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| GREENWICH HOUSE YCC |  | 27 Barrow Street, New York, NY 10014  212.242.4140 x263  Omar Amores, Program Director  oamores@greenwichhouse.org |
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**SUMMER STEAM CAMP 2021**

**Welcome!**

For over a decade, Greenwich House has offered one of the premier community Summer Camps in Manhattan. With a long history of providing arts and enrichment programming for campers, Greenwich House is now expanding programming to provide an even more engaging STEAM Summer Camp providing a chance for young people ages 6-14 to enjoy arts and crafts, engaging science and technology activities, recreation, and outdoor summer fun!

We want our campers to leave camp having learned the value of teamwork, friendship, diversity, and self-esteem through our STEAM programs. Students will learn to feel comfortable expressing themselves artistically and within a group setting and gain a deeper knowledge of numerous systems of science.

Students will work on collaborative and individual projects in disciplines such as architecture, painting and drawing, cartoon art, ceramics, coding, engineering, printmaking, and animation. Students will learn to feel comfortable expressing themselves artistically and within a group setting. We will participate in critiques and learn how to present and exhibit our work.

Throughout the week, weather permitting, campers will take field trips to movie theatres, museums, galleries, parks, and neighborhood attractions. In the past, students have visited such places as the Museum of Art and Design, The Metropolitan Museum of Art, The Paley Center, The Whitney Museum, and The New York Hall of Science. Students will be supervised at all times by our qualified counselors. Campers will also have weekly water play once per week.

**Counselor-in-Training (CIT) Program for Teens**

Our oldest group of campers, aged 13 and 14, that are either entering or in high school will have the opportunity to work more independently from the younger campers. Teens will work in-depth on art projects, participate in counselor training workshops, and begin to learn how to supervise young campers. We hope to encourage maturity and independence in our oldest campers, and provide an environment for growth and self-discovery. Since space is limited, interested teens will be asked to apply for this program. A supplemental form is provided at the end of the registration form. (CIT’S must be entering high school the upcoming school year). I

**Our Goal**

Our goal is to provide campers with opportunities that build self-esteem through art and friendship. We also hope to provide campers with a variety of experiences to explore their artistic creativity and work collaboratively with other campers!

# greenwich house YCC summer steam camp

# REGISTRATION FORM

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| (Please Print) | | | | | | | | | | | | | | | | | | | | |
| Today’s date: | | | | | | | | | | | | | | | | | | | | |
| **SUMMER SESSION SELECTION**  (Please check all that apply) | | | | | | | | | | | | | | | | | | | | |
| **JULY SESSION 1: (4 WEEKS)** | **☐** | Tuesday, July 6th – Friday, July 30, 2021  Camp Hours: 9:00am – 4:30pm | | | | | | | | | | | | | |  | | | **$2030.00** | | | |
| **AUGUST SESSION 2: (4 WEEKS)** | **☐** | Monday, August 2 – Friday, August 27, 2021  Camp Hours: 9:00am – 4:30pm | | | | | | | | | | | | | |  | | | **$2140.00** | | | |
| **INDIVIDUAL WEEKS:** | **☐** | Week 1: 7/6– 7/9 **( NO CAMP WEDNESDAY, JULY 4TH)** | | | | | | | | | | | | | | **$495.00** | | | **$535 per week**  **$50 per week** | | | |
| **☐** | Week 2: 7/12 – 7/16 | | | | | | | | | | | | | |  | | |
| **☐** | Week 3: 7/19 – 7/23 | | | | | | | | | | | | | |  | | |
| **☐** | Week 4: 7/26 – 7/30 | | | | | | | | | | | | | |  | | |
| **☐** | Week 5: 8/2 – 8/6 | | | | | | | | | | | | | |  | | |
| **☐** | Week 6: 8/9 –8/13 | | | | | | | | | | | | | |  | | |
| **☐** | Week 7: 8/16 – 8/20 | | | | | | | | | | | | | |  | | |
| **☐** | Week 8: 8/23 – 8/27 | | | | | | | | | | | | | |  | | |
| **EXTENDED DAY OPTIONS** | **☐** | Early Drop-off  8:15am – 8:45am | | | | | | | | | | | | | |  | | |
| **☐** | Extended Day  4:30pm – 6:00pm | | | | | | | | | | | | | |  | | | **$50 per week** | | | |
| Camper INFORMATION | | | | | | | | | | | | | | | | | | | | |
| **Camper’s Last Name:** | | | | **First:** | | | | | |  | | | | **Middle:** | | | | | | | | |
| **School Name:** | | | | | | | | | | | | | | | | | | | | |
| **Street Address:** | | | | | | | | | | **Birth date**: | | | | | Age: | | Grade: 9/21 | | | Sex: | | |
| **City:** | | | **State:** | | | **Zip:** | | | | / / | | | | |  | |  | | | ❑ M | | ❑ F |
| **Cell phone no.:** | |  | | | | | | |  | | | |  | | | | | | | | | |
| Does your child have any medical or handicapping conditions including allergies? | | | | | | | | | | | | | | | | | | | | |
| Parent INFORMATION | | | | | | | | | | | | | | | | | | | | |
| **Parent 1 Last Name:** | | | | | |  | First Name: | | | | | | | | | | | | | | | |
| **Parent 1 Email Address:** | | | | | | | | | | | | | | | | | | | | |
| Street Address: | | | | | | | | | | | | | | | | | | | | |
| City: | | | | | | State: | | | | | |  | | | | | | Zip: | | | | |
| Cell phone no.: | | Work phone no.: | | | | | |  | | | Home phone no.: | | | | | | | | | | | |
| **Parent 2 Last Name:** | | | | | |  | First Name: | | | | | | | | | | | | | | | |
| **Parent 2 Email Address:** | | | | | | | | | | | | | | | | | | | | |
| Street Address: | | | | | | | | | | | | | | | | | | | | |
| City: | | | | | | State: | | | | | |  | | | | | | Zip: | | | | |
| Cell phone no: | | Work phone no.: | | | | | |  | | | Home phone no.: | | | | | | | | | | | |
| PICK-UP INFORMATION | | | | | | | | | | | | | | | | | | | | |
| **Name of authorized pick-up person:** | | | | | Relationship to camper: | | | Cell phone no.: | | | | | | | |  | | | Alt. phone no.: | | | |
|  | | | | |  | | | ( ) | | | | | | | |  | | | ( ) | | | |
| Name of authorized pick-up person: | | | | | Relationship to camper: | | | Cell phone no.: | | | | | | | |  | | | Alt. phone no.: | | | |
|  | | | | |  | | | ( ) | | | | | | | |  | | | ( ) | | | |
| Name of authorized pick-up person: | | | | | Relationship to camper: | | | Cell phone no.: | | | | | | | |  | | | Alt. phone no.: | | | |
|  | | | | |  | | | ( ) | | | | | | | |  | | | ( ) | | | |
| **Is your child allowed to go home alone?** | | | | | | | | | | | | ❑ Y | | | | |  | | | | ❑ N | |
| *Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | | | | | | | | | | | |  | | | | | | *Date:* | | | | |
| IN CASE OF EMERGENCY! | | | | | | | | | | | | | | | | | | | | |
| Name of local friend or relative (not living at same address): | | | | | Relationship to camper | | | Home phone no.: | | | | | | | |  | | | Work phone no.: | | | |
|  | | | | |  | | | ( ) | | | | | | | |  | | | ( ) | | | |
| CAMPER RELEASE | | | | | | | | | | | | | | | | | | | | |
| I give permission for the staff of Greenwich House to provide or seek medical treatment in an emergency for my child. | | | | | | | | | | | | | | | | | | | | |
| *Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | | | | | | | | | | | |  | | | | | | *Date:* | | | | |
| I give permission for Greenwich House to take photographs, film/video, and tape recordings of my child only for express use of Greenwich House in publicity and advertisements furthering the mission of the organization. | | | | | | | | | | | | | | | | | | | | |
| *Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | | | | | | | | | | | |  | | | | | | *Date:* | | | | |
| additional information | | | | | | | | | | | | | | | | | | | | |
| Please describe your child? | | | | | | | | | | | | | | | | | | | | |
| What is your child’s previous art experience (school/camp/classes)? | | | | | | | | | | | | | | | | | | | | |
| Does your child wish to be grouped with another camper in Summer Arts Camp? (We will try to accommodate but it is not guaranteed) | | | | | | | | | | | | | | | | | | | | |
| Is there any other information about your child that you would like for us to know about such as special interests or talents, fears, school/social issues, etc.? | | | | | | | | | | | | | | | | | | | | |

**Please return this application with a non-refundable $200 deposit to:**

**Greenwich House Youth and Community Center**

**27 Barrow Street, 5th Floor**

**New York, NY 10014**

**Attn: Omar Amores, Program Director**

**Please make checks out to: Greenwich House, Inc**

# greenwich house YCC summer Steam camp

# counselor-in-training (cit) supplemental application

1. **Please answer the questions below.**
2. **In addition to this supplemental form, please provide two letters of recommendation. One letter must be from a teacher, coach, or mentor. The second letter may be from a friend or relative.**
3. **If this is your first year applying, you must set up an interview with Omar. Please email or call once your form is submitted.**

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| **Today’s date:** |
| Why do you want to be a CIT? |
| What experience do you have working with younger children? |
| What extra-curricular activities are you involved in after school? |
| Why do you think you would be a good CIT? |