



# JEWISH COMMUNITY CENTER

at the Frances & Jacob Hiatt Building כס"י

633 Salisbury Street  
Worcester, MA 01609  
508.756.7109  
Fax 508.754.3373  
www.worcesterjcc.org

Summer 2010

Dear Parents,

## WELCOME TO CAMP SABRA!

I'm excited to say that plans for a wonderful camp experience are complete. It has been a lot of fun planning many enjoyable activities for your children and I'm looking forward to a wonderful summer at the JCC.

Camp orientation for parents and campers will be held Thursday, June 3rd from 6:30 - 7:30 pm. It will give you and your child the opportunity to meet the counselors and learn more about Camp Sabra. We hope to see everyone there.

Enclosed are several camp forms and "fact sheets". Please read the information over carefully and return all completed forms with your camp registration. Medical form must be returned by Friday, May 21st.

Several children in our program have a severe allergy to peanuts. Strict avoidance is the only way to prevent an allergic reaction. The allergy can be life threatening and as a result we have instituted a PEANUT FREE CAMP, preschool and toddler program. Please read the labels on food when preparing children's lunches to be certain that products containing peanuts and tree nuts are not brought into the center. Thank you in advance for your help with this important safety precaution.

Should you have any questions, please feel free to contact me at 508-756-7109 x 258 or by email at [sscola@worcesterjcc.org](mailto:sscola@worcesterjcc.org). See you at orientation!

Sincerely,

Sandy Scola, Director  
Camp Sabra

SS/bw  
Enclosures

Micah Chase, President  
Emily G. Holdstein, Executive Director



MEMBER AGENCY OF THE JEWISH FEDERATION OF CENTRAL MASSACHUSETTS, INC.  
AFFILIATED WITH THE JEWISH COMMUNITY CENTERS OF NORTH AMERICA  
A LIVING MEMORIAL TO THE JEWISH WAR VETERANS OF AMERICA

The JCC is open to all regardless of race, color, religion, national origin, gender, sexual orientation, age, disability or economic condition. The Center is handicapped-accessible.

# Camp Sabra For PreSchool Campers Ages 3 - 5

JCC Member Acct. # \_\_\_\_\_  Non-Member Acct. # \_\_\_\_\_  WAJCC Acct. # \_\_\_\_\_  
 Camper's Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Sex \_\_\_\_\_ D.O.B. \_\_\_\_\_  
 (Sept.'10)  
 Address \_\_\_\_\_ email \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_

**3 YEARS OLDS** (child must be 3 by December 31, 2010) - **T/TH - 9 am - 11:30 am....payment in full at time of registration**  
 Week A (6/7-6/11)  Week B (6/14-6/18)  Week 1 (6/21-6/25)  Week 2 (6/28-7/2)  Week 3 (7/5-7/9)  
 Week 4 (7/12-7/16)  Week 5 (7/19-7/23)  Week 6 (7/26-7/30)  Week 7 (8/2-8/6)  Week 8 (8/9-8/13)

**PLEASE CHECK...**

**4 YEARS OLD** (child must be 4 years old by December 31, 2010)  
 **5 YEARS OLD** (child must be 5 years old by December 31, 2010)

**M-F 9-1:30.....**  Week A  Week B  Week 1  Week 2  Week 3  Week 4  Week 5  Week 6  Week 7  Week 8  
**M-F 9-4.....**  Week A  Week B  Week 1  Week 2  Week 3  Week 4  Week 5  Week 6  Week 7  Week 8  
**M/W/F 9-1:30..**  Week A  Week B  Week 1  Week 2  Week 3  Week 4  Week 5  Week 6  Week 7  Week 8  
**M/W/F 9-4.....**  Week A  Week B  Week 1  Week 2  Week 3  Week 4  Week 5  Week 6  Week 7  Week 8  
**T/TH 9-1:30.....**  Week A  Week B  Week 1  Week 2  Week 3  Week 4  Week 5  Week 6  Week 7  Week 8  
**T/TH 9-4.....**  Week A  Week B  Week 1  Week 2  Week 3  Week 4  Week 5  Week 6  Week 7  Week 8

**Extended Modules.....(4 & 5 yr. olds only)**

Week A  Week B  Week 1  Week 2  Week 3  Week 4  Week 5  Week 6  Week 7  Week 8  
**7:30-9 am**  M  T  W  TH  F  
**4-5:30 pm**  M  T  W  TH  F

**Transportation.....(available June 21 - August 13)**  Westboro  Shrewsbury  
 Week 1  Week 2  Week 3  Week 4  Week 5  Week 6  Week 7  Week 8  
**AM pick up.....**  M  T  W  Th  F **PM drop off.....**  M  T  W  Th  F

• Father's Name \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_  
 Business # \_\_\_\_\_ Pager/Cell Phone # \_\_\_\_\_  
 • Mother's Name \_\_\_\_\_ Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone # \_\_\_\_\_  
 Business # \_\_\_\_\_ Pager/Cell Phone # \_\_\_\_\_

**EMERGENCY INFORMATION - IF PARENTS CANNOT BE CONTACTED, NOTIFY:**

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_ Tel. # \_\_\_\_\_ Bus. Tel. # \_\_\_\_\_  
 2. Name \_\_\_\_\_ Relationship \_\_\_\_\_ Tel. # \_\_\_\_\_ Bus. Tel. # \_\_\_\_\_  
 Doctor \_\_\_\_\_ Tel. # \_\_\_\_\_

Life Threatening Illness or Allergies \_\_\_\_\_

I agree to allow the Worcester JCC to use photographs and video tapes of my child for publicity purposes.  Yes  No  
 I authorize the Worcester JCC to apply sunscreen to my child when needed.  Yes  No  
 I authorize the Worcester JCC to apply insect repellent to my child when needed.  Yes  No  
 I authorize the Worcester JCC staff to give my child first aid when appropriate and if necessary I authorize the Worcester JCC to transport my child to the \_\_\_\_\_ Hospital (or nearest hospital.)  
 I agree to abide by all JCC & day camp policies & procedures including the payment schedule noted on page 11 (fees and deposits) of the 2009 camp brochure. Deposits are non-refundable and cannot be applied to other JCC programs/fees. No refunds of fees after 5/21/10. Change fee applies after 5/21/10.

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_

WORCESTER JCC

CAMP SABRA \* 2010 \* CAMPER INFORMATION FORM

NOTE: We ask that you complete this form so that we may better understand and serve your child. Please be assured that all forms will be kept strictly confidential.

Name of Camper: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

School: \_\_\_\_\_ Grade (as of fall '10): \_\_\_\_\_

Father's Name: \_\_\_\_\_ Bus. Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Bus. Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Brothers & Sisters: Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

1. Has your child ever attended camp? If so, where and when? \_\_\_\_\_

\_\_\_\_\_

2. What particular play activities does your child enjoy? \_\_\_\_\_

\_\_\_\_\_

3. Does your child have any food or physical restrictions, health problems, allergies, fears? \_\_\_\_\_

\_\_\_\_\_

4. Is there anything you think we should be aware of in order to help your child enjoy his/her summer camp experience? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Do you have any special requests - i.e. would your child like to be in a group with a friend? You may request no more than two friends and requests will be acted upon whenever possible. \_\_\_\_\_

\_\_\_\_\_

Signature of Parent or Guardian: \_\_\_\_\_

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

**WORCESTER JEWISH COMMUNITY CENTER**

**CAMP SABRA \* 2010**

**AQUATICS**

**Parent Information Sheet**

1. We utilize both pools for instructional and free swim. Children are in both pools during the course of their camp experience.
2. We recommend plastic bags to keep wet bathing suits and towels in.
3. Swimmers with shoulder length hair must tie their hair back, or wear a bathing cap.
4. Teaching staff consists of all Red Cross Certified Water Safety Instructors.
5. Counselors assist the swim teachers during instructional swim. Counselors also help to supervise the swimmers during free swim.
6. Children are grouped by ability according to Red Cross swim levels.
7. During extreme weather, children will not be swimming outdoors.
8. Campers may wear swim goggles for instructional and free swim.
9. There will be Red Cross Certified Lifeguards at both pools during instructional swim.
10. ✕ Per order of the Health Department:  
Swimmers may not enter the water if they have an open wound, or a communicable disease.
11. If a camper is well enough to attend camp, they must participate in the swim program.

**WORCESTER JEWISH COMMUNITY CENTER**

**CAMP SABRA \* 2010**

**AQUATICS**

Dear Parents,

The Worcester Jewish Community Center Aquatics Staff would like the swim program to be an enjoyable part of your child's summer camp experience.

It is important that your child join a swim group appropriate for his or her ability; therefore, please assist us by completing this form and return it to the office by Friday, May 21, 2010 with your registration form.

Thank you for your cooperation.

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Has your child ever taken swimming lessons? \_\_\_\_\_

What level is he/she at? \_\_\_\_\_

Does your child have a fear of water? \_\_\_\_\_

Are there any medical reasons your child should not be in the water? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Swimmers may not enter the water if they have an open wound, or a communicable disease.



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Dear Physician: \_\_\_\_\_ is enrolled in the Worcester Jewish Community Center Summer Camp program. Medical forms are required for camp entry by the Commonwealth of Massachusetts. **No child will be admitted to a WJCC camp without this signed and completed medical form.** Medical form must be returned by Friday, May 21, 2010.

### IDENTIFICATION

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Phone #: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Parents: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Examination of Child: \_\_\_\_\_

What is your opinion concerning the child's general health and appearance: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Has this child been screened for lead poisoning?  Yes  No If Yes, Date screened: \_\_\_\_\_

Does this child have any disabilities or chronic medical problems (allergies, limited vision, etc.) Which require special consideration or care by WJCC camps? If so, please detail below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Physician's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OVER-----

Micah Chase, President  
Emily G. Holdstein, Executive Director



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**CAMP SABRA - 2010 - FACT SHEET**

**CAMP DATES:**

Week A: June 7 to June 11  
Week B: June 14 - June 18  
Week 1: June 21 - June 25  
Week 2: June 28 - July 2  
Week 3: July 5 - July 9  
Week 4: July 12 - July 16  
Week 5: July 19 - July 23  
Week 6: July 26 - July 30  
Week 7: August 2 - August 6  
Week 8: August 9 - August 13

**FEES:**

All fees for all camp programs must be paid in full by Friday, May 21, 2010 unless special arrangements have been made. The JCC cannot guarantee placement if balances are outstanding after this date.

**FORMS:**

Please complete and return all forms at time of registration.

**MORNING DROP OFF:**

Each camp group will be assigned to a classroom. Please bring your child to his/her classroom at 9:00 a.m.

**PICK-UP:**

All children should be picked up in his/her classroom. For someone other than a parent to pick-up, prior written permission from you and proper identification must be shown.

Children enrolled in Extended Day Module 7:30 to 9:00 a.m. will be dropped off in a designated classroom.  
Children enrolled in Extended Day Module 4:00 to 5:30 p.m. will be picked up in a designated classroom or at the playground (depending on the weather).

Please be prompt --- A late fee of \$5 for every five minute period will be charged. Please be considerate of your child and the staff. We appreciate your cooperation and would like to extend our gratitude in advance.

**EARLY PICK-UP:**

Parents who wish to pick up their child before the end of the camp day must give a written note to the counselor stating time of pickup.

**TRANSPORTATION:**

Campers who requested transportation will be informed of details approximately one week prior to the start of camp.

**MEDICAL FORMS:**

**STATE GUIDELINES REQUIRE THAT ALL CAMPERS HAVE A MEDICAL EXAMINATION BEFORE THE START OF CAMP. PLEASE NOTE THAT LEAD PAINT TESTS ARE REQUIRED. NO CHILD WILL BE ADMITTED TO CAMP WITHOUT A COMPLETED MEDICAL FORM.**

**PLEASE HAVE YOUR CHILD'S PHYSICIAN COMPLETE THE ENCLOSED MEDICAL FORM AND RETURN IT BY FRIDAY, MAY 21ST.**

**MEDICATION:**

Written permission from parent giving the camp permission to administer medication is required. Permission slips can be obtained from camp staff.

If a child needs medication during the camp day:

All prescription medicine must be brought to camp in the original container.

All over-the-counter medication must be accompanied by a written consent by the doctor.

**CLOTHING:**

All campers should wear clothes that are comfortable and washable. It is recommended that campers wear sneakers or other closed and securely fastened shoes. Sandals inhibit activity and may be dangerous.

**DAILY ESSENTIAL LIST:**

1. 3's and 4's.....one swim suit & one towel  
4's.....remaining at camp until 4:00 p.m. will have a rest time or planned activity  
5's.....remaining at camp until 1:30 p.m. - 1 swimsuit and 1 towel  
5's.....remaining at camp until 4:00 p.m. - 2 swimsuits and 2 towels
2. Plastic bag or waterproof tote bag for wet swimsuits.
3. Suntan lotion, insect repellent (labeled with name) - These items must be supplied by parent if desired. Please apply suntan lotion prior to camp. We will reapply after swim.
4. Hat for sunny days.
5. Camp T-Shirt on Friday (please) for Shabbat.
6. 3's and 4's - a change of clothing to be kept at camp.

**PLEASE!!** - Clearly label all items with your child's name. We cannot guarantee return of lost items that are unlabeled.

**FOOD:**

4 & 5 year old campers should bring lunch and beverage every day except Friday which is cookout day.

Several children in our program have a severe allergy to peanuts; therefore, Camp Sabra is a peanut free camp. Strict avoidance is the only way to prevent an allergic reaction. The allergy can be life threatening and as a result we have decided to institute a peanut free camp. Please read the labels on food when preparing children's lunches to be certain that products containing peanuts and tree nuts are not brought into the center. Thank you in advance for your help with this important safety precaution.

If a parent wishes to bring a cake to the group for a child's birthday, it must be an Entenmann's product, Friendly, Carvel, or product from the European Bakery.

**PLEASE** pack your child's lunch in a clearly labeled lunch box.

All lunches will be refrigerated. Camp Sabra will provide a morning and an afternoon snack. Please note that all food served at the JCC is kosher.

**SHABBAT:**

Shabbat is celebrated every Friday. Challahs will be provided by the camp. In celebration of Shabbat, we ask that campers wear their camp T-shirts on Friday.

**WORCESTER JEWISH COMMUNITY CENTER**

**CAMP SABRA \* 2010**

**AQUATICS**

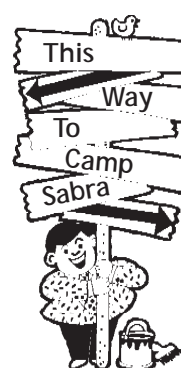
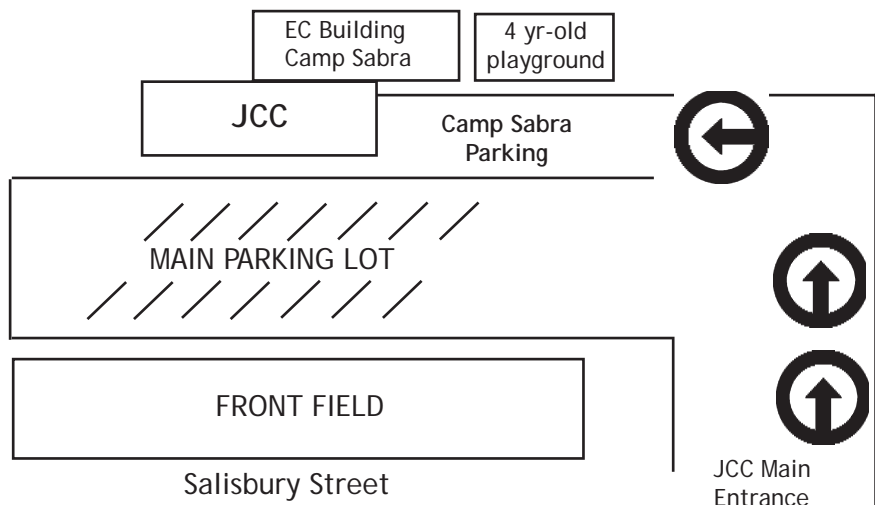
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# Drop-off and Pick-up procedures for JCC CAMPS

## Camp Sabra Drop-off & Pick-up

CAMP SABRA has its own parking lot for drop-off and pick-up. Sabra parents can park in the upper parking lot in front of the four-year-old playground, or in the main parking lot in the Sabra designated spots (there will be signs in front of these spots stating that they are for Camp Sabra). Due to the limited number of parking spaces we ask that parents drop their children off at these designated times:



## Sports Specialty Camps Drop-off & Pick-up

SPORTS CAMP drop-off...will enter the main driveway and continue along with the traffic flow. Drop-off camper at the JCC main entrance. Pick-up camper at the back entrance to the gym. There will be sports camp staff outside to direct traffic to the drop-off and pick-up area. If you feel the need to speak to the director or any of the sports camp staff please feel free to park in the parking lot.

