

# the *Fresh Air* fund

# 2020 Child Application

The Fresh Air Fund's safe and fun **summer sleepaway programs** are provided at **no charge** to NYC families.

Visit [child.freshair.org](http://child.freshair.org) to apply online.

**Completing your application by April 30, 2020** may increase your child's chances of participation. We do accept applications until all spots are filled. Please submit the application as soon as possible.

Please call **1-800-367-0003** if you have questions or need help completing the application. We are here to help!

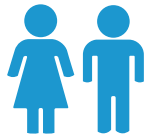
## Eligibility Criteria

**Age** Unless noted, participant must be the age listed by 08/10/20.

### Friendly Towns

**NEW** Applicants

**7-13**



year old girls & boys

**Returning children**  
can reapply until age 18

**14+** must be reinvited by a previous host family or one from the same area

### Camp



**8-13**

year old girls



**8-15**

year old boys

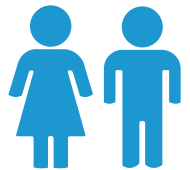
### Specialized Programs for Girls & Boys:

**Career Awareness Program (CAP)/Camp Mariah** (Currently in the 6th grade)  
(11-12 years old by 06/29/20)

**Explorers Summer Learning Program**  
(11-12 years old by 07/13/20)

**11-12**

years old



Returning applicants can reapply until age 15

Returning teens who will be 16 or 17 years old by 06/29/20 can apply to the Counselor-in-Training (CIT) program

## Income

**Families are eligible if:**

1. Family receives Public Assistance (TANF/SNAP/Medicaid/ Section 8 Voucher).

**OR**

2. Child is currently in foster care.

**OR**

3. Total Household Income:

**Camp:** Meets USDA income guidelines for free/reduced lunch.

**Friendly Towns:** No more than \$10,000 above the USDA income guidelines.



## Address

Children must live in and go to school in one of NYC's 5 boroughs. Camp Junior applicants must live in the Bronx.



## Medical Form

**Option 1:** DOE/DOH medical form and the "Authorized Medications" form

**Option 2:** Our 2 paged medical form must be **signed, dated,** and **stamped** by the doctor.

### Friendly Towns Applicants:

Most recent physical exam must have happened **on or after 01/01/19**

### Camp Applicants:

Most recent physical exam must have happened **on or after 06/01/2019**



# Summer 2020 Program Summary

## Friendly Towns



Every summer, thousands of New York City children visit with volunteer host families who live in rural, suburban, and small town communities along the East Coast and Southern Canada.

Host families apply and go through a rigorous screening process that includes an in-home interview and background check.

First time visits are one to two weeks. After the first summer, children may stay for a longer visit. Children need to be 7-13 years old to register for the first time.

### 2020 Trip Dates:

Departures are between **Tuesday 06/30** and **Friday 08/20**



## Camp



Five of our sleepaway camps are located on Sharpe Reservation, a more than 2,000 acre property, in Fishkill, NY. Our sixth camp, Camp Junior in memory of Lesandro Junior Guzman-Feliz, is located at Harriman State Park.

During their outdoor summer adventures, campers develop the confidence to take on new challenges, explore nature, learn new skills and make new friends.

### 2020 Session Dates:

	Session	Start Date	End Date	# Days
Camps: ABC, Hayden-Marks, Hidden Valley, Junior, Tommy	1	Monday, June 29	Friday, July 10	12
	2	Monday, July 13	Friday, July 24	12
	3	Monday, July 27	Friday, August 7	12
	4	Monday, August 10	Friday, August 21	12
Career Awareness Program/ Camp Mariah	1	Monday, June 29	Wednesday, July 22	24
	2	Wednesday, July 29	Friday, August 21	24
Explorers Summer Learning Program	1	Monday, July 13	Friday, August 7	26

## Important Application Dates

### Returning Applicants



\*If applicable, interviews must be completed by **03/16/20**.

\*\*Returning families receive priority through **03/31/20**.

### New Applicants



\*\*\*If applicable, interviews must be completed by **05/22/20**.

## Before You Start

Be sure to gather the following information and documents:



Information for **three (3)** Emergency Contacts - must be at least 18 years old and **cannot** be a parent or guardian.



Copy of front and back of health insurance card. (Not applicable if child is in foster care.)



**Schedule** your **child's doctor's appointment** as soon as possible.



**Passport** for **Canada trips** through Friendly Towns only

# How to Submit your Completed Application & Documents

a) Online: **child.freshair.org**  
*This is the quickest way to submit your child's application.*

b) By email: **apply@freshair.org**

c) By fax: **212-681-0158**

d) With a Community Partner: **www.FreshAir.org/find-an-agency**  
(to find an agency near you)

e) In person/ by mail: **The Fresh Air Fund**  
**633 Third Avenue, 14th Fl**  
**New York, NY 10017**  
**Attn: Community Outreach**  
**M - F 10 am - 6 pm**

Please call **1-800-367-0003** if you have questions or need help completing the application. We are here to help!



## Remember:

**Please keep a copy for your records.**

**Your child's summer placement is not confirmed until you hear from us.**

Confirmation will be communicated by phone, text, email and/or mailed letter.

Call us to track your application.

**DO NOT wait to hear from us.**

## What to Expect: Application Processing & Registration



Select only **one** of the above submission options. We recommend completing online at **child.freshair.org**.

We will begin reviewing your child's application within **two weeks of receiving it**.



If the application is missing **any** part (**see Checklist on next page**), we will contact you up to five times to let you know what is missing and to help you complete the application. If we are not able to reach you, the application will become **"Inactive."**

You may "Re-activate" the application at any time and continue submitting documents until it is complete.



Once we have finished reviewing your application, we will call and email you with the Participation Decision (registered or declined).

If registered, you will receive details via written confirmation (mail, email and/or text). **Please do not assume that your child has been registered if you do not receive this confirmation.**

## Important Information



- 1) Completing the application by **April 30** may improve your child's chances of being accepted for a Summer 2020 experience.
- 2) All children **must** be able to participate in the full trip and use transportation arranged by The Fresh Air Fund.
- 3) **Submitting an application does not guarantee placement.**
- 4) Sometimes, additional or updated information may be needed in order to make an application decision.
- 5) Whether you are applying for camp or a visit with a host family, telling us a lot about your child helps us make their experience better!
- 6) If in foster care, ensure that the application is signed by the person **legally authorized to make decisions** for the child and complete **Page FC1**. If you are not the child's legal guardian, we require legal proof of guardianship.
- 7) Our programs accommodate children with special needs/circumstances, but they are **not** specifically designed for all special needs. We will refer you to the American Camp Association if we are not able to accommodate your child in one of our programs.



# Application Checklist

Your application is complete once **ALL** of the below forms and documents have been received.

**Submitting the application by April 30, 2020 may improve your child's chance of being accepted for Summer 2020.**

If you have questions, please contact the Community Outreach team at **1-800-367-0003**.

## Friendly Towns



- Page 1: Parent/Guardian Information
- Page 2: Child Information
- Page 3: Summer Food Service Form
- Page 4: Health History
- Page 5: Additional Health History
- Page 6: Additional Health Information
- Page 9: Information for Friendly Towns
- Page 10: Program & Session Selection
- Page 11: Emergency Contacts
- Pages 12 & 13: Parental Consent & Release
- Medical Form & Immunization Record

## Camp



- Page 1: Parent/Guardian Information
- Page 2: Child Information
- Page 3: Summer Food Service Form
- Page 4: Health History
- Page 5: Additional Health History
- Page 6: Additional Health Information
- Page 7: Meningococcal Meningitis Vaccination Form
- Page 8: Vision Van Form
- Page 10: Program & Session Selection
- Page 11: Emergency Contacts
- Page 12 & 13: Parent Consent & Release
- Medical Form & Immunization Record

## Supplemental Documents (Required if applicable)

- Legal Guardianship Papers (Court-approved)
- Evaluation Form  
Dated after 01/02/20 & received by 04/30/20
- Special Dietary Plan
- Foster Care Information Page (FC1)
- Treatment Plan(s)  
Allergies/Asthma/Diabetes/Seizure Disorder
- Health Insurance Cards

Please call the Community Outreach Team periodically to track the progress of your child's application.  
**Do NOT submit this page with your child's application.**

## Summer Food Service Program: Information for Parents

This insert relates to Page 3 of the Child Application. Read it carefully and keep it for your records.

The Fresh Air Fund participates in the Summer Food Service Program. Meals are provided to all children free of charge. Federal funds help cover the costs of meals provided to all eligible children. (For The Fund to be eligible to receive reimbursement for meals at a camp, children must meet the income guidelines for reduced price meals in the National School Lunch Program). Children in households that receive food stamps or benefits under the Food Distribution Program on Indian Reservations (FDPIR), or Temporary Assistance to Needy Families (TANF) are automatically eligible for the program. The following 2018-2019 income eligibility standards will be used for determining eligibility for reimbursement:

Household Size	Income Eligibility Guidelines		
	Yearly	Monthly	Weekly
2	\$31,284	\$2,607	\$ 608
3	\$39,461	\$3,289	\$ 759
4	\$47,638	\$3,970	\$ 917
5	\$55,815	\$4,652	\$1,074
6	\$63,992	\$5,333	\$1,231
For each additional family member, add:	\$ 8,177	\$ 682	\$ 158

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

Meals will be provided at site(s) and times as follows:

Camps Anita Bliss Coler (ABC), Hayden Marks Memorial, Hidden Valley, Tommy, and Camp Junior will serve breakfast at 8:00am, lunch at 12:30pm, and dinner at 6:00pm on the following dates:

Monday, June 29, 2020 - Friday, July 10, 2020  
Monday, July 13, 2020 - Friday, July 24, 2020  
Monday, July 27, 2020 - Friday, August 7, 2020  
Monday, August 10, 2020 - Friday, August 21, 2020

Camp Mariah will serve breakfast at 8:00am, lunch at 12:30pm; and dinner at 6:00pm on the following dates:

Monday, June 29, 2020 - Friday, July 22, 2020  
Wednesday, July 29, 2020 - Friday, August 21, 2020


Please fill out the enclosed "Summer Food Service Program Form" (Page 3) and include it in your application.

This institution is an equal opportunity provider. Persons interested in receiving more information should contact: The Fresh Air Fund, 633 Third Avenue, 14th floor, New York, NY 10017 Telephone: 212-897-8900.

To file a complaint of discrimination, complete the USDA Program Discrimination Complaint Form (AD-3027) found online at: [https://www.ascr.usda.gov/complaint\\_filing\\_cust.html](https://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992.

Submit your completed form or letter to USDA by:

- 1) mail: USDA, Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410.
- 2) fax: (202) 690-7442
- 3) email: [program.intake@usda.gov](mailto:program.intake@usda.gov)



Signature of Authorized Representative

11/01/2019

Date

Instructions for completing Page 3 of the Child Application

**Income Eligibility Form for the Summer Food Service Program**

If you need help completing the form, please contact us at 1-800-367-0003.

**IF YOUR HOUSEHOLD GETS SNAP, TANF or FDPIR, FOLLOW THESE INSTRUCTIONS**

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**Part 1:** Enter child's first and last names

**Part 2:** Enter SNAP, TANF or FDPIR case number

**Part 3:** Skip

**Part 4:** Sign the form and provide all information

Enter last four digits of Social Security Number or "0000"

If you do not have a Social Security Number, check the box next to "I do not have a Social Security Number"

**Part 5:** Answer this question if you choose to

**IF YOU ARE APPLYING FOR A FOSTER CHILD, FOLLOW THESE INSTRUCTIONS**

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**Part 1:** Enter child's first and last names

**Part 2:** Check the box indicating the child is in foster care

**Part 3:** Skip

**Part 4:** Sign the form and provide all information

Enter last four digits of Social Security Number or "0000"

If you do not have a Social Security Number, check the box next to "I do not have a Social Security Number"

**Part 5:** Answer this question if you choose to

**ALL OTHER HOUSEHOLDS, INCLUDING WIC HOUSEHOLDS, FOLLOW THESE INSTRUCTIONS**

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**Part 1:** Enter child's first and last names

**Part 2:** Skip

**Part 3:** To report total household income

**Column 1 – Name(s):** Enter first and last names of all household members

**Column 2 – Gross Income by Source:** For each household member, enter the amount received in the "\$" column under the source of income for that person. Then enter how often that amount is received in the "Frequency" column. (e.g. \$25,000 Yearly)

For "*Income from Work*" be sure to enter the gross income, not the take-home pay - gross income is the amount earned before taxes and other deductions (see your pay stub or ask your employer)

If self-employed, enter income after expenses - this is for your business/farm/rental property

For "*Income from Welfare, Child Support, or Alimony*" enter the amount each person received

For "*Income from Social Security, Pension, Retirement, Supplemental Security Income, or Veteran's Benefits*" enter the amount each person got for such source(s)

For "*All Other Income*" enter Workers' Compensation, unemployment or strike benefits, regular contributions from people who do not live in your household, and/or any other income

Do not include income from SNAP, FDPIR, WIC, Federal education benefits and foster payments received by the family from the placing agency

If you are in the Military Privatized Housing Initiative or get combat pay, do not include these allowances as income

If a household member does not have an income, check the box indicating 'no income'

**Part 4:** Sign the form and provide all information

Enter last four digits of Social Security Number or "0000"

If you do not have a Social Security Number, check the box next to "I do not have a Social Security Number"

**Part 5:** Answer this question if you choose to



## Meningococcal Meningitis: Information for Camp Applicants Only (Page 7)

November 1, 2019

New York State Public Health Law (NYS PHL) §2167 and Subpart 7-2 of the State Sanitary Code requires overnight children's camps to distribute this information about meningococcal disease (meningitis) and its vaccination to the parents and guardians of all campers who attend camp for 7 or more consecutive nights.

The Fresh Air Fund is required to keep a record of the following information for each camper:

- A response to receipt of meningococcal disease and vaccine information signed by the camper's parent or guardian; AND EITHER
- A record of meningococcal meningitis immunization OR
- An acknowledgment of meningococcal disease risks and refusal of meningococcal meningitis immunization signed by the camper's parent or guardian.

Meningococcal disease is a serious bacterial illness. It is a leading cause of bacterial meningitis in children 2 through 18 years old in the United States. Meningitis is an infection of the covering of the brain and the spinal cord.

Meningococcal disease also causes blood infections.

About 1,000 – 1,200 people get meningococcal disease each year in the U.S. Even when they are treated with antibiotics, 10-15% of these people die. Of those who live, another 11%-19% lose their arms or legs, have problems with their nervous systems, become deaf, or suffer seizures or strokes.

Anyone can get meningococcal disease. But it is most common in infants less than one year of age and people 16-21 years old. Children with certain medical conditions, such as lack of a spleen, have an increased risk of getting meningococcal disease. College freshmen living in dorms are also at increased risk.

Meningococcal infections can be treated with drugs such as penicillin. Still, many people who get the disease die from it, and many others are affected for life. This is why preventing the disease through use of the meningococcal vaccine is important for people at highest risk.

There are two kinds of meningococcal vaccines in the U.S.:

- Meningococcal conjugate vaccine (**MCV4**) is the preferred vaccine for people 55 years of age and younger. For example, 2 MCV4 vaccines are Menactra™ and Menveo™.

The Centers for Disease Control and Prevention recommend two doses of MCV4 for all adolescents 11 through 18 years of age: the first dose at 11 or 12 years of age, with a booster dose at age 16. Adolescents in this age group with HIV infection should get three doses: 2 doses 2 months apart at 11 or 12 years, plus a booster at age 16.

If the first dose (or series) is given between 13 and 15 years of age, the booster should be given between 16 and 18. If the first dose (or series) is given after the 16<sup>th</sup> birthday, a booster is not needed.

- Meningococcal polysaccharide vaccine (**MPSV4**) has been available since the 1970s. It is the only meningococcal vaccine licensed for people older than 55. The trade name of MPSV4 is Menomune.

Both vaccines can prevent 4 types of meningococcal disease, including 2 of the 3 types most common in the United States and a type that causes epidemics in Africa. There are other types of meningococcal disease; the vaccines do not protect against these.

Information about the availability and cost of the vaccine can be obtained from your health care provider. In addition, the New York State Department of Health has informed The Fresh Air Fund that the vaccine is covered once for each recipient in fee-for-service Medicaid and/or each enrollee in a Medicaid managed care plan. The Fresh Air Fund does not offer meningococcal immunization services.

**Please complete the Meningococcal Vaccination Response Form and return it along with your application and medical forms to:**

**The Fresh Air Fund  
633 Third Avenue, 14<sup>th</sup> Floor  
New York, NY 10017**

To learn more about meningitis and the vaccine, please consult your child's physician or your student health service. You can also find information about the disease on the websites of the:

- New York State Department of Health: <https://www.health.ny.gov>;
- The Centers for Disease Control and Prevention: <https://www.cdc.gov/vaccines> and
- The American College Health Association: [www.acha.org](http://www.acha.org).