



**Michigan Capital Celiac/DH Group
Chapter 43 CSA/USA**

PO Box 23222 Lansing Michigan 48909

<http://micapitalceliacs.atspace.com>

glutenfreemichigankidscamp@yahoo.com

517 505 1143 or 517 349-0294

**GLUTEN FREE CAMP AUGUST 15-20 2010
YMCA CAMP Manitou Lin Middleville Michigan**

The Michigan Capital Celiac/DH Group is sponsoring a camp for children and teens at the Greater Grand Rapids YMCA Camp Manitou Lin Middleville Michigan. The cost for the week is \$450. All funds must be received by August 1.

There will be a section for children ages 7-12 and for teens 13-17. The teens will be involved with more extensive activities determined by the group and an overnight camp-out. Gluten free meals will be supervised by volunteers from the Michigan Capital Celiac/DH Group.

Scholarships are available through the Celiac Disease Foundation. Campers interested in receiving a scholarship to camp should submit a one-page essay describing why and how they feel they will benefit by going to camp without worrying about their food. Winners will be chosen by the CDF Board of Directors.

Scholarship awards may not cover the entire camp fee. Awards do not cover or support travel expenses. Celiac children who have never received a CDF scholarship to a gluten-free summer camp session before will be given priority over those who have previously received scholarships. Essays can be submitted via email: cdf@celiac.org or by mail: Celiac Disease Foundation 13251 Ventura Blvd #1 Studio City CA 91604.

These funds are made available through a national run/walk "TEAM GLUTEN FREE ." We encourage all families and teens to participate in Team Gluten Free. Register on www.teamglutenfree.org. Then you collect funds for Team Gluten Free and walk in any walk near you wearing a Team Gluten Free T shirt. More information is available on their website or by calling 775 338 0557.

Michigan Capital Celiac/DH Group will also have a limited number of scholarships available. You should also check with any Celiac Support Groups near you.

Please complete the enclosed form and send a deposit of \$75. All checks should be written out to YMCA CAMP Manitou-Lin. If an entire scholarship is given later, the check will be returned to you. You will receive a health form to be completed and additional information closer to the date of the camp. If possible, please send a picture of your child so we will be able to learn the names more rapidly. As Michigan Capital Celiac/DH Group is taking care of registrations, please send the form and check to:

Michigan Capital Celiac/DH Group
Celiac Camp
PO Box 23222
Lansing MI 48909

For any questions, please email glutenfreemichigankidscamp@yahoo.com or call 517 505 1143 or 517 349-0294.

**Application for Gluten-Free Camp YMCA Camp Manitou-Lin
Sponsored by Michigan Capital Celiac/DH Group**

PLEASE PRINT CLEARLY

NAME of CAMPER _____

PARENTS NAME(S) _____

ADDRESS _____

City State Zip _____

Phone _____ EMAIL _____

AGE _____ Gender ___Male ___Female

_____ Children's Camp _____ Teen camp

If Teen camp, please indicate which activities you are most interested in participating on an extensive basis starting with number 1 as the most desired.

___Horseback riding _____climbing
___swimming
___canoeing _____archery
___kayaking
___hiking _____other:

ALLERGIES

What happens when your child receives gluten? _____

Other food allergies _____

Other allergies _____

Any special medical problem other than Celiac Disease?

Please enclose check for deposit of \$75 written out to YMCA Camp Manitou-Lin and send to: Michigan Capital Celiac/DH Group Celiac Camp PO Box 23222 Lansing MI 48909.



**Michigan Capital Celiac/DH Group
Chapter 43 CSA/USA**

PO Box 23222 Lansing Michigan 48909

<http://micapitalceliacs.atspace.com>

glutenfreemichigankidscamp@yahoo.com

517 505 1143 or 517 349-0294

VOLUNTEERS NEEDED!

We are in need of some volunteers over 18 during camp. The camp staff supervise all the activities and there are counselors. However, volunteers over age 18 are needed to help in the cabins and at meals. We are in particular need of some male volunteers.

The camp facility is a beautiful place for relaxation. There is time during the day to relax when the children are at the activities. It is a good time to do some recreational reading. One may join in the activities as well.

For the protection of the children, the camp will need to do a criminal history check.

If you are willing to volunteer, please complete the form below and mail to:

Michigan Capital Celiac/DH Group
Celiac Camp
PO Box 23222
Lansing MI 48909

NAME _____

Address _____

City State Zip _____

Phone _____ Email _____

Any other information we should know:

I hereby grant permission to do a criminal history check.

Signature _____ Date _____