

CAMP TIGER

Application for Camp Tiger 2023 May 22nd to 26th 2023 Information Packet

Contents include:

[Disclaimer](#)

[List of Important Dates](#)

[Camp Eligibility](#)

[COVID-19 Safety Procedures](#)

[In-Person Camp Schedule](#)

[Virtual Camp Information and Curriculum](#)

[Procedure for Application](#)

[Camp Tiger Faculty Contact Information](#)

[Application](#)



Disclaimer

This year's Camp Tiger will have two formats, both an in-person format and a virtual format. In order to adhere to current COVID-19 guidelines, we are planning to accept a lower number of campers than previous years to the in-person format of camp. We will also be accepting several campers to participate in camp virtually. With our priorities in health and safety, LSUHSC has the right to cancel the in-person aspect of Camp Tiger at any time, before or during camp, should the status of COVID-19 make it unsuitable to hold in-person events. All regulations, guidelines, and mandates set locally and by the state will be strictly followed.

We are diligently preparing to make sure that the in-person environment is safe for both campers and counselors. In the event that any campers accepted to the in-person camp become ill or become exposed to COVID-19 during the week of camp (or simply no longer feel comfortable attending camp in-person), we will work hard to ensure that they will have an option to join into the Virtual Camp format at any time throughout the week.

List of Important Dates

Application Deadline

Applications must be turned in and fully complete (i.e., vaccination records, health information, camper preferences completed) by **April 16th, 2023 at 11:59 PM.**

Notification of Acceptance

Our physician and faculty team will review each application to assure that we can provide a safe environment for every camper and counselor. Once all applications are reviewed, you will be notified of your "placement" in Camp. Your "placement" refers to whether you have been accepted into in-person or virtual camp, as well as what time you should arrive to camp each day (or for our virtual campers, what time you should log onto Zoom for the day).

Camper Parade & Activity Kit Pick-up

Prior to the first day of camp, Camp Tiger will be having a "Camper Parade" where campers and their families will drive through LSUHSC's parking lot in their cars to be greeted by balloons, posters, music, and their counselors! Besides getting the campers excited for the week, the "Camp Tiger Activity Kits" will also be picked up at this time.

In each Kit, there will be crafts, toys, letters, props, baking supplies, snacks, and personalized items for each camper. The objects will be organized in bags for each day of the week, so it is clear what is needed for each activity. More details on time and schedule are to come.

Campers are strongly encouraged to come and participate in the parade, as they are the VIPs, but if arrangements need to be made to get the kits to families in another fashion, we will do our best to accommodate and coordinate with you. *Camp Tiger counselors cannot be responsible for delivering camp supplies to individual homes. Guardians are responsible for seeing that camper supplies are picked up on time.*

****Note: Every camper, regardless of in-person or virtual, will be able to take home a camper activity kit.****

Camp Dates

Camp will take place from **May 22nd – 26th, 2023.** Time specifications for the week will be provided upon your camper's acceptance.



Camp Eligibility

It is our top priority to make certain that every camper has a rewarding camp experience. In order to do so, we ask that you are specific and transparent when describing your child's medical history, medications, and assistance needs. This information will allow us to properly match campers and counselors. It will also allow us to make any necessary accommodations prior to the start of camp.

Due to the limited availability of spots, campers must be between the ages of 6-15 **at the time of camp**. All campers are required be up to date on their immunizations, **no exceptions**. In terms of COVID-19 vaccinations:

- **All campers participating in the in-person camp format must have had their primary series of 2 vaccinations for COVID-19**

Immunization requirements are based on CDC guidelines. For any further questions regarding COVID-19 vaccination requirements, please contact Dr. Kyle Fulton (gfulto@lsuhsc.edu) or Dr. Cathy Lazarus (claza1@lsuhsc.edu).

Due to capacity restrictions, we can only accommodate a certain number of campers for the in-person format, but we will be able to accept all other campers into the virtual format of camp. For that reason, **applications will not be accepted past the deadline on April 16th**.

COVID-19 Safety Procedures

Note: The entire Camp Tiger Counselor Staff will be fully vaccinated (including booster shot) by the time of camp.

Mask-wearing and Social Distancing

Camp Tiger will follow current state and local masking recommendations at the time of camp. This may require all counselors, campers, and staff members to wear a mask **at all times**. We are also breaking into smaller groups to be able to enforce social distancing guidelines.

Contact Tracing and Notification

Though we are taking as many precautions as possible, if a camper is exposed to the COVID-19 virus and/or is experiencing any symptoms associated with the virus, we ask that they stay home and notify Camp Tiger staff immediately so that we can set them up for virtual camp for the remainder of the week. Campers who are asymptomatic but have tested positive for SARS-CoV-2 infection should isolate and follow CDC-recommended steps & contact their pediatrician for further concerns.

Sanitation

Camp Tiger staff will ensure that equipment is thoroughly cleaned between sessions and at the end of each day. We will follow the [CDC guidelines](#) on cleaning and disinfecting public spaces.



In-Person Camp Schedule

Schedule

During the first four days of Camp, we start and end each day at LSU-HSC New Orleans campus and travel to various locations to experience that day's activity. On the last day of camp (Friday), we will have our "Camp Carnival" at the LSU-HSC Dental Campus.

A more detailed schedule will be sent upon acceptance into Camp.

Drop-off and Pick-up Times

We will provide specific daily schedules when your camper is accepted for in-person camp.

Virtual Camp Information and Curriculum

Overview

We have developed a virtual camp experience for campers who are unable to attend in person. The virtual format of camp will also be used for individuals who become exposed or test positive during the week of camp. We will be providing an "Activity Box" with supplies, toys, props, and materials to participate in each of the virtual activities throughout the week. The sessions will be conducted via Zoom with trained counselors similar to the in-person version of Camp Tiger.

Schedule

Each day will start with a motivational and energetic opening for half an hour, one or two activities including crafts, talent shows, virtual tours, snack-tivities, and performances. More details regarding specific activities will be released closer to the week of camp.

Requirements

A working web camera device (laptop, phone, tablet, etc.) and access to a Wi-Fi internet connection will be required to participate in the virtual program. LSUHSC will be unable to provide computers to campers.

Depending on each camper's situation, we will either group siblings or relatives together in small-group breakout sessions or use multiple devices to separate them. This is to be communicated after acceptance into the programs for households that this may affect.



Procedure for Application

Prior to filling out the attached application we ask that you thoroughly read the informational packet. If you have any additional questions, please see the Camp Tiger Staff Contact Information below.

Fill the application out to your best ability. Please do not leave any questions blank.

Return the completed application via:

- Email to lkron@lsuhsc.edu (preferred method)
- Mail to:

Andante Hebert, Office of Student Affairs
LSUHSC-NO School of Medicine
2020 Gravier Street, 7th Floor
New Orleans, LA 70112

All Applications must be received no later than **April 16th, 2023**. Late applications will not be accepted.

Camp Tiger Staff Contact Information

Coby Menard, Camp Tiger Director

Phone: 337-446-3022

Email: cmenar@lsuhsc.edu

Lisa Kam, Camp Tiger Virtual Coordinator

Phone: 504-568-5700

Email: lkam@lsuhsc.edu

Landon Krone, Camp Tiger Secretary

Phone: 225-910-0769

Email: lkron@lsuhsc.edu

Kyle Fulton, MD, Medical Director

Phone: 504-894-5271

Email: gfulto@lsuhsc.edu





Application for Camp Tiger 2023

Return Application (including Immunization Records) by April 16th, 2023 to:

CAMP TIGER 2023 APPLICATION

c/o Andante Hebert

Office of Student Affairs

LSU School of Medicine

2020 Gravier Street, 7th Floor

New Orleans, LA 70112

Fax: 504-568-8534

lkron@lsuhsc.edu

DATE: _____

GENERAL INFORMATION: *To be completed by parent or guardian*

Camper's Name: _____

Age: _____ Sex: _____ Weight: _____ T-Shirt Size(circle): YS YM YL YXL AS AM AL AXL

Has the child attended Camp Tiger before? _____

If yes, what year(s) _____

Can you name your child's previous counselors? _____

Camp Format Preference

What is your format preference for camp?

- In-person
- Virtual
- No preference

Please share below your reasons for your preference (i.e. if it is due to a health issue or traveling issue).

(Disclaimer: Please keep in mind that your child may be accepted to virtual camp even if you selected in-person as your preference. We are asking for preferences to ensure that campers who wish to only participate in virtual camp due to health (or any other) reasons can be placed into that format.)

If you have indicated an in-person format as your preference, would you be willing and able to take part in a virtual camp experience from home if your child is not accepted into in-person camp, camp is unable to happen in-person, or your child experiences symptoms/is exposed to COVID-19 during the week of camp?

- Yes
- No

(Note: To take part in virtual camp, we ask that you have access to a home computer and wi-fi).



TECHNOLOGY INFORMATION:

Please fill this section out **regardless of which camp format** you have selected in case your child does not get accepted to in-person camp or if your child is exposed or tests positive during the week of camp and must move to virtual camp. This information will allow us to prepare for any potential technological malfunctions.

*LSUHSC will be unable to provide computers to campers. *

My camper will have access to a web-camera.

- Yes No

My camper will have access to a microphone.

- Yes No

My camper will have access to a speaker or headphones.

- Yes No

My camper will have daily access to a stable Wi-Fi connection.

- Yes No

Please select the device that your camper will primarily use throughout the duration of camp:

- Tablet (iOS or Android) Desktop Computer
 Laptop Computer Other _____

My child may require closed-captioning or other visual aids.

- Yes
 No

If yes, please indicate what your child may require: _____

Camper Information

Diagnosis: What is your child's primary & other medical diagnosis?

Please indicate any special problems that might affect your child at camp:

Can your child tolerate being outdoors for more than two hours at a time? YES NO

If he/she CANNOT, please explain:

Eating Habits:

Needs Assistance: YES NO Special Diet: YES NO

Please describe any special dietary needs/eating habits:

Does he/she have a wheelchair? YES NO

If so, is it necessary during travel? To what extent is it used (always, sometimes, etc.)?

Does he/she have a special lift? YES NO

Specify: _____

Does he/she wear a brace or other medical equipment? YES NO

If so, when should the brace or other medical equipment be worn?

Does he/she wear diapers or need assistance with the bathroom?



Any other assistance needed:

HEALTH INFORMATION: *Please check all that apply*

Headaches: _____

Sinus Infections: _____

Asthma: _____

Rashes: _____

Indigestion: _____

Fainting: _____

Seizures: _____

Seasonal Allergies: _____

Other (Specify) _____

Please list **ALL allergies** your child has:

Food: _____

Drink: _____

Medications: _____

Outdoors (pollen, bee stings, etc.): _____

Other: _____

Preferred Emergency Room: _____

*Please list any recent respiratory ailments your child has had, such as a cold, the flu, bronchitis, pneumonia, asthma, etc.: _____

Please list any other medical problems:

Does he/she take **any** medication, even if he/she will not take it at camp? YES NO

If yes, please list medications (with dosage and frequency): *can attach a separate list if needed*

Most recent COVID vaccine date:

SPECIFIC INFORMATION: *To be completed by parent or guardian.*

Even if your child has attended Camp Tiger in previous years, all information must be filled out completely.

Please Circle Your Choices

Personality: What types of personality does he/she exhibit?

Easy-going Calm Cheerful Alert Sensitive Strong-willed Restless Moody Shy

Additional comments:

Does he/she have any fears we should know about? (animals, amusement park rides, etc.):

How does your child communicate? Verbal Signs Non-verbal:

Specify _____



How would you rate his/her social skills? Good Fair Poor

Does your child speak/understand English? Yes No

If no, what is their primary language and/ or language spoken at home?

CAMPER INTERESTS AND PREFERENCES: Important for Camper/Counselor Relationships

Please answer the questions below so we can personalize your Camper's experience!

1. What does your camper enjoy doing with their spare time?

2. What are your campers' favorite sports, activities, hobbies, etc.?

3. What TV show or movie character(s) does your camper like?

4. Does your camper enjoy performing arts (dance, music, acting)?

5. List any activities or topics that your camper does **not** enjoy.

6. What is your camper's favorite rainy-day activity? (ex. Movies, board games, painting, etc.)

7. What does your camper's ideal day look like? (Include activities, locations, meals, etc.)

8. List three adjectives that describe your camper.

9. Describe a unique fact about your camper.

10. Please provide any additional information about your camper's interests and hobbies that may aid us when selecting camper/counselor pairs.



Camp Tiger Food Preference

Please take the time to answer the following questions, which will allow Camp Tiger to provide the best food options for your child. (Please note that this survey does not affect your child's application in any way).

Does your child have any food allergies (such as peanut, egg, wheat, fish, milk, etc.) or dietary restrictions?

Y N

If yes, please list all that apply (allergy, reaction, and treatment needed):

If the camp were to have sandwiches, which would your child prefer? *(Please circle one)*

Turkey

Ham

Veggie

Peanut butter and Jelly

If the camp were to have a hotdog/ hamburger day, which would your child prefer? *(Please circle one)*

Hamburger

Hotdog

Neither

Please mark an 'X' by any of the following foods that your child WILL NOT eat

___ Sandwich Variety

___ Chicken Tenders

___ Fried Catfish

___ Macaroni & Cheese

___ Hamburger/ Hotdog

___ Pizza

Does your child plan to bring his/ her own lunch? Y N

What snacks are your child's favorite?



Parent/Guardian Information

Primary Parent/Guardian's Name: _____

Primary Mailing Address (City, State, Zip):

*Daytime Phone Number: _____ Type: HOME WORK CELL

*Other Phone Number: _____ Type: HOME WORK CELL

*E-mail Address: _____

Second Parent/Guardian's Name: _____

Primary Mailing Address (if different) (City, State, Zip):

*Daytime Phone Number: _____ Type: HOME WORK CELL

*Other Phone Number: _____ Type: HOME WORK CELL

*E-mail Address: _____

Emergency Contact: *If I cannot be reached in an EMERGENCY, the camp counselors and director may contact:*

Emergency Contact: _____

Relationship to Camper: _____

Primary Mailing Address (City, State, Zip):

*Phone Number: _____ Type: HOME WORK CELL

*E-mail Address: _____

Name of Family Physician: _____

Address: _____

Phone: _____

In the event that we need to hospitalize your child, the following information will expedite the admit process. Please fill out to the best of your ability or attach a copy of the child's insurance card. This information will be completely confidential, accessible only by the Camp Director and the Faculty Sponsor to be used on an emergency basis.

Date of Birth: _____

Health Insurance Provider: _____

Name of Policy Holder: _____

Group ID Number: _____ Policy number: _____



Parent or Guardian Authorization and Waiver

The given health history is correct, to the extent of my knowledge, and I give my full consent for applicant, _____, to attend Camp Tiger - LSUHSC Summer Camp for Special Needs Children and to engage in all planned camp activities, except as noted by me and the examining physician.

In the event that I cannot be reached in an EMERGENCY, I hereby give my permission to the physician selected by the camp director to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery for my child as named above.

Print Guardian Name: _____

Signature of Guardian: _____

Date: _____

*****Please attach an up-to-date Immunization Record showing that your child is current on all recommended immunizations including the COVID-19 vaccination. You MUST include your full immunization record regardless of if your child has participated in camp before. *****





CONSENT FOR PHOTOGRAPHY, INTERVIEW, RECORDING

I, _____, hereby grant permission to LSU Health Sciences Center New Orleans to photograph, video tape, record, or interview me, or in the case of a minor, my child _____, for print, broadcast, or social media use, for use in LSU Health Sciences Center New Orleans publications, video or audio tapes, brochures, website, or for use in teaching by LSU Health Sciences Center New Orleans faculty.

I hereby transfer to LSU Health Sciences Center New Orleans all rights and claims I have, or in the future may acquire, with respect to such photographs, video recordings, audio recordings, and/or written materials, agreeing that same shall be the sole and absolute property of LSU Health Sciences Center New Orleans. I hereby relieve and release LSU Health Sciences Center New Orleans from any and all claims whatsoever, and for any and all kinds of remuneration for use of such materials.

Signature _____ Date _____

Address: _____

BE SURE THAT YOU HAVE INCLUDED ALL FIVE PAGES OF THE CAMPER APPLICATION (NUMBERED 6-13) ALONG WITH UP TO DATE IMMUNIZATION RECORDS BY APRIL 16th, 2023 AT 11:59 PM.

****In order for an application to be complete, it MUST include:****

- Completed application (*pages 6 to 12*)
 - Photo release form (*page 13*)
 - Up-to-date immunization record

Incomplete applications will not be considered.

**CAMP
TIGER**

