

ECCHOH Inclusion Camp at High Meadows

The ECCHOH Inclusion Camp at High Meadows provides campers with autism and developmental delays a unique opportunity to participate in a typical day camp experience at High Meadows Day Camp. Through education and training, all camp facilitators work together to successfully integrate special needs and typical campers in activities and social settings for a thoroughly inclusive camp experience.

High Meadows Day Camp is located at 1055 Willeo Road in Roswell, Georgia (www.highmeadowscamp.org).

This 40 Acre Camp hosts approximately 800 typical campers each summer. Staff at High Meadows consists of 120 members, most of which are teachers, college students, and childcare and recreation professionals.



- The inclusion camp maintains a low camper to staff ratio during camp (ratio may vary depending upon the camper's level of functioning and independence). This allows staff to fully and successfully integrate special needs campers into activities in which their typical peers are involved.
- Activities include swimming, horseback riding, dance, music, woodworking, animal care, gardening, arts and crafts, and archery.
- Activities give our campers the ability to improve fine and gross motor coordination skills, focus on socialization skills with both typical and special needs peers, and gain a stronger sense of self esteem by completing the tasks their peers are participating in.

High Meadows Camp offers an optional knighthood program that encourages campers to work on various skills to progress through levels of accomplishment, which include Page, Squire, Sentry, and Knight. Campers who participate and accomplish various skills receive certificates of accomplishment. Special needs campers are also encouraged to progress through the program. When appropriate, some adjustments are considered to allow special needs campers to enjoy and participate in the full camp experience.

Registration for this inclusion camp begins in January. This inclusion camp has 12 spaces available for each of three 3-week sessions. For further information about camp please contact Shon at (770)458-3251 or shon@heartofhopeacademy.org.

Please note: Participants in the Camp ECCHOH summer programs may require an evaluation to determine his or her successful camp placement



ECCHOH INCLUSION CAMP AT HIGH MEADOWS

Application

(Please use a separate form for each camper)

Camper's First Name: _____ MI _____ Last Name: _____

Nick Name: _____ Gender: _____ Birthdate: _____

PROGRAM SESSION DESIRED (check all desired sessions):

***** Important Note: Weekly rates are based on a 2:1 camper-to-staff ratio. A required assessment must be scheduled by *May 21, 2010* to determine your child's functioning level and areas of interest.**

2010 Camp Schedule

_____ **Session I** running from June 1st – June 18th – **3 Weeks (\$500.00/week)**

_____ **Session II** running from June 21st – July 9th – **3 Weeks (\$500.00/week)**

_____ **Session III** running from July 12th – July 30th – **3 Weeks (\$500.00/week)**

**Registration forms are due by May 14, 2010.
A \$100.00 deposit is required with each application applied toward tuition.**

Primary Family Contact (Parent or Guardian)

First Name: _____ MI: _____ Last Name: _____

Relationship to Camper: _____

Home Phone: _____ Work Phone: _____ Cell: _____

E-mail: _____

Street Address: _____

City: _____ State: _____ Zip: _____

From what source did you hear about our program: _____

Contractual Agreement between Camp ECCHOH and Camper's Parent/Guardian

I have enclosed \$100.00 fee per application (**non-refundable, non-transferable**) which applies toward the camp fee. The total balance is due by the first day of camp. I understand there are no refunds for late entrances or early withdrawals, voluntary and involuntary. Loss of fees due to illness extending over one week will be shared equally by parents and Camp ECCHOH. **I will submit a health history and medical release form supplied by Camp ECCHOH to them by May 28, 2010. Failure to do so will impede camper's ability to attend camp.**

Signature: _____ Date: _____