



Summer Camp Application

Anyone served by the Athens County Board of Developmental Disabilities may apply for participation in the 2026 Ray's Days! Summer Camp. The Summer Camp welcomes children ages 7 to young adults up to age 21 and will run June 15-July 10. Holidays during Camp are Juneteenth, Thursday, June 19th and Independence Day, Friday, July 3rd.

Child's Name:	
Gender:	Date of Birth:
Age during Camp	
School:	Grade

1st Parent/Guardian - Primary Contact (This is the person the Camp will primarily communicate with)	
First Name:	Last Name:
Address:	
City, State, Zip:	Cell Phone:
Place of Work:	Work Phone:
<i>Email: An active, current email that you regularly check is required for communication with camp.</i>	

2nd Parent/Guardian (This person will be contacted when Primary Contact is not available)	
First Name:	Last Name:
Address: <input type="checkbox"/> Check if address is same as 1st parent/guardian	
City, State, Zip:	Cell Phone:
Place of Work:	Work Phone:
<i>Email: An active, current email that you regularly check is required for communication with camp.</i>	

Is this child in foster care? Yes No

Are you the legal guardian? Yes No

What is your relationship to the Camper?

Please list the first and last names of any siblings that are also applying for camp.

A separate application is required for each child.

Name

Age

Name

Age

Racial or Ethnic Identity of your child: (Please check all that apply)

- Asian/Pacific Islander
- Black/African American
- Hispanic/Latino
- Native American/American Indian/Alaskan Native
- White/Caucasian
- Other
- Prefer not to answer

Please explain in detail the disability of your child (add additional pages if needed):

Does your child have a current IEP/ISP/504/Care Plan/Behavior Plan in place?

- Yes No

If yes, please submit the current Plan with your application.

(If your child is a student at Beacon School, we already have it.)

Will your child require medications to be administered during the Camp day?

- Yes No

Please describe any supportive devices your child uses including glasses, contact lenses, communication devices and any other adaptive equipment needed.

Note: Electronic devices such as (but not limited to) cell phones, iPads, games, etc. are not permitted at camp as the camp is a social development, community experience. If your child requires a device as an adaptation for their disability, please indicate this above with how counselors are to help them use this to facilitate the community experience. If there is a need to communicate with your child during the camp day, please do so through the camp staff.

Describe any additional staff support your child will need to participate in the activities of camp. This includes but is not limited to communication needs, restroom assistance, mobility and any safety issues the camp staff need to be aware of.

Ray's Days! Summer Camp is an opportunity for children and teens with disability to participate in a summer camp. Camp may not always be a good fit for every child or teen, depending on their interests, health and safety needs, and other unique needs. If your child is accepted into the camp, we may require that your child's Direct Service Provider (DSP) be part of your child's camp experience in order to keep them and other campers safe. The DSP (or another support person such as a family member) will be required to come to some aspects of training week.

Would your child benefit from having their DSP (or another person) support them through camp?

Yes No

Will your child be attending the entire camp? Yes No

If not, when will your child not be present?

Meals

Ray's Days! Summer Camp provides a nutritious breakfast and lunch each day to our campers. We do our best to accommodate special dietary needs. Please complete the following so we can best serve your child.

Does your child require assistance during meals? Yes No

Please explain:

Does your child require pureed or texture altered food? Yes No

Please explain:

Does your child have any food allergies or special dietary accommodations? Yes No

Please explain:

Please consider supplying food for your child if the camp meals are not meeting your child's dietary needs.

Some of the food for the Summer Camp is provided by the Regional Food Bank through the USDA Summer Food Service Program. There are certain reporting guidelines in place for this. May we use your child's first name when we report? If not, we will leave the name line blank but still indicate the meals your child participated in.

Yes, you may use my child's first name.

No, please leave my child's name off the list.

Camp Teams

Ray's Days! Summer Camp is made up of 6 Camp Teams, with a maximum number of 8 campers on each team (48 campers total for the camp). This year we will be using the constellations whose bright star make up the Summer and Winter Triangles:

2026 Teams

Ages 7-8	Team Little Dog (Canis Minor)
Ages 8-10	Team Big Dog (Canis Major)
Ages 10-12	Team Orion (The Hunter)
Teen Girls	Team Cygnus (The Swan)
Teens Boys	Team Aquila (The Eagle)
Teen Mixed	Team Lyra (The Lyre)

Camper's age is one guideline used to place a camper on a team. The information you provide about your child helps us to make the final decision as to camp team placement.

Each Camper will receive a Camp T-Shirt reflecting their Camp Team. T-Shirts are kept at Camp until the end of Camp. T-Shirts may be worn anytime, but are required during Field Trips for safety and identification purposes.

T-Shirt Size: YS YM YL AS
 AM AL AXL AXXL AXXXL

Does your child require a swim diaper? Yes No

If YES, what size? Youth S M L Adult S M L

Transportation

We are making a change to how we provide transportation for camp.

Due to staffing limitations, transportation for summer camp is set up for a common location pick up and drop off. The exception to this are those using wheel chairs. For the most part, we will not be providing transportation to and from camper's home. We will set up a location that is near the home for bus transportation.

My child will NOT need transportation provided by ACBDD. I will transport my child to and from the Summer Camp. Arrival time for Camp is 8:10. Pick-up time after camp is 2:10.

I request transportation for my child to be provided by ACBDD.

Morning transportation. Address:

Afternoon transportation. Address:

The address is requested only for the purpose of identifying a nearby location for picking up several campers. We will not be picking up or dropping off your child at your home.

Are there any special accommodations needed for your child? Ex. Wheelchair, harness, etc.:

Field Trips

Ray's Days! Summer Camp will include one field trip for teens and one field trip for younger camp teams each week of camp. We will not be doing any all-camp field trips. The dates for these are as follows:

Tuesday Teen Field Trips

June 16
June 23
June 30
July 7

Thursday Youngers Field Trips

June 18
June 25
July 2
July 9

If your child is at Camp on the day of the Field Trip, they will be participating in the Field Trip.

Your child is welcome to participate in any Field Trip with their group, but is not required to participate in any given Field Trip. If you do not want your child to participate in the Field Trip scheduled for a particular day, you will need to keep your child home for the day.

- Yes, My child has permission to attend field trips and be transported for these.
- Yes, but my child will miss the field trip on these days:
- No, I will keep my child home on field trip days.

Camp Acceptance - Week of May 11th

It is our desire to accept all those who apply, though we acknowledge our limitations in being able to accept all applicants. Camp may not always be a good fit for every child or teen, depending on their interests, health and safety needs, and other unique needs. **Completion of this application does not guarantee a spot in Ray's Days! Summer Camp.** The information you provide will enable us to assess whether we can safely include your child in the Camp and its activities. There are several factors that we consider when deciding who will be participating in the Camp:

- Can we keep this child safe considering their disabilities and the disabilities of other Campers?
- What is the child's level of interest in camp?
- How many Counselors do we have and do we have an adequate Counselor to Camper ratio?
- How did the Camper do in last year's Camp?
- Does the Camper need support from Direct Service Providers or family in addition to camp counselors in order to participate safely in camp.
- Are there other factors we need to consider?

It is our hope to engage each Camper with their Counselors in fun and safe ways. We will inform you as soon as possible or by the week of May 11th.

Are there any other considerations you would like us to keep in mind about your child for this year's Camp?

Acknowledgment and Release

As parent/guardian of this child, I acknowledge that the above information is correct and my child has my permission to take part in Ray's Days! Summer Camp. By taking part in this Summer Camp, I agree to allow the staff to discuss my child's progress with his/her school to better meet my child's needs. I also give permission for the release of my child's permanent file by his/her school for Summer Camp planning and delivery. I agree to allow my child to be evaluated to determine the program's effectiveness. I understand that this program will never use an individual child's name on any document to be published without my expressed written consent as required by law. I release and agree to hold Ray's Days! Summer Camp, Athens County Board of Developmental Disabilities, its officials, and its employees harmless from all liability for damages or injury resulting directly or indirectly from this authorization.

Parent/Guardian Signature

Date

I give my permission for the Athens County Board of Developmental Disabilities to use my child's name and/or pictures in magazines, newspapers, social media, and other communications.

Yes No

I also give permission for the use of my child's photo in the websites and social media of Presenters at Ray's Days and at Field Trip sites. Yes No

Camper Applications are due by April 24, 2026 and are considered on a first come, first served basis. However, an early application does not guarantee acceptance into the Camp. Completed applications can be scanned and emailed to Camp Director Paul Richard at prichard@athenscbdd.org. The application may also be brought to or mailed to the ACBDD/Beacon School at 801 W. Union Street, Athens, Ohio 45701.

The Camp Application helps the Camp Staff to decide who can safely participate in the Camp. It provides initial information to make this determination.

Parents/Guardians of all children accepted into the Camp will receive a Welcome Packet. This provides us with the detailed information we need to keep your child safe during camp. Some of the information we are requesting in the Welcome Packet is a duplication of what is asked for in the Camp Application. As we go into the camp, we want to make sure we have the most current and accurate information available for the health, safety and well-being of your child. The Welcome Packet consists of:

- The Family Camp Handbook
- Permission Forms (Due back by May 22. Accepted Campers who do not turn in Permission Forms will not be able to attend Camp.)
- Summer Calendar

