



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

April 12, 2017

Dear *Healthcare Provider*,

As you may know, YMCA Camp Hough has provided resident camping opportunities for young individuals in your community, for over 100 years.

One of our most important responsibilities at camp is to keep our participants safe, and this cannot be done without a Healthcare Provider on property at all times when we have campers.

We are currently looking for RNs, NPs, or MDs that are interested in working for one or two weeks this summer to help in the success of our summer camp season. I have listed the dates below:

|                        |                          |
|------------------------|--------------------------|
| Week 1: June 25-July 1 | Week 5: July 23-29       |
| Week 2: July 2-8       | Week 6: July 30-August 5 |
| Week 3: July 9-15      | Week 7: August 6-12      |
| Week 4: July 16-22     |                          |

The main responsibility of our Healthcare Provider will be the distribution of prescribed medications and over the counter medications as needed. Each camper is required to have the proper health forms on file in order to make this process as easy as possible. If any medical issues arise when camp is in session, it will be the Healthcare Provider's responsibility to assess the situation and proceed to the best of their ability.

Our counselors are trained to provide a safe program and supervise their campers at all times to avoid emergencies. We always encourage our Healthcare Provider to visit program areas and participate when it fits into the schedule.

And you can choose how to be compensated! For just one week, you can either receive \$400, or sponsor a child of your choosing to attend one week of camp. This can be your own child, or a deserving member of your community! If you or someone you know is interested in being a part of the summer of a lifetime, please complete the accompanying paperwork.

If you have any questions, please contact me using the information provided below.

Yours in Camping,

Laura Pasternak  
Camp Director  
585-813-2649  
lpasternak@glowymca.org

## GLOW YMCA

### Genesee County

209 East Main Street  
Batavia, NY 14020  
Phone 585.344.1664  
Fax 585.344.1666  
www.geneseeymca.org

### Livingston County

209 East Main Street  
Batavia, NY 14020  
Phone 585.344.1664  
Fax 585.344.1666  
www.livcoymca.org

### Orleans County

306 Pearl Street  
Medina, NY 14103  
Phone 585.798.2040  
Fax 585.798.4257  
www.orcoymca.org

### Wyoming County

115 Linwood Avenue  
Warsaw, NY 14569  
Phone 585.786.2880  
Fax 585.786.2535  
www.wycoymca.org

### Camp Hough

4163 West Lake Road  
Silver Springs, NY 14550  
Phone 585.237.5160  
Fax 585.237.2754  
www.campough.org

**Applicant's Name:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Healthcare Qualifications:**

\_\_\_\_\_

**Healthcare License Number:** \_\_\_\_\_

**Previous Experience with Children:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Previous Experience at a Camp:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Number of Weeks you are interested in (up to 4, no more than 2 consecutively):** \_\_\_\_\_

**List Weeks 1-7, 1 being most preferred week, or NA next to any weeks you are not available:**

\_\_\_ Week 1

\_\_\_ Week 5

\_\_\_ Week 2

\_\_\_ Week 6

\_\_\_ Week 3

\_\_\_ Week 7

\_\_\_ Week 4

**Applicant's Signature:** \_\_\_\_\_

*This information must accompany a GLOW YMCA Employment Application.*