

Physical Address:
1055 Route 32
Rosendale, NY 12472



Mailing Address:
1915 Lucas Ave.
Cottkill, NY 12419

Matthew McCluskey
Youth Director

(845) 658-8982
youth@townofrosendaleny.gov

2026 Summer Camp Registration Packet

Dear Camp Families,

Thank you for choosing Rosendale Summer Day Camp for Summer 2026. The following packet is for registration and includes info you may need to know while choosing your summer fun. Most of the things included in the registration packet are for you and your records. The only thing I need back from you is the actual application along with a copy of your campers immunization records.

Summer 2026 will start on June 29th and runs through August 21st. It is divided up into 4 sessions each 2 weeks long. The regular camp day runs from 9:00am-3:00pm with a pre camp (7:30am) and after camp (5:30pm) option available. Families may sign up for up to 3 sessions; this allows more people to come to at least one session.

It's preferred that you pay in full at registration. However \$50 per session/camper may be paid to hold a spot for those that cannot pay in full. The deposit goes towards your total owed. If you withdraw from camp prior to May 30th. After that, the deposit is nonrefundable but you will get back any session fee you paid, minus the deposit. After June 26th, no refund at all will be given unless in cases of special circumstances. .

This year's prices have changed a little. The price per session is \$200 for Rosendale residents (proof of residency is required) and \$320 for non residents. Pre camp is \$50 per session and post camp is \$90 per session. Pre and post camp can always be added later on in the summer.

Full payment is due by May 29th for all sessions

Campers have to be at least 5 years old when they start camp and the oldest a camper can be to attend is 14. Campers are placed into groups based on the grade they're going into. We have 2 groups each of the following grades: K-1, 2-3, 4-5, 6&up. Depending on need, quasi groups may be formed between the established age groups. Most of the day they are doing things with their groups but there are times of the day where the groups are mixed.

The day is a mix of high energy and low energy activities, arts and crafts, imagination play, swimming, and themed activities. We swim everyday and have a whole process and procedures around the pool. We do test campers swim abilities of those that want to go into the deep end. There is a spot on the application to give permission to take the test. We know there is a mix of swim abilities, especially in the younger age groups.

We know many families depend on camp for their childcare needs. We are lucky in that we have protection from rain and thunderstorms. That allows us to have camp everyday. However, air quality has become a new weather issue to manage. We do have access to the Rec Center building most of the summer in addition to the Youth Center. If there are days where the air quality index is too high to be outside, we will have camp inside. There may be a rare case where that day happens when someone has the Rec Center building rented. Then we would have to cancel camp that day.

The best way to register your child for camp is to come into the Youth Center and register with me in person. Camp does fill up quickly, especially the middle grades. Attending the opening registration day on March 21st is the best chance of getting a spot. After that, I am there every weekday afternoon until 6:30pm. You can make appointments to meet if need be. I would appreciate it if you have a copy of your campers immunization records at registration but they can be sent in afterwards (preferable as early as possible). Even those campers that attended last year. All campers must be immunized on the same track as schools. We are overseen by the Ulster County Department of Health and state laws and guidelines around summer camps which require this.

I know that's a lot above to take in. Feel free to ask any questions you have, email is best but feel free to give me a call also. I am in the office in the afternoons (11:00am-6:30pm) into the evening. Best time is between 2:30-6:30 when the Youth Center is open. Thank you for looking at Rosendale Summer Day Camp for your 2026 summer fun. We are looking forward to another great summer and hope you're a part of it.

Thank you,
Matthew McCluskey
Youth Director
Town of Rosendale



Regulated Children's Camps in New York State

What Families Need to Know

This guide provides some key information for families who are considering sending their child to a New York State-regulated children's camp. It's a good idea to visit the camp or interview the camp operator before enrolling your child. Learn more about each of these topics at health.ny.gov/camps.



health.ny.gov/camps

New York State-regulated children's camps have a permit to operate from their local health department and must meet the requirements in Subpart 7-2 of the State Sanitary Code. There are additional requirements for camps enrolling campers with disabilities.

Considerations for Choosing a Children's Camp

Staff Qualifications and Training

Camp staff must meet minimum qualifications for age, training, and experience. There are more qualifications for staff overseeing activities like swimming, boating, horseback riding, and riflery, and for staff at camps for children with developmental disabilities. Camp staff with direct responsibility of a camper with a disability must be trained in the camper's specific needs.

Camp directors must undergo background checks and disclose whether they have any criminal convictions. Camp operators are required to check whether camp staff and volunteers are listed on the New York State and National Sex Offender Registries.

Supervision

Camps must have a minimum number of staff to supervise campers. Extra staff are required for activities like swimming, archery, and riflery, and for all camps enrolling a child with a physical or developmental disability.

Camper Health

Camps are required to have a health director, which could include a physician, physician assistant, nurse practitioner, registered nurse, licensed practical nurse, or EMT. Depending on their certification, they may or may not be licensed to perform specific duties. Camps must also have First Aid and CPR certified staff on-site to respond to medical emergencies and assist the health director.

The camp must maintain a written medical plan approved by their local health department. This plan must describe the medical, nursing, and first aid services provided by the camp. Injuries and illnesses must be reported to the local health department during the camp season and are thoroughly reviewed.

Camps must keep a confidential medical record on file for every camper. You will need to provide your child's history of immunization, illness, disability, or allergy. Specify current medications, special diets, and activity restrictions.

A camp may recommend or require that campers have received specific immunizations. The Department of Health strongly recommends that all campers are up to date on their childhood vaccines.

Visit health.ny.gov/prevention/immunization/childhood_and_adolescent.htm for more information.

Food Safety

Local health departments inspect food preparation and handling activities to ensure safe and sanitary practices.

Facilities and Fire Safety

Camps must follow building and fire safety requirements and maintain facilities in safe condition.

Camp Safety and Activities

The camp operator must have a safety plan approved by the local health department that outlines emergency procedures and supervision for activities and trips, staff training, camper orientation, and maintenance of facilities. Camp trips and activities must be led by staff with appropriate training and expertise. Proper protective equipment for the activity such as helmets and life jackets should be provided by the camp.

Swimming and Water Activities

If a camp offers swimming or boating, they must meet specific requirements for staff certifications and activity supervision during water activities at camp and off-site. Swimming activities at camp pools and beaches must be supervised by an aquatics director and aquatic staff are required to be trained in CPR. Campers are required to wear U.S. Coast Guard-approved life jackets when boating.

Camps must use safety measures to prevent drowning including swim testing, providing specific areas for campers based on swimming ability, and implementing a buddy system which pairs each camper with a buddy of similar swimming ability. Be sure to let the camp know if your child is not a strong swimmer or is nervous around water.

Responsibilities

The New York State Department of Health, local health departments, and camp operators have specific responsibilities to parents and guardians under the children's camps regulations.

Responsibilities of the Camp Operator

- To inform you and the local health department of any incident involving your child, including serious injury, illness, or allegation of abuse.
- To screen the background and qualifications of all staff and volunteers.
- To train staff about their duties.
- To provide supervision for all campers 24 hours a day at overnight camps, and during hours of operation for day camps.
- To maintain all camp physical facilities in a safe and sanitary condition.
- To provide safe and wholesome meals.
- To develop, follow, and share approved camp safety plans.
- To provide you written notification during enrollment that:
 - the camp must have a permit to operate;
 - the camp must be inspected twice yearly; and
 - camp inspection reports and required plans are available for review.

Responsibilities of the Local Health Department

- To review and approve the required written camp safety plan.
- To inspect camps to ensure:
 - all physical facilities are properly operated and maintained; and
 - camper supervision meets health and safety requirements.
- To review and approve the camp's application and issue a permit.
- To investigate reports of serious incidents of injury, illness, and all allegations of abuse.
- To provide parents or guardians an opportunity to review inspection reports and required plans.

More Information

Contact your local health department for more information or questions about children's camps regulations, complaints, or inspections. Find your local health department at health.ny.gov/environmentalcontacts.

Checklist for Parents and Guardians

General

- ✓ Does the camp have a permit?
- ✓ What is the length and cost of the camp sessions?
- ✓ What is the daily schedule?
- ✓ What kind of activities or trips are available? Can my child choose between different activities?

Qualifications, Training, and Supervision

- ✓ Do staff meet minimum qualifications?
- ✓ What are the camp's supervision procedures, including disciplinary policies?
- ✓ Are campers supervised by counselors who have the maturity and experience to make decisions that could affect the health and safety of campers?

Camper Health

- ✓ Will my child's medical needs be met?
- ✓ Is a health director on-site or on-call at all times?
- ✓ How and when will I be notified if my child becomes ill or injured?
- ✓ What camper medical information do I need to submit?

Nutrition

- ✓ Are meals or snacks provided by the camp?
- ✓ Does the camp serve food my child likes?
- ✓ Are special meals available for children with food allergies or dietary restrictions?
- ✓ Are safe food practices observed in the camp kitchens, dining areas, and food services?

Facilities

- ✓ What are the sleeping accommodations?
- ✓ What is the distance between activities?
- ✓ How much time will my child spend outside versus inside?
- ✓ What does the camp do in bad weather or during extreme heat?

Camp Safety and Activities

- ✓ Do counselors supervising specialized activities have additional training?
- ✓ Does the camp provide the proper safety equipment for activities?
- ✓ How is transportation provided for camp trips?

Swimming and Water Activities

- ✓ Do aquatics staff have the necessary certifications and on-the-job training for their position?
- ✓ How are campers supervised while swimming?
- ✓ How are campers tested to determine their swimming ability before participating in aquatic activities?
- ✓ How are bathing areas marked off for various swimming ability levels?

Physical Address:
1055 Route 32
Rosendale, NY 12472



Mailing Address:
1915 Lucas Ave.
Cottkill, NY 12419

Matthew McCluskey
Youth Director

(845) 658-8982
youth@townofrosendaleny.gov

2026 Summer Day Camp Application

Camper Name: _____ Grade **Entering**: _____ Date of Birth: _____

Physical Address (no p.o.) _____

Town/City _____ State: _____ Zip _____

Mailing Address if different _____

Contact Info: Home Phone: _____ Email Address: _____

Parent/Guardian 1: _____ Daytime Phone _____

Parent/Guardian 2: _____ Daytime Phone _____

Emergency Contact Info: (please put 3 other people besides parents)

Name: _____ Daytime Phone _____ Relationship _____

Name: _____ Daytime Phone _____ Relationship _____

Name: _____ Daytime Phone _____ Relationship _____

List who else is permitted to pick up your child. (Must have photo ID)

Date Received: _____	Resident (Y or N)	Payment Amount Received: _____	Check # _____
Age Group: K-1 2-3 4-5 6&UP	Immunizations: _____	Tee Shirt Size: _____	
Sessions 1 2 3 4	Pre Camp 1 2 3 4	Post Camp 1 2 3 4	Inputed digitally _____
OFFICE USE ONLY / LEAVE BLANK			

Camper Name: _____

Welcome to Town of Rosendale Summer Day Camp, operated at the Rosendale Recreation Center (1055 Route 32) by the Rosendale Youth Program. Camp is open to children ages 5 through 14 at the start of their session. The camp day runs from 9:00am until 3:00pm with drop off between 8:45am-9:30am. To help ensure everyone gets a chance to attend, you may only sign up for 3 sessions. We do offer a before camp (starting at 7:30am) and after camp (until 5:30pm) program for an extra fee. Fee schedule is below, proof of residency required for resident price.

Fees: Town of Rosendale residents \$200 per session
Non-Residents \$325 per session
Pre-camp (starting at 7:30am) \$50 per session
Post-camp (until 5:30pm) \$90 per session
Camp Tee-shirt (optional) \$12

Checks are made out to "Town of Rosendale DFY"

Please indicate which session(s) you would like to enroll into. Max of 3 sessions

Session 1 (June 29-July 10) _____ **Pre** _____ **Post** _____
(no camp 7/3)
Session 2 (July 13 - July 24) _____ **Pre** _____ **Post** _____
Session 3 (July 27 - August 7) _____ **Pre** _____ **Post** _____
Session 4 (August 10 - August 21) _____ **Pre** _____ **Post** _____

Camp Tee Shirt (optional) \$12 Circle the size you want

YXSM YSM YM YLG ASM AM AL AXL

Number of Sessions _____
X \$200 or \$325
Total paid for sessions _____

Pre or Post Camp Fees _____
of session x \$90 post and/or \$50 pre
Tee-Shirt Fees (\$12) _____

Total _____

Office Use only (do not fill out)

Amount paid: _____ Check Name and # _____
Second Payment: _____ Check Name and # _____

Campers Name: _____

TOWN OF ROSENDALE SUMMER DAY CAMP

_____ has my permission to attend the Rosendale Summer Day Camp sponsored by the Town of Rosendale Youth Program. Permission is hereby granted to use my child's name and photo to publicize the program.

I understand that my child will be participating in recreational activities involving complete use of such facilities and related equipment. I have read and will go over with my child the Camp Behavior Policy.

I have been given an opportunity to investigate said program and have independently answered all questions concerning said activities and the supervision of my said child, to my complete satisfaction.

I, the undersigned, hereby agree to assume all risk associated with said program and to indemnify and hold harmless the Town of Rosendale and the Rosendale Youth Commission from any and all damages resulting from liability arising out of said program including transportation associated therewith and all activities relating thereto.

I have read the foregoing permission form and hold harmless agreement and fully understand the same.

This agreement may not be changed or modified orally. I have not relied on any representatives of the Town of Rosendale or the Rosendale Youth Center, it's Director, agents, servants, or employees not expressly contained herein.

By signing below I give permission to the staff of the Rosendale Day Camp to help apply sunscreen to my child if needed/requested.

Signature of Parent/Guardian: _____

The Rosendale Day Camp is licensed by the NYS Dept. of Health, and is inspected twice yearly. Inspection reports are on file at the Ulster County Department of Health, 239 Golden Hill Lane, Kingston, New York.

The Town of Rosendale Youth Program offers services to participants regardless of race, creed, color, national origin, economic status, sex or disability.

The Rosendale Youth Program is funded by the Town of Rosendale, individual, business, and corporate donors, as well as grants when available.

Demographics: This helps us with applying for grants. It is only used in total statistics of the camp and no individual names are used. It is optional to fill out. Note: With some, please be specific. The one grant I apply fall has changed their demographics. Please check what applies:

_____ White _____ Black or African American _____ Hispanic or Latino _____ Two or more Race

_____ American Indian or Native Alaskan _____ Native Hawaiian or Other Pacific Islander

_____ Asian (please indicate with country) Other not listed: _____

Camper Name: _____

Camper Get to Know You and Health Info

This sheet is for us to know a little more about your camper to help us better serve them at camp. It is also where the health info will be located. It is important to fill it out as best as you can. **In addition to this sheet we need a copy of your child's immunization records or exemption letter as per Department of Health Regulations.** Only medical exemptions are accepted. Any questions don't hesitate to ask.

Health Info

Please list any major illness or injury your child has had in the past that may be something that affects your campers camp experience. .

Allergies: _____ Symptoms: _____

Plan if having reaction: _____

Family Physician: _____ Phone Number: _____

Health Insurance provider and policy/plan number: _____

Any Medication needed to be taken at camp (another form will need to be filled out)? Y or N

Get to Know You Section

My child is able to take the swim test in order to swim in the deep end of the pool. YES NO

Preferred Activities: _____

Restrictions, fears and dislikes: _____

Let us know anything that can help us do better: _____

This health history is correct so far as I know, and the person herein described has permission to engage in all prescribed camp activities except as noted by me.

I hereby give permission to the physician selected by the camp director to order x rays, routine tests, and treatment for the health of my child, and, in the event I or my emergency designees cannot be reached in an emergency, I hereby give permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and to order injections, anesthesia, and/or surgery for my child as named above.

Parent's Name (Print): _____

Signature: _____ Date: _____

Physical Address:
1055 Route 32
Rosendale, NY 12472



Mailing Address:
1915 Lucas Ave.
Cottkill, NY 1241

Matthew McCluskey
Youth Director

(845) 658-8982
youth@townofrosendaleny.gov

Rosendale Day Camp Tee-Shirt Design

We are opening up our tee shirt design to you. Submit a drawing in the box below or on another piece of paper by **May 1, 2026**. You can drop off drawings at The Youth Center or mail to Rosendale Youth Program, 1915 Lucas ave. Cottkill, NY 12419. One of the designs will be implemented into the tee-shirt design.

Guidelines for drawing: We want it to represent summer and camp so we are looking for drawings of what reminds you of camp or things that you like to do at camp. The drawing has to be one color because it will only be one color ink on the shirt. This can also be done digitally. This includes the outline so if you draw with pencil first and want to fill it in, then draw lightly so the outline can be erased. Use the whole box or another letter size paper and be creative.

Name:

Age:

Phone: