**Welcome to OUB Camps 2018!**

Camper Registration Form

**All camps require a registration fee of $25 PER FAMILY with registration**. Camp Descriptions can be found at [www.oubmichigan.org](http://www.oubmichigan.org/) or call our office at 989-855-2430 for more information or call Gwen Botting, Executive Director, directly at (616)-755-2221. NO TUITION FEES are required to attend camps in 2018! If you have difficulty with this form, please call for assistance.

Please download and email all registration forms to gwen@oubmichigan.org or print and mail hard copies to the address below. Please mail your $25 registration fee to:

**Gwen Botting, Executive Director**

**4175 Westbrook Road,**

**Ionia, MI 48846**

**Camper Information**

Camper name:

Street address:

City, State, Zip:

Birthday:

Age:

Gender:

Home phone (if applicable):

Camper’s Cell Phone (if applicable):

Camper’s Email (if applicable):

**Parent Contact Information**

Parent/Legal Guardian Name:

Street address:

City, State, Zip:

Home/work phone:

Cell Phone:

Email:

2018 Summer Schedule

Please mark your child’s FIRST CHOICE of **2018** **Summer Session** with a **1**.

Please mark your child’s SECOND CHOICE of **2018 Summer Session** with a **2**.

\_\_\_June 17-22 Cookin’ and Servin’ Camp, ages 10 - 19

\_\_\_June 24-29 Cookin’ and Jammin’ Camp, ages 7-14

\_\_\_July 1-4 Elementary Mini-Camp I, ages 7-12

\_\_\_July 5-8 Elementary Mini-Camp II, ages 7-12

\_\_\_July 12-20 Adventure Trip 2018, ages 10-19

Please indicate below how you will pay the registration fee of $25.00.

\_\_\_\_My $25 check or money order for my child’s registration fee is enclosed

\_\_\_\_My $25 check will be mailed separately

\_\_\_\_I have more than one child attending OUB Camps. I will send one check to cover my family’s registration fee.

Your child’s spot will not be reserved until registration fee and this form are received. You do not have to send all the health and liability forms at this time in order to reserve your child’s spot!

Eye condition(s):

Field of vision and Visual Acuity: (*Example: 20% field, 20/800 in left eye, blind in right eye)*

Does your child with low vision have difficulty seeing at night?

Secondary Conditions:

Physical Restrictions:

Special needs, including dietary:

Dietary needs and activity restrictions must be documented by a letter from your child’s physician.

Does your child have any severe, potentially life-threatening allergies?

If so, to what?

Does your child have any less severe allergies that we need to be aware of?

If so, to what?

Insurance Company Name (for health insurance):

Contract number:

Group number:

Preferred reading format at camp:

\_\_\_\_\_Braille \_\_\_\_Large Print \_\_\_\_Regular Print

Does your child live with both parents?

Does your child have permission from both parents to attend our camps?

**The following information will help us prepare for your child to attend our camps.**

Has your child attended our camps before?

Has your child attended camps other than OUB Camps before?

If so, what camp and how many years?

What are your child sleep habits?

Should your child be awakened at night to use the restroom?

If so, what time?

Does your child have any special fears?

If so, what are they?

What would you like your child to gain from his or her experience at OUB camps?

What independent living skills does your child need help learning?

What other skills of blindness does your child need special help with, e.g. self-care, travel, etc.?

Are there any other things we should pay particular attention to?

**Parent Assessment of Child’s Ability**

Please indicate your assessment of your child’s level of skill in the following areas. Filling this out will help us develop our programs to best suit the needs of your child and help them to have a successful camp experience. Please be honest! Some skills may be beyond your child’s age-appropriate ability, and that’s fine! Please rate 1-5, with poor designated by a 1 and 5 as advanced. If not applicable, please indicate with N/A.

Reading at appropriate grade level: In Braille

Large Print

Regular Print

Cooking:

Using a sharp kitchen knife:

Familiar with using stove top:

Familiar with using oven:

Familiar with using microwave oven:

Can clean up spills effectively (such as egg on the floor or spilled milk):

Skill at washing dishes:

Other:

Orientation and mobility experience:

 Using a cane/other mobility device:

Walking in a straight line (not veering):

Crossing streets:

Walking over rough terrain:

Traveling at night:

Other:

Daily Living Skills:

 Showers independently:

Washes own hair:

Dresses themselves appropriately:

Combs own hair:

Uses deodorant effectively:

Shoe-tying:

Organizing belongings:

Other:

Household skills:

 Taking out Trash:

 Sets table:

 Does laundry:

 Other:

Social Skills:

 Eats neatly with appropriate silverware:

 Can serve themselves food from serving dish neatly:

 Can carry on conversation at meals that are appropriate:

 Converses in a back-and-forth manner:

 Can stay on topic in a conversation:

 Clears dishes without being asked:

 Knows how to handle teasing and bullying:

 Has a sense of humor:

 Is not easily offended:

Turns face towards speaker in conversation:

Other:

Does your child have any behaviors related to his or her blindness that we should be aware of (i.e. eye-pressing, rocking, jumping, spinning, hand-flipping, etc.)?

**Scholarships**

Opportunities Unlimited for the Blind is a private non-profit organization that is solely dedicated to helping children and young adults who are blind or have low vision build life skills, self-confidence and independence**. In 2018, the only fee for campers is $25 per family for registration. Scholarships are no longer necessary. However, parents and guardians should understand that a camp like ours, with a nearly one-to-one camper to staff ratio, is very expensive to operate.** OUB would very much appreciate your willingness to attend a meeting of one of our supporters, such as a local Lions Club, to express in your own words how much our camps mean to your child and your family. For more information, please see our website under **Scholarships.** Your local Lions Club, Michigan Parents of Children with Visual Impairments, Michigan Department of Education Low Incidence Outreach, or other social service organization may also assist with transportation funds for your child to attend camp. You will need to contact them as EARLY as possible, as many clubs do not meet in the summer.

You will be notified within 10 days of our receipt of your registration form AND $25 fee if your child will be accepted for his or her first or second choice of camp. Please note that, once your child has been accepted for camp, there are several forms that must be filled out for your child to attend. No child can attend without the proper, and completed, documentation.

**Thank you for choosing OUB Camps!**