

Welcome to Camp Cool Environment! We look forward to exploring the environment, nature, science, and the arts together with your child this summer. This document contains camp information and policies that must be followed during your child's time at Camp Cool Environment. If you have any questions, please contact WIMNI Director **Austin Morreale**: [austin@whoismyneighbor.net](mailto:austin@whoismyneighbor.net),

**Location:** Camp is located inside the lower level of the Reformed Church of Highland Park (RCHP), 19 South 2nd Avenue, Highland Park, NJ. The entrance and exit to the camp is off the municipal parking /farmer's market lot. This lot is accessible from Magnolia Street (one block off Raritan Ave) between 2nd and 3rd Avenues. Enter the rear doors to the left of the accessible ramp. Once inside, go through the door immediately to your left. There will be signs to direct you.

**Camp Staff:** Jewel "Ducky" Soroka is our Camp Director and Andrew Berenguer is our Assistant Camp Director. They will be present at camp each day and are both CPR/First Aid certified. Each week high school/middle school students will also be serving as volunteer camp counselors (volunteers) by serving as mentors and assisting the camp directors, but they do not have supervisory responsibility over campers. If you need to contact your child or speak to a camp director during camp operational hours, please call: **Jewel 732-770-0122 or Austin 404-944-1648.** *(Please note Austin's number is different from the WIMNI number and is the best way to get in contact with Austin should an emergency arise while your child is at camp. Also please note Austin will not always be with the campers as he's not a member of the camp staff. However, his office is also in the lower level of RCHP and he will check in with Jewel, Andrew, and the campers throughout the day as his schedule allows.)*

**Hours of Operation:** 9am-4pm. Before and after care available ONLY with advanced notice.  
8am-9am beforecare (additional \$25/week), 4-5p aftercare (additional \$25/week)

**Drop off, Pick up, and Attendance:** Drop off and pick up each day is in the lower level of RCHP. Please fill out the attached permission form indicating all persons who are allowed to pick your child up from camp or if your child has permission to leave by themselves. **If your child is going to be absent, please call or text Jewel between 8:30-9am on the morning of their absence.** On field trip days, campers must arrive no later than 9am or they will miss that day of camp.

**Field Trips:** If the campers have a field trip, they are required to stay with the group at all times during field trips. On the days when we have an all-day field trip, campers must bring their lunch for the field trip because there is no option to buy lunch on these days. We DO NOT have staff available to stay with campers not attending field trips. **If your child does not arrive at camp by 9:00am on field trip days, transportation will leave without them,** and they will miss that day of camp. Refunds are not available for missed days.

**Lunch and Snacks:** Your child is responsible for their lunch each day. On days we remain in the lower level of RCHP, campers may purchase lunch from Global Grace Café for \$5/lunch. **(If you want your camper to buy lunch from the Café, please be sure to send in payment with them as they are a separate entity from Who Is My Neighbor, Inc.)** The menu features different cuisines, with a variety of salads. A staff member or volunteer will bring the campers to the café upstairs to purchase lunch, and then they will return to the lower level to eat with the group. No one is allowed to leave the building to purchase lunch. Reminder, campers must bring their lunch on field trip days, as there is no option to buy lunch on these days. **Please have your child bring a water bottle each day,** clearly marked with their name. Snacks will be provided. If your child has food allergies, please send two snacks to camp with them in case they cannot eat the provided snack.

**Shoes and Clothing:** Please make sure your child wears comfortable closed-toe shoes. *Flip flops and open toe shoes are not permitted.* Campers/volunteers will be sent home if not wearing appropriate shoes. Please have your child bring a hat and dress appropriately for hot, summer weather when playing outdoors. *Sunscreen should be applied prior to arrival. You may send sunscreen for children to reapply.*

**Wheels:** Campers and volunteers are not allowed to use bikes, skateboards, or scooters during camp hours. A bike rack is located on both the front lawn and back parking lot to lock bikes during camp hours. Skateboards and scooters can be brought inside and stored in the camp closet during camp hours.

**Electronic Devices:** Campers and volunteers are not allowed to use electronic devices during camp hours. Electronic devices brought to camp will be kept in the camper's bag or in the cave closet until the end of the day. If your child needs to contact you during camp hours, they can request to use the Camp Director's phone.

**Gum:** Chewing gum is not allowed at camp.

**Health Policies and Medical Emergencies:** Completion of the attached "Medical and Health Form" is required for all campers and volunteers. If a medical emergency should arise, parents and/or emergency contact will be contacted as quickly as possible. If the camp director feels the injury is serious and immediate medical assistance is needed, 911 will be called.

A child who is running a fever must remain home for a minimum of 24 hours after the fever has ended. Parents are encouraged to be on the alert for signs of illness in their children and are required to keep them home when they are sick. Staff will be on the alert for signs of illness in campers. Persons running a fever will not be admitted to camp.

Medications will not be given during camp, without prior arrangement and written authorization from the parent, guardian, or prescriber. Any medication that a child is taking, whether prescription or over-the-counter, must be in their original container and labeled with the child's name. Labels on over-the-counter medications must contain age-appropriate guidelines for dispensing. We are unable to store or administer medication that requires refrigeration.

**Payment:** **Camp tuition is due in full four weeks before the camper's first day of camp.** A camper will not be able to attend camp until tuition is paid in full. *Please note, no refunds will be given for cancellations made within three weeks of the camper's first day of camp.* Partial weeks and half-days cannot be accommodated. Please reach out to Austin at [austin@whoismyneighbor.net](mailto:austin@whoismyneighbor.net) or 404-944-1648 if you need to discuss the payment schedule.

## Permission Form: Camp Cool Environment 2025

Camper/Volunteer Name: \_\_\_\_\_

### Drop Off and Pick Up

My child \_\_\_\_\_ has permission to leave by themselves at 4pm  
\_\_\_\_\_ has permission to leave by him/herself at 5pm if in aftercare  
\_\_\_\_\_ will be picked up by the following people:

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

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

### Photo Release

May we use your child's photo in camp publications, on the Who Is My Neighbor, Inc. website, and for other non-commercial purposes to advance the work of our non-profit organization?

\_\_\_\_ yes    \_\_\_\_ no    Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### Transportation

I give my consent for my child to be transported in camp vehicles for field trips when applicable. I will be notified each Monday of the location and name of the bus company for field trips scheduled during that week of camp.

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

**Swimming** (There are no currently swimming trips scheduled for this summer; however, we are still looking into possible options.) I allow my child to swim with lifeguard supervision on camp pool days when applicable.

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

### Emergency Contact

Please list yourself and two other adults who we can contact in an emergency:

Parent/Guardian \_\_\_\_\_ Phone \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Phone \_\_\_\_\_

1<sup>st</sup> Contact's Name & relationship \_\_\_\_\_ Phone \_\_\_\_\_

2<sup>nd</sup> Contact's Name & relationship \_\_\_\_\_ Phone \_\_\_\_\_

## Medical and Health Form: Camp Cool Environment 2025

Camper/Volunteer Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Parent/Guardian Email \_\_\_\_\_

Please list any medical conditions/allergies/dietary restrictions/medications/special needs.  
Please make sure to also list any social, emotional, and/or behavioral challenges.

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Immunizations – Please initial one of the following:

- \_\_\_\_\_ My child is current on his/her immunizations according to state law age-appropriate scheduled standards.
- \_\_\_\_\_ My child is not up-to-date on immunizations. I understand my child cannot attend camp unless I attach a physician's letter stating immunizations are in progress.
- \_\_\_\_\_ My child has a medical and/or religious exemption from immunizations. Please attached necessary documentation.

I, the parent/guardian of \_\_\_\_\_, give permission to WIMNI Camp Staff to secure from any licensed hospital, physician and/or medical personnel any treatment deemed necessary for my child's immediate care and agree to be responsible for payment of any and all charges for medical services rendered.

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

Family Doctor Name \_\_\_\_\_ Phone \_\_\_\_\_

Insurance Carrier \_\_\_\_\_ ID# \_\_\_\_\_

*\*Please provide a copy of your child's insurance card by the first day of camp.*

I agree to abide by the conditions herein and agree to hold harmless, waive and release Who Is My Neighbor Inc., the Reformed Church of Highland Park, its agents and employees, and other such individuals who may be involved in the planning and implementation of this program from any and all claims and liability for losses or damage to property or injuries to persons occasioned wholly or in part by or resulting from participation in this camp program.

Please initial, indicating that you have read this statement. \_\_\_\_\_