadryl	PO - Elixir, chewable tabs, or pills	Per label instructions by age/weight	Q 6 hr prn for allergic reaction (hives, insect bite)	Yes No	
Midol	PO - Chewable tabs, or liquid	Per label instructions by age/weight	Q 4-6 hr prn for menstrual symptoms	Yes No	
Imodium AD	PO – Tabs	Per label instructions by age/weight	1 caplet after 1 <sup>st</sup> BM, and ½ caplet after each subsequent loose BM	Yes No	
Loratadine	PO – Chewable tabs	Per label instructions by age/weight	1 tablet daily for allergies	Yes No	
Zyrtec	PO – Tabs	Per label instructions by age/weight	1 tablet daily	Yes No	

Health Care Provider Name: \_\_\_\_\_

Phone: \_ (\_\_\_\_) \_\_\_\_\_

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

License # \_\_\_\_\_

Health Care Provider Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Due  
April  
1<sup>st</sup>**

## 4-H camp overlook 2012 Scholarship Application Form

**For Franklin and St. Lawrence County Campers Only!**  
 You need only fill out one scholarship application per family.  
 This form must be filled out completely and returned with your camp application(s) by **April 1<sup>st</sup>, 2012** in order to qualify.  
 355 West Main Street, Suite 150, Malone, NY 12953  
 Phone: (518)483-4769 Fax: (518)483-6214  
 Email: [campoverlook@cornell.edu](mailto:campoverlook@cornell.edu)

<b>Office Use</b>	<input type="checkbox"/> Franklin
	<input type="checkbox"/> St. Lawrence
	\$ _____ Deposit Amount
	\$ _____ 2011      \$ _____ 2012
_____	
Date Notified	

**All information is strictly confidential. Please contact our office if you need help with this form.**

**Section 1 Child's Information** List each child applying for a scholarship.

Name	Address	Age	Male or Female	4-H Member ?
1.			M F	Y N
2.			M F	Y N
3.			M F	Y N
4.			M F	Y N

**Section 2 Parent / Guardian Information**

Name	Address – if different from child's	Phone
		(    )
		(    )

Has your child received a scholarship in the past?    Y    N	Did your child attend camp with that scholarship?    Y    N
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Please describe any specific financial situations that your family faces that would make it difficult for you to pay the camp fee for your child.


**Section 3 You must list ALL sources of income in this section for ALL adults living in this home with the child(ren)**  
**Family Information – Application will not be considered if this section is not fully completed.**

Names of ALL Adults living in this household	What is your relationship to camper?	Are you employed?	Place of Employment	TOTAL Monthly income
	Guardian Mother / Stepmother	Y or N		
	Guardian Father / Stepfather	Y or N		

Number of ALL dependent children living in the home: \_\_\_\_\_

Ages of children: \_\_\_\_\_

Does the family and/or child receive public assistance?    Y    or    N

Type of Assistance: You may qualify for other assistance. Please answer this question **COMPLETELY**.  
 Example: Public Assistance from the Department of Social Services, Social Security, Veterans Benefits, Unemployment, Child Support, etc.  
 \_\_\_\_\_

**Please turn over and complete the other side.**

What would you consider the single most important reason for your child to attend 4-H Camp Overlook this year?

To promote health and physical development	To have a good relationship with an adult as a role model
To develop relationships with others his/her own age	To give the child & parents a break in situations where tensions at home are high
To increase self-confidence and maturity	To have a change of environment
<b>Explain:</b>	

**Section 4** The more information we have, the easier it will be to determine a family and child's need for a scholarship. Please write any additional information here that you feel would help our selection committee to better understand the scholarship or special needs of your child.


There are no full scholarships available. What amount would you need for each child to attend camp? \_\_\_\_\_  
 Cloverbud Camp: \$165.00 Traditional Overnight Camp: \$340.00

I am applying for a scholarship for the following camp sessions.

Week	Dates	Camp	Week	Dates	Camp
CB	June 28 to June 30	Cloverbud	4	July 22 to July 27	Traditional Overnight
1	July 1 to July 6	Traditional Overnight	5	July 29 to August 3	Traditional Overnight
2	July 8 to July 13	Traditional Overnight	6	August 5 to August 10	Traditional Overnight
3	July 15 to July 20	Traditional Overnight			

**Remember!**

In order to be considered for a camp scholarship we must receive your completed camp application along with your \$75 deposit and this scholarship form by April 1<sup>st</sup>, 2012.

The selection committee will meet shortly after April 1<sup>st</sup> to distribute the available funds so it is important to have your paperwork in by the due date. Scholarship notification will be mailed as soon as possible after the Selection Committee meeting.

**Health Forms and final Payments must Be received By**  
**June 1<sup>st</sup>**

# classes for Traditional overnight camp

Class #	Class Name	Availability & Number of Periods	Class Description
1 2 3 4	Outdoor Cooking & Wild Edibles	Available all weeks Uses 1 class period	<p>All campers must choose <b>one</b> of these four environmental classes.</p> <p>This class explores all kinds of outdoor cooking from the traditional to the “high-tech”! Participants will learn to safely cook over campfires and propane stoves, prepare simple meals using “back packable” ingredients, and experience such interesting wild edibles as dandelion fritters and burdock soup!</p> <p><b>Sponsored in part by the Chapin Family in memory of Ruth Chapin.</b> This class will feature the highly recommended Flying Wild curriculum where campers will learn how birds nest, feed, migrate, and utilize their cunning sense of vision.</p> <p>Campers will be instilled with a sense of appreciation for the natural world around them while learning about current climate issues and renewable energy.</p> <p>Campers will engage in hands on experiences that depict how weather works. We will discuss global weather patterns, as well as regional and local patterns.</p>
	CELEBRATING BIRDS	Available all weeks Uses 1 class period	
	RENEWABLE ENERGY	Available all weeks Uses 1 class period	
	WONDERS OF WEATHER	Available all weeks Uses 1 class period	
5	FISHING—AQUATIC EDUCATION	Available all weeks Uses 2 class periods	<p><b>Class size limited to 30 campers per week</b></p> <p>Whether you take fishing seriously or do it as a leisure activity, there’s nothing like feeling a tug on the end of your line! Campers will learn about fishing techniques, fish habitat and safety, while fishing from rowboats. Poles and equipment provided.</p>
6	ADVENTURE COURSE— LEVEL 1	Available all weeks Uses 1 class period	<p><b>Age limit 8 and up</b></p> <p>Campers in the Level 1 class participate in a variety of games and fun group initiatives designed to develop trust and teamwork.</p>
7	ADVENTURE COURSE— LEVEL 2	Available all weeks Uses 2 class periods	<p><b>Age limit 12 and up or 11 and up with Level 1 experience</b></p> <p>Level 2 participants focus on team-building and communication skills through the use of group initiatives and low ropes elements. Campers also learn spotting and safety techniques.</p>
8	ADVENTURE COURSE— LEVEL 3	Available Weeks 4—6 Uses 2 Class Periods	<p><b>Age limit 13 and up with at least 3 years of Adventure Course experience</b></p> <p>Campers who have participated in the Adventure Course for <b>three years and are at least 13 years old</b> will spend the majority of their time on low &amp; high elements including the Burma Bridge and the Zip Line. They will also learn knot-tying, belaying, and other advanced skills.</p>
9	ARCHERY— NOVICE	Available all weeks Uses 1 class period	Campers learn the parts of the bow and arrow, archery safety, and practice to develop shooting skills.
10	ARCHERY— ADVANCED	Available Weeks 4—6 Uses 1 class period	Campers learn the parts of a compound bow and develop advanced shooting skills. Designed for those who have archery experience.
11	DRAMA	Available all weeks Uses 1 class period	Develop your stage presence while hamming it up with friends in this exciting performing arts class. Campers will have a blast while working on simple theatrical performances under the guidance of our most charismatic counselors.
12	SAILING	Available all weeks Uses 1 class period	Campers will be able to identify the main parts of a sailboat, learn rigging and shoring procedures and understand how to right an overturned or tipped sailboat. Campers must wear life jackets and are under the supervision of Red Cross Certified Lifeguards.
13	CANOEING AND KAYAKING	Available all weeks Uses 1 class period	J-Stroke, C-Stroke or Draw? Learn the difference between these types of canoe strokes and glide effortlessly across the water! Camp has added kayaks to its water sports fleet, giving campers an opportunity to try out this exciting sport.

<b>Class #</b>	<b>Class Name</b>	<b>Availability</b>	<b>Class Description</b>
<b>14</b>	<b>TEAM FUN &amp; FITNESS!</b>	Available all weeks Uses 1 class period	Campers will learn the basic components of a healthy diet and be introduced to fun team activities.
<b>15</b>	<b>ROCKETRY</b>	Available all weeks Additional class fee \$14 Uses 1 class period	Campers will be introduced to the science of Model Rocketry as they learn about different types of rockets and recovery systems. Rocket safety will be an important part of all activities. The class will culminate on Friday with campers launching a rocket which they have constructed themselves.
<b>16</b>	<b>CAMP CRAFTS</b>	Available all weeks Uses 1 class period	This class allows campers to take home a camp memory. Campers will create a variety of traditional camp crafts and new projects.
<b>17</b>	<b>AIR GUN MARKSMANSHIP</b>	Available all weeks Uses 1 class period	Feel the sense of accomplishment as you improve your target score with every shot! Campers will use air-powered pellet guns to learn gun safety, range procedures and basic marksmanship, while under the careful supervision of 4-H Shooting Sports staff.
<b>18</b>	<b>New! First Aid</b>	Available Week 3 Only	<b>This class will be taught by guest instructor, Jim Tuggey.</b> Do you want to have fun and learn more about first aid practices? If you do than this is the class for you! We will cover water safety, bleeding, burns and much more. Campers will also learn how to do a spiral bandage, make a sling and splint.
<b>19</b>	<b>QUILTED PILLOW</b>	Available Week 3 & 5 Only Uses 2 class periods Additional Class fee \$10	<b>Class size limited to 10 campers per week ages 10 and up.</b> Campers will make their own quilted pillow to take home. All supplies and sewing machines will be provided. Class instructor will be Linda Tuggey.
<b>20</b>	<b>BASKETRY</b>	Available Week 4 only Uses 2 class periods Additional Class fee \$20	<b>This class will be taught by instructor Linda Buchanan.</b> <b>Sorry ...</b> If you have taken this class in the past you will not be accepted this year. <b>Class size limited to 10 campers per week ages 10 and up.</b> A local basket maker will teach campers how to make a beautiful reed basket that they will be proud to take home!
<b>21</b>	<b>BUILD A BENCH</b>	Available Week 5 only Uses 2 class periods Additional Class fee \$25	<b>Class size limited to 10 campers per week ages 12 and up.</b> Campers will learn the fundamentals of pioneer woodworking using primitive tools. Campers will then fashion their own half-log wooden bench to take home (or leave at camp if you prefer).
<b>22</b>	<b>COUNSELOR IN TRAINING PART 1</b>	Available Weeks 3, 4 and 5 only Must be age 14 by June 20 Uses 1 class period	If you are interested in becoming a camp counselor this course is for you! The CIT I program introduces campers to the philosophy of Camp Overlook, including camp traditions, songs, and safety rules.
<b>23</b>	<b>COUNSELOR IN TRAINING PART 2</b>	Available Weeks 3, 4 and 5 only Must be age 15 by June 20 Uses 1 class period	This course is for teens continuing their training as a camp counselor. The CIT II program focuses on leadership styles, the importance of communication, developing teamwork, and techniques for working with children.
<b>24</b>	<b>COUNSELOR IN TRAINING PART 3</b>	Register as a traditional camper and choose class #25 only. Available Weeks 1 and 2 only. Must be age 16 by June 20 Uses 4 class period	<b>CIT III – Leadership in the Making - Limited to 15 campers per week.</b> This is a program for campers, 16 years of age, who are looking for a completely unique camp experience! Participants will be involved with all aspects of camp, but be on a separate and specialized learning tract that prepares them for future leadership roles. CIT III's will spend the morning two class periods with the Camp Director/Assistant Director further developing their skills as emerging camp counselors. The afternoon classes (all three periods) will be spend conducting in-depth team building and leadership activities that are directly applicable to pursuits in school, college and careers. This exciting experience will allow participants to work closely with their peer group, while developing valuable skills and lifelong friendships. Class limit of 15 per week.

# General Camp Information



## Health Requirements

A physical exam is not required for attendance, however, we strongly recommend that your child has a thorough annual physical exam. The health form includes the **Medication Information Section which must be signed by a physician for your child to receive over-the-counter medications and/or prescription meds.** The completed and signed Health Form must be returned along with your final payment by **June 1<sup>st</sup>, 2012.** Specific immunization dates (i.e. month/day/year) must be recorded on the health form or a copy of the immunization record may be attached to the health form. A health check and head lice screening will be performed by our Health Staff during registration at camp. Campers with special needs should contact the Camp Administrative Office at 518-483-4769 or by email at [campoverlook@cornell.edu](mailto:campoverlook@cornell.edu). We will answer any questions you have about camp, however, this email is for administrative use only. It is not for use in contacting campers. Information about emailing your camper through [Bunk1.com](http://Bunk1.com) will be sent with registration confirmation.

We do not retain camper health forms from year to year. A new health form must be submitted yearly.

## Camp Store

4-H Camp Overlook's Camp Store will be open Sunday during registration and Friday evening at closing time (except Friday, August 10<sup>th</sup>) for campers and parents to purchase T-shirts, sweatshirts, pajama pants, hats, etc. This year's Camp Store is going to be set up a little differently than in years past. As we are trying to promote nutrition and healthy lifestyles, Camp has decided not to distribute candy on a daily basis. However, on Monday, Tuesday, and Wednesday campers will visit Camp Store and will be able to choose a healthy snack and a piece of candy. On Thursday campers will only choose a healthy snack because S'mores are served as part of camp cookout. We are encouraging campers and counselors to rest during the allotted rest period that follows lunch. Therefore, Camp Store will take place during snack time at 4:00pm.

**Final Payments along with Health Forms are due  
June 1<sup>st</sup>, 2012**

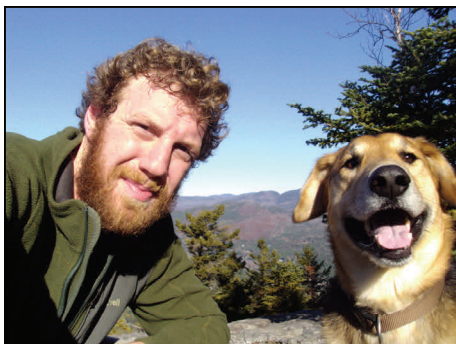
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## 4-H Camp Overlook Staff



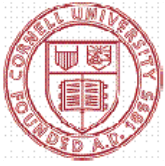
**Dietre Feeney** Camp Director

4-H and 4-H Camp Overlook are family traditions near and dear to my heart. My grandfather, Argie Decker, served on the Camp Board of Directors for twenty years. My mother and father, aunts, uncles and cousins have all attended 4-H Camp Overlook in one capacity or another throughout the years. My brothers, Craig and Jared Michael, and I continued this family tradition as campers and then again as counselors. As a counselor I was program director and taught Fun & Games, Outdoor Cookery and Archery. For years I wished there was some way I could return to camp. Nine years ago, in 2004, I was hired as one of several Assistant Directors who worked with Jim Tuggey. This was a family decision, and now my husband and children are as enamored with camp as I am.



**Zach Ducharme** Program Director

Zach Ducharme celebrates his second year at 4-H Camp Overlook serving as Program Director. The 2011 camp season was a wonderful learning experience, and he is excited to have a positive impact on camp in the 2012 season. Zach is originally from the Twin Cities in Minnesota, but has lived in New York for the past 10 years. He graduated from the State University of New York at Potsdam in 2010 with a bachelor's degree in Geology and a minor in Wilderness Education.



# 4-H Camp Overlook

**We're making the best even better!**

## **Adventure Course and Facility Rentals Available**

Your group will participate in a fun ropes course experience that will build self-esteem and promote working together, while building compassion and respect for others and each other's differences.

Several package options are available with some of them including overnight experiences.

4-H Camp Overlook also offers reasonably priced facility rentals that include our new state of the art kitchen in the Great Hall as well as many other buildings and facilities.

Contact Zach Ducharme, Program Director, at 518-483-7403, Extension 314 or send an email to [zrd3@cornell.edu](mailto:zrd3@cornell.edu) for more information.

We hope to see you soon!



### **4-H Camp Overlook**

355 West Main Street  
Suite 150  
Malone, NY 12953

Phone: 518-483-4769

Fax: 518-483-6214

## **Register now for 4-H Camp Overlook 2012**

Additional forms can be downloaded from the website at [www.4hcampoverlook.org](http://www.4hcampoverlook.org)

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