



**New York State Department of Environmental Conservation  
2011 Environmental Education Camp Application  
Camps: Colby—DeBruce—Pack Forest—Rushford**



New York State DEC offers week-long environmental educational camps for seven weeks each summer for youth ages 12 to 17. The main focus of these camps is environmental education; campers spend their week immersed in the natural environment. Camps are filled on a first-come, first-served basis. Please complete **both sides** of this application form. Confirmation packets will be mailed to campers in May. No refunds will be given after June 1, 2011.

- Applications from sponsoring organizations must not be postmarked earlier than January 15, 2010.
- Applications directly from parents/guardians must not be postmarked earlier than January 29, 2010.
- Camp fee is \$350 per camper for a one-week stay. Payment by check or money order made out to *DEC Camps* must accompany this application. The fee will be returned if your choice of camp and week are unavailable. A postcard will confirm registration, including camp and week.

*Please type or print clearly.*

**CAMPER INFORMATION**

**Camper Name** \_\_\_\_\_  
First (no nicknames, please) Last

**Mailing Address** \_\_\_\_\_  
No. & Street Apt. #  
 \_\_\_\_\_  
City County State Zip

Gender: Female   
 Male  Date of Birth \_\_\_\_\_ Age at Camp \_\_\_\_\_

**Primary Parent/  
Guardian Name** \_\_\_\_\_

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

**Secondary Parent/  
Guardian Name** \_\_\_\_\_

Address (if different from camper's) \_\_\_\_\_

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

**Alternate Contact Name:** \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
 Relationship to camper: \_\_\_\_\_

**Camper's Ethnic Group (This information is optional.)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Asian or Pacific Islander          | <input type="checkbox"/> Native American or Alaskan Native | <input type="checkbox"/> African American (not of Hispanic origin) |
| <input type="checkbox"/> Caucasian (not of Hispanic origin) | <input type="checkbox"/> Hispanic                          | <input type="checkbox"/> Other                                     |

**SPONSOR INFORMATION**

**If your organization is sponsoring a child, please complete this section.**

Organization Name \_\_\_\_\_

Mailing Address \_\_\_\_\_  
No. & Street City State Zip County

Representative \_\_\_\_\_ Address \_\_\_\_\_

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

Alternate Representative Name: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_

Sponsors are responsible for the camper's attendance at and transportation to and from camp. Sponsors may send an alternate if the camper is unable to attend after acceptance. Alternates of a different gender will be accepted only if space is available. If a change must be made, call immediately to discuss options. Incomplete applications will not be accepted.

**Which camp session(s) do you wish to attend?**

- Indicate your preferences by entering 1, 2, or 3, etc. on the line beside your session(s) of choice. **Please mark only one #1, one #2, one #3, etc.** If you are not interested in a session, leave the line blank.
- If you wish to attend camp for more than one week this summer, indicate your choices in the space provided. You must include an additional \$350 payment for each week you wish to register for. **There are no overnight accommodations on Saturdays.** If you attend two consecutive weeks, you must leave camp on Saturday and return on Sunday.
- **Total number of weeks camper wishes to attend in 2011** \_\_\_\_\_

<b>YOUTH ENVIRONMENTAL EDUCATION CAMP – for ages 12 to 14</b> (open to campers who are currently 11 years old if they will be 12 years old by December 1, 2011)			
<b>Camp DeBruce</b> (Catskills) _____ Wk 1...July 3-9 _____ Wk 2...July 10-16 _____ Wk 3...July 17-23 _____ Wk 4...July 24-30 _____ Wk 5...July 31-Aug. 6 _____ Wk 6...August 7-13 _____ Wk 7...August 14-20	<b>Camp Rushford</b> (Western NY) _____ Wk 1...July 3-9 _____ Wk 2...July 10-16 _____ Wk 3...July 17-23 _____ Wk 4...July 24-30 _____ Wk 5...July 31-Aug. 6 _____ Wk 6...August 7-13 _____ Wk 7...August 14-20	<b>Camp Colby</b> (Adirondacks) _____ Wk 1...July 3-9 _____ Wk 2...July 10-16 _____ Wk 3...July 17-23 _____ Wk 4...July 24-30 _____ Wk 5...July 31-Aug. 6 _____ Wk 6...August 7-13 _____ Wk 7...August 14-20	<b>Pack Forest</b> (Adirondacks) _____ Wk 4...July 24-30 _____ Wk 5...July 31-Aug. 6 _____ Wk 6...August 7-13 _____ Wk 7...August 14-20
<b>TEEN ECOLOGY WEEK – for ages 15 to 17 at Pack Forest only (Adirondacks)</b> (open to campers who are currently 14 years old if they will be 15 years old by December 1, 2011)			
_____ Wk 1...July 3-9	_____ Wk 2...July 10-16	_____ Wk 3...July 17-23	
<b>ADDITIONAL WEEKS AT CAMP (if desired) enter camp name and week number</b> Payment for all weeks must be included with this application. There are no overnight accommodations on Saturdays.			
<b>Second Week at Camp</b> First choice: _____ Second choice: _____ Third choice: _____		<b>Third Week at Camp</b> First choice: _____ Second choice: _____ Third choice: _____	

Have you attended DEC camp before?  Yes  No Which camp? \_\_\_\_\_ When? \_\_\_\_\_

**Cabin-mate Request (one name only):** \_\_\_\_\_ This camper must also request you as a cabin-mate. We will make every effort to honor one mutual request for campers of the same age. Cabin-mate requests are NOT guaranteed.

How did you hear about DEC Summer Camps?  Friends/Family  School  Internet  Organization  Other \_\_\_\_\_

Youth Campers may participate in the New York State Hunter Education Program. Teen Campers may participate in the New York State Bowhunter Education Program. These are optional. Check here to indicate an interest. This does not commit you to the course.

Youth Camper interested in taking Hunter Education  Yes  No  
 Teen Camper interested in taking Bowhunter Education  Yes  No

**Terms and Conditions:** I understand that I am enrolling my child in the DEC camp program. I certify that all information given here is correct and accurate. I understand that no refunds will be given after June 1, 2011 and I agree to these terms. I have enclosed a check or money order in the amount of \$350 for each week for which I am registering, made payable to *DEC Camps*.

Mail to: NYSDEC–DEC Camps, Attention: Patti Bolton, 625 Broadway, 2nd Floor, Albany NY, 12233-4500

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

OR

Sponsoring Organization Signature \_\_\_\_\_ Date \_\_\_\_\_

**If you have any questions, please call 518-402-8014. Email: edcamps@gw.dec.state.ny.us**

**Privacy Notification:** This application asks for personal information, therefore, the Personal Privacy Protection Law requires that you be given this notice. Environmental Conservation Law –Section 3-0301 provides legal authority to collect and maintain personal information requested on this Environmental Education Camp Application. The principal purpose for this information is to enroll campers into the education program and to ensure that the applicant meets the age requirement and to ensure appropriate assignment of campers to facilities and programs. Failure to provide this information makes this impossible and would require that we deny the camper the opportunity to participate in the camp program. This information will be maintained by the Camps Administrator, 625 Broadway 2<sup>nd</sup> Floor, Albany, New York 12233-4500, ph: 518-402-8014.