Camp MAGIK and Camp Erin – 2020 Spring Announcement

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

www.campmagik.org

**April 24-26 White, Georgia Deadline to apply April 15, 2020 **May 15-17 Hampton, Georgia Deadline to apply May 6, 2020

Camp MAGIK is pleased to announce its 2020 spring schedule of healing camps for children and teens. Camp MAGIK (Mainly About Grief In Kids) serves children 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 - 17. There will be two camp sessions held this spring at dates as noted above. Please pick the one session best suited to you and note this on your application form in the space provided. Application forms are available at www.campmagik.org under the "join us" tab.

Camp MAGIK/Camp Erin sessions are **FREE OF CHARGE** for attending children. Camp Erin, our session in Hampton, is sponsored by Eluna. Our Cartersville camp is sponsored by generous support from private and corporate donations.

Applications need to be postmarked and sent to Camp MAGIK, 3377 Ridgewood Road, Atlanta, GA 30327 or faxed to the office at 404.355.6631 by the deadline dates. Due to the high demand for this camp, we cannot accept repeat campers.

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

- We are offering a special **Retreat** for parents/guardians, which will be held at the same time as the children's camp (April 24-26; May 15-17). The retreat will be facilitated by professional counselors and will provide an opportunity for adults to process their own grief and be with others who have also had a significant loss through death. Parents/guardians will stay on the same campus 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. **Registration fee for the adult retreat (children are free) is \$25.00 which includes room, meals and all activities. Space for this option is limited. Scholarships are available contact us for information.**
- For parents/guardians with more limited time, a special workshop will be held on Sunday April 26 and Sunday May 17 from 10:30am to 2:00pm. 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 and a cook-out. 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 either 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.

Camp Locations:

- The Cherokee Retreat Center is located in White, Georgia, approximately 40 minutes north of Atlanta. Free transportation to this camp is provided from Dalton, GA, Rome, GA, and Atlanta, GA.
- **The Calvin Center** is located in Hampton, Georgia, approximately 30 minutes south of downtown Atlanta. Free transportation provided from Atlanta, GA and north/northeast GA.

Specific Camp MAGIK/Camp Erin details (directions, what to bring, etc.) will be mailed to all camp participants **upon acceptance to camp**. For questions, please call Rene Searles McClatchey at 404.790.0140 or email campmagik@gmail.com. We hope to see you at Camp MAGIK/Erin!

CAMP MAGIK & CAMP ERIN

Registration Application

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

Camper's Full Name (please	e print. Also please underline	Sex: MFDOB: name your child prefers to b		
Name of Parents/Guardian:				
	d weekend retreat: Yes No d Sunday workshop only Yes	No		
Address:				
City	StateZip	County	J	
Phone #: Home	Cell	Work		
Email Address:				
EMERGENCY CONTACT	:			
Name:	Phone:	Relationship:		
Person Who Died:		Date of Death:		
Circumstance of Death (plea	ase be specific) :			
-		Referra		
	at the camp will take place out any allergies or allergic reaction	doors. Sunscreen will be p	rovided for the children by	
	Reaction			
		Dose	Time	
	lical condition or information t			
	be in prescription containers and		bove information.	
aid to my child. I also give my	to attend Camp MAGIK and for permission to the physician select ant for my child in case of an em	ted by the Camp Director, in		
Signature of Parent/Guardian			Date Signed	