

SUPER SATURDAYS



BUDDY INFORMATION

Super Saturdays is a respite program being provided by Catholic Charities Camp I Am Special. We provide 5 hours of respite care, a snack, a craft, tons of fun, and medication administration (if needed) for Campers. Parents and caregivers can use the time to relax or do anything they have been wanting to get done while their Camper is having great fun. Buddies will assist a Camper with one-on-one companionship for the day, building a friendship and assisting them in any way needed while always supported by Staff.

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Super Saturdays will be held at the Camp St. Johns Social Hall. We will have games, activities, crafts, and outside playtime, weather permitting. The Buddies' day starts at 8:30am and ends at 2:30pm. This will be a great time for Campers to make friends, practice those social skills, and have fun at our favorite place on earth!

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There is no fee to Buddy but please bring you lunch if you do not want pizza. You will receive 6 volunteer hours, so if your school requires a certain verification form to be used, please bring it with you. If there is a special diet concern, please also pack an extra snack.

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Please submit a Super Saturday Application and 2017 Health History Form to the Camp Office. If you have already submitted the health history form for summer 2017, no need to redo. And let us know if you have any questions.

Camp I Am Special ★235 Marywood Drive, St. Johns, FL 32259★904.230.7447

www.campiamspecial.com

SUPER SATURDAYS BUDDY APPLICATION

LEGAL NAME: _____ LIKES TO BE CALLED: _____

SUPER SATURDAY AVAILABILITY: February 3, 2018 April 7, 2018

AGE: ____ BIRTHDATE: _____ 2017 GRADE: ____ SCHOOL: _____

HOBBIES: _____

EXPERIENCE WITH PEOPLE WITH DISABILITIES: _____

EXPERIENCE AT CAMP I AM SPECIAL: _____

WHY WOULD YOU LIKE TO BE A SUPER SATURDAY BUDDY? _____

ANYTHING YOU ARE NOT COMFORTABLE WITH IN CARING FOR SOMEONE WITH A DISABILITY? _____

EMERGENCY CONTACT INFORMATION:

CONTACT	PRIMARY	SECONDARY (non-parent)
NAME:		
RELATIONSHIP		
PHONE NUMBER		

MEDICATIONS YOU WILL NEED TO TAKE AT SUPER SATURDAY: _____

FOOD OR OTHER ALLERGIES: _____

YOUR BEST CONTACT INFORMATION:

EMAIL ADDRESS: _____

YOUR PHONE NUMBER: _____

PARENT'S PHONE NUMBER: _____

BEST WAY TO CONTACT YOU: EMAIL YOUR PHONE PARENT'S PHONE

PLEASE RETURN THIS FORM TO THE CAMP OFFICE BY MAIL OR EMAIL

235 MARYWOOD DR•ST. JOHNS, FL 32259•WWW.CAMPIAMSPECIAL@CCBJAX.ORG