

Camp MAGIK – Fall 2019 Announcement

--A Special Camp for Kids ages 7-18 Who Have Lost a Parent, Sibling or Other Close Loved One--

www.campmagik.org

****October 4-6, Union Point, Georgia**
(1 hr+ east of Downtown Atlanta)**

Camp MAGIK is pleased to announce its 2019 fall schedule of healing camps for children and teens. Camp MAGIK (Mainly About Grief In Kids) serves children and teens who have experienced the death of a parent, sibling or other close family member within the past three years. Camp MAGIK will provide an opportunity for children and teens to meet, talk, and process their grief with professional grief counselors. Time will also be spent on play and fun as a way to help the children heal from the experience of death in the family. Activities may include archery, canoeing, a ropes course, nature hikes, treasure hunts, hay rides, campfires, story-telling, and a talent show. Each camp will be divided into two groups, one for ages 7 - 11, and one for ages 12 - 18.

Camp MAGIK sessions are **free of charge for the children who attend**. Our Union Point camp is made possible through a generous donation from Jim McDonald in memory of his mother, Helen Agnes McDonald. Applications can be found on our website: www.campmagik.org (under the "join us" tab) and need to be postmarked and sent to **Camp MAGIK, 3377 Ridgewood Road, GA 30327** or faxed to the office at **404.355.6631 by Wednesday, September 25, 2019**.

Due to the high demand for our camps, we cannot accept repeat campers.

Parents and guardians – There are three (3) options for parents/guardians:

- A **retreat** for parents/guardians which will be held at the same time as the children's camp (October 4-6). The retreat will be facilitated by mental health professionals and will provide an opportunity for adults to process their own grief and be with others who have also had a significant loss. Parents/guardians will stay at a location close to but separate from their children. Activities will include opportunities to relax, talk, provide and receive support, and learn more about grief and loss in a beautiful and peaceful setting. The registration fee for the retreat is \$25.00, which includes room, meals, and all activities. **Space for this option is limited. Your children attend FREE.**
- For parents/guardians with more limited time, a special workshop will be held on Sunday October 6 from 10:30am to 2:30pm. This program will help you understand more about your child's grief and will suggest healthy ways for your whole family to manage and cope with your loss. Activities will include a classroom lecture, a cook-out, and small group discussion. This option is **free** of charge. All events except the cook-out are adults only.
- Parents/guardians who do not have the time to participate in any of the two options above can still have their children attend camp. Drop your children off at the designated drop-off time on Friday and pick up at the designated pick-up time on Sunday. Again, children attend **FREE OF CHARGE**.

Camp Location:

- The Union Point camp will be held at the Swamp, located in Union Point, Georgia, approximately an hour east of Downtown Atlanta.

Free transportation based on need

Specific Camp MAGIK details (maps, directions, what to bring, etc.) will be mailed to all accepted camp participants approximately two weeks before camp. If you have any questions, please call Dr. **Rene Searles McClatchey at 404.790.0140 or email campmagik@gmail.com**. We hope to see you at Camp MAGIK!

CAMP MAGIK & CAMP ERIN

Registration Application

3377 Ridgewood Road, NW
Atlanta, Georgia 30327
Phone: 404.790.0140 Fax: 404.355.6631

DOB: _____ Sex: M ___ F ___ Grade _____
Camper's Full Name (please print. Also please underline name your child prefers to be called)

Name of Parents/Guardian: _____

Parent/Guardian will attend weekend retreat: Y N Parent/Guardian will attend Sunday workshop only Y N

Address: _____

City _____ State _____ Zip _____ County _____

Phone #: Home _____ Cell _____ Work _____

Email Address: _____ Referral Source: _____

EMERGENCY CONTACT:

Name: _____ Phone: _____ Relationship _____

Person Who Died: _____ Date of Death: _____
(relationship to camper)

Circumstance of Death (please be specific): _____

A majority of the activities at the camp will take place outdoors. Sunscreen will be provided for the children by the camp. If your child has any allergies or allergic reactions, please list them below:

Allergy: _____ Reaction(s) _____

Child's Physician: _____ Phone: _____

Medication(s): _____ Dose _____ Time _____

_____ Dose _____ Time _____

_____ Dose _____ Time _____

Please list any other medical condition or information that would be helpful for us to know about your child

NOTE: All medication must be given to the Camp Nurse at Camp Check-in Time.

All medication must be in prescription containers and be clearly marked with the above information.

I give permission for my child to attend Camp MAGIK and for the Camp Nurse to administer prescriptions and/or first aid to my child. I also give my permission to the physician selected by the Camp Director, in cooperation with the Camp Nurse, to secure proper treatment for my child in case of an emergency.

Signature of Parent/Guardian

Date Signed

Camp Sites 2019: Hampton April 12-14 _____ Cartersville May 3-5 _____ Union Point October 4-6 _____