



SharonCountryDay.com

Be Our Friend 

781-784-3057

Mailing Address: P.O. Box 429, Sharon, MA 02067
Location: 691 Common St. Walpole/Sharon Line

Dear Parents:

Sharon Country Day, established in 1963, founded, owned, & operated by the Hershman Family, is located in Walpole, on the **Sharon/Walpole line**, in a scenic, north country environment with 30 acres of woodlands, nature trails, fields, streams, & a beautiful spring fed pond. Our families reside in all of the surrounding communities which include Sharon, Walpole, Mansfield, Foxboro, Canton, Norwood, Wrentham, Medfield, & Franklin.

We have **every** facility, activity, & sport to make your child's summer an enjoyable, healthy, safe, & instructive experience. We provide a full five day a week program for boys & girls ages 5-14, & a full or **half day/part time program for preschoolers ages 4 – young 5**, that promotes new interests & builds skill & self reliance through fun & adventure. Dates for this summer are 6/25th – 8/17th with flexible options available for 2 to 8 weeks. After care is available each day until 5:30 pm for an extra charge. (No fee for early drop off at 8 a.m.)

We are especially proud to be accredited by the **American Camp Association**. This nationally recognized accreditation process, developed exclusively for camps, focuses on program quality, health & safety issues, & requires us to review every facet of our operation. Sharon Country Day voluntarily submits to this independent appraisal done by experts, which has earned us this mark of distinction.

We are also proud to have been voted the **#1 day camp in the area, by the readers of The Walpole Times**, for the summers of 2009, 2010, & 2011, and were given **the #1 Readers' Choice Award for Best Summer Day Camp in the Sharon area & surrounding communities**.

Our reputation for providing an excellent swim program for children of all ages is also a source of great pride. Personal, individual instruction by experienced, certified **Red Cross Water Safety** Instructors, ensures progress and success at all levels.

We encourage new families to contact us personally to answer any questions & to discuss what Sharon Country Day has to offer. We are happy to mail you our comprehensive brochure with pictorial inserts - we feel these pictures, in addition to those on our website, "tell it all" – happy, active children involved in a variety of activities including swimming, sports, theatre, dance, arts & crafts, music, gymnastics, Native American, Project Adventure Ropes Course, overnights, and much, much more, all under the personal supervision of a mature and competent staff, many of whom have been with us for years & are former campers themselves. The maximum ratio is 5 campers to 1 staff member in the older groupings, 4 to 1 with our Junior campers, & 3 to 1 in the Kiddie Camp..

We will begin accepting new camper enrollment applications on November 10th since we give priority registration preference to our families from last summer. To register for the "big" camp, please complete the forms that follow this welcoming letter, and send back to us along with a deposit to ensure a spot in the proper grouping – please note, overnights fill in very quickly. *Information & registration forms for preschoolers/pre K can be found under the Kiddie Camp link on this website. In honor of our 50th year, tuition costs will remain the same as 2011, all registered campers will receive a free commemorative t-shirt, and a \$50 tuition discount will be given for each new family you refer.*

At Sharon Country Day we truly are **FAMILY** & be assured that your youngster's well-being & accomplishments are of the utmost importance to us. We have a *very special place* here for children. Join us as we celebrate our **50th golden anniversary** this summer!

The Hershman Family

Charlie & Corrine Hershman, Owners/Directors

Stuart Hershman, Associate Director, Waterfront & Overnight Director

Rhonda Hershman Jermyn, Associate Director, Girls' Head Counselor/CIT Director

Craig Hershman, Associate Director, Maintenance/Facilities Director

We are Family

50 Years of Leadership, Sportsmanship, Courage, Loyalty & Service.



OVERNIGHT CAMPING – For Campers Entering Grades 3-5 and Grades 6-9

We are again incorporating into our program optional overnight sessions whereby the youngsters sleep in cabins and are served delicious and nutritious meals. In the late afternoon, all of the facilities of the camp are available to campers for use in supervised free play. Evening activities after supper include special events such as roller blading (United Skates of America), campfires, and a traditional “SCDC” Native American ceremony called Fire Circle.

There are 8 overnights throughout the summer- four for those entering grades 3-5 & four for those entering grades 6-9. **The overnight schedule can be found on page 1 of the Registration Packet titled Application for Enrollment.** We limit enrollment to 60 campers per overnight session enabling us to maintain the excitement of group participation while still being able to provide maximum coverage for the well-being of the individual youngster. The entire program is under the personal supervision of the Assistant Director, Stuart Hershman, assisted by key personnel from the staff.

Late Pick Up @ 9:45 pm: For children entering grades 3-5 only, we are offering an alternative to staying overnight. This is a nice option for children who may not be ready to spend the night. They will experience the afternoon free play activities, dinner, lunch the next day, and United Skates of America. Parents are at the camp for pick up when the bus arrives back from rollerblading. If interested in this option, please fill in the overnight section on the enrollment application accordingly.

The charge for the **overnight camping is \$60** per night and includes all programming, the Fire Circle Ceremony, dinner, breakfast, lunch the next day, & bus transportation to/from United Skates of America. The charge for **Late Pick Up is \$45** and includes all of the above except for breakfast & the Fire Circle Ceremony. If interested, check date(s) on the Application for Enrollment that you want your child to attend. Prior to each overnight, all registered campers attend a brief meeting and are given a list of necessary clothing, equipment, & other helpful information for parents. Should you have any questions, please let us know.

CAMP CANTEEN POLICY

Canteen is a daily snack offered during lunch & rest four days a week such as pretzels, potato chips, smart food, etc. A candy choice is offered one day a week. If for any reason you do not wish your youngster to have canteen privileges, do not check off any of the options on the Application for Enrollment. If your child is restricted because of diet, allergies, teeth, etc. and you still would like him/her to have canteen, please notify the camp. Cost is based on the number of weeks of attendance.

EXTENDED HOURS

Select the days/hours needed on the Application for Enrollment form. Children are supervised by highly qualified trained staff members. Activities may include sports, arts & crafts, & games, geared towards the age of the youngsters in the group. *Please pack an extra snack for extended days.*

Extended day charges are due and payable along with the tuition balance, on or before June 1, prior to the camp season.

4-5pm : \$9 first child, \$6 sibling(s)

4-5:30pm : \$14 first child \$9 sibling(s)



2012 APPLICATION FOR ENROLLMENT

FAMILY LAST NAME _____ Tel. # _____ Cell _____

FIRST NAME: 1st Child _____ Bunk _____ 2nd Child _____ Bunk _____ 3rd Child _____ Bunk _____

(office staff will fill in all bunk numbers above-please circle session & tuition choice below for each child attending)

2012 SESSION DATES: 10% off siblings 1st CHILD 2nd CHILD 3rd CHILD

(Rates include tuition, daily milk or juice, & ice cream)

8 WEEKS June 25-Aug. 17 \$3300 \$2970 \$2970

7 WEEKS _____ \$2950 \$2650 \$2650
(specify the wk/dates NOT in camp)

6 WEEKS _____ \$2600 \$2340 \$2340
(specify 2 wks/dates NOT in camp)

4 WEEKS please circle June 25- July 20 \$1900 \$1700 \$1700
July 23 - Aug 17 \$1900 \$1700 \$1700

3 WEEKS please circle June 25- July 13 \$1425 \$1285 \$1285
July 2 - July 20 \$1425 \$1285 \$1285
July 23- Aug 10 \$1425 \$1285 \$1285
July 30 - Aug. 17 \$1425 \$1285 \$1285

2 WEEKS please circle June 25 - July 6 \$950 \$855 \$855
July 9 - July 20 \$950 \$855 \$855
July 23 - August 3 \$950 \$855 \$855

CANTEEN: \$30 (8 wks) \$26 (7 wks) \$23 (6wks) \$15 (4wks) \$11 (3wks) \$8 (2wks)

NO CANTEEN (Please check if you do not wish to sign your child(ren)up for daily snack

TRANSPORTATION (bus Sharon only): \$55 per week 1st child \$50 per week sibling (s)

EXTENDED DAY : 4-5pm :\$9 first child, \$6 sibling(s) 4-5:30pm: \$14 first child , \$9 sibling(s)

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

OVERNIGHTS: \$60.00 per overnight * Late Pick Up @ 9:45 pm available for campers entering gr. 3-5 \$45.00
(Please check your choice) If interested in late pick up, please write in LPU *NOTE: overnights fill up quickly
\$10 service fee charged for cancellation after June 25th

Grades 6-9 _____ Wed, 6/ 27 _____ Tues. 7/10 _____ Tues.7/ 24 _____ Tues. 8/ 7

*Grades 3-5 _____ Mon. 7/ 2 _____ Tues.7/ 17 _____ Tues.7/31 _____ Tues. 8/ 14

TO SECURE A SPOT, A \$200 DEPOSIT PER CHILD & REGISTRATION FORMS SHOULD BE MAILED TO:

Sharon Country Day Camp, P.O. Box 429, Sharon, MA 02067 scdcc@aol.com 781-784-3057

BALANCE DUE ON OR BEFORE JUNE 1, 2012. It is understood that in case of withdrawal, due to any cause, the financial loss shall be suffered by the sender. No refund in tuition/transportation, or substitution of days, is made for late arrival, early leaving, or absent days.

Signature of Parent/Guardian _____ Date _____



CAMPER INFORMATION

Sharon Country Day Camp

MAILING ADDRESS: P.O. Box 429 Sharon, MA **Year round phone:** 781-784-3057
camp season fax/phone: 508-668-1619 **off season fax:** 781-784-4139
scdcc@aol.com **Camp Location :** 691 Common Street, WALPOLE

FAMILY/GUARDIAN INFORMATION: Last Name _____ Home Phone _____

Street _____ City _____ State _____ Zip Code _____

Mother/Guardian: First Name _____ Cell Phone _____ Business ph. _____

Father/Guardian : First Name _____ Cell Phone _____ Business ph _____

Please circle which phone number above you want contacted first in an emergency

*Occupation: _____ Primary E mail: _____ **(please write clearly)**

(*10% discount for military personnel and community service workers – firefighters, police, EMT’s)

FIRST CHILD: _____ (**Bunk # office use only**) **T Shirt Size: Youth: S M L Adult: S M L XL**

Last Name _____ First Name _____ Grade Entering Fall 2012 _____

Date of Birth: _____ Age _____ Boy/Girl _____ Session/Wks Attending _____

SECOND CHILD: _____ (**Bunk # office use only**) **T Shirt Size: Youth: S M L Adult: S M L XL**

Last Name _____ First Name _____ Grade Entering Fall 2012 _____

Date of Birth _____ Age _____ Boy/Girl _____ Session/Wks Attending _____

THIRD CHILD: _____ (**Bunk # office use only**) **T Shirt Size: Youth: S M L Adult: S M L XL**

Last Name _____ First Name _____ Grade Entering Fall 2012 _____

Date of Birth _____ Age _____ Boy/Girl _____ Session/Wks Attending _____

EMERGENCY CONTACTS : Other than Parents- Please list **two** contacts:

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

Name of Physician _____ Telephone # _____

Insurance Coverage Information (Company name/Policy #) _____



PARENTS' QUESTIONNAIRE & AUTHORIZATION
Sharon Country Day Camp, P.O. Box 429, Sharon, MA 02067

The following information is very important in helping us to understand your child's needs. Please take the time to answer all questions thoroughly & individually for each child.

CAMPER NAME: _____

General Health/Allergies _____

Does your child have any special concerns? If so, please describe. _____

Is your child restricted in any activities? _____

Behavior characteristics/Personality _____

Previous camp experience _____

What are his/her needs & what skills (physical, social etc.) do you hope to see your child develop?

Comments: _____

New Families only: How did you hear of us? _____

AUTHORIZATION-signature indicates agreement

I authorize Sharon Country Day to have, use, publish, reproduce photographs of my child as may be necessary for its records, public relations material or website. No personal information will be provided.

Signature of Parent/Guardian _____ Date _____



MEDICAL CONSENT

Sharon Country Day Camp, P.O. Box 429, Sharon, MA 02067

Camper's Name _____ Sex: _____ Birthdate _____ Bunk # (if known) _____

Address _____ Town _____ Zip _____

Home Telephone _____ Work Telephone _____ Cell _____

Other persons to contact if parent/guardian is unavailable:

Name _____ Home phone _____ Cell _____

AS AN ACCREDITED DAY CAMP, WE ARE REQUIRED BY THE AMERICAN CAMP ASSOCIATION TO OBTAIN THE FOLLOWING INFORMATION. YOU MUST SIGN, DATE AND RETURN THIS FORM PRIOR TO THE CAMP SEASON, EVEN IF THERE IS NO INFORMATION TO PROVIDE. IN ADDITION, NO YOUNGSTER WILL BE ALLOWED TO ATTEND CAMP WITHOUT AN UPDATED IMMUNIZATION/PHYSICAL FORM.

1. Please list any over the counter medications your child is currently using. _____

2. Known allergies _____

3. Description of any current mental/psychological conditions requiring any medication, treatments, or special Restrictions or considerations while at camp.

Parent/Guardian Signature _____ Date _____

MEDICAL CONSENT

1. I give permission to have the Camp Nurse or camp personnel designated by the Camp Nurse, to give the following medicine _____ prescribed by Dr. _____ to _____ (camper).

2. I give permission for my child to have over the counter medication ie: Tylenol, cough medicines, etc., as needed, to be administered by the Camp Nurse. **Campers are not allowed to keep medicines in their cabins or on their person They must be brought to the infirmary where they will be dispensed.**

I understand that I may retrieve the medicine from the camp at any time and that the medicine will be destroyed if it is not picked up within one week following termination of the order or one week beyond the close of camp.

Parent/Guardian Signature _____ Relationship to Camper _____ Date _____

Suggestions for Protection from the Sun: Please be sure sunscreen (spf at least 15, waterproof) has been applied to exposed body **BEFORE** coming to camp. Send along child's own sunscreen, labeled with name, to be kept in cubby. It will be reapplied in the afternoon –counselors supervise & help when necessary. We encourage the wearing of hats.



****THIS FORM MUST BE RETURNED TO ALLOW CAMPERS TO STAY ON AN OVERNIGHT****

Name of Camper _____ Boy/Girl _____ Age _____

Parent Name _____ Home Phone _____ Cell _____

Address _____ Town _____ Zip _____

Parent Name _____ Home Phone _____ Cell _____

Address _____ Town _____ Zip _____

In case of emergency, please list two people to contact if unable to reach parent:

Name _____ Home Phone _____ Cell _____

Address _____ Relationship _____

Name _____ Home Phone _____ Cell _____

Address _____ Relationship _____

1. Known Allergies

2. Is your child currently taking medication? If so, will the parents be sending the medicine for the overnight?

3. Any special diet?

4. Any history of sleepwalking and/or bedwetting?

5. Other special concerns