

## Residential camps Summer 2018

### What is a residential camp?

At our camps you can swim, hang out with friends, play football, go hiking, fishing and canoeing, have a go at handicrafts and lots more besides. Quite simply, it's a mix of great summer days on the beach and plenty of fun activities and adventures.

The residential camps run for 6, 7 or 8 days depending on what class you are in, and there are a number of different periods during the summer when camps take place.

Period 1	2018-06-16 – 2018-06-21	6 days for grade 4-5
Period 2	2018-06-25 – 2018-07-01	7 days for grade 5-6
Period 3	2018-07-04 – 2018-07-11	8 days for grade 6-7
Period 4	2018-07-14 – 2018-07-20	7 days for grade 7-9

The YMCA Rengen camp is located just outside Sturefors, about 20 km from Linköping. For each camp, we organise transport by bus. Some leaders travel on the bus, while others remain at the camp to greet you on your arrival. Once the camp finishes, we travel back to Linköping by bus.

We stay in small cabins and there is a larger house with rooms set aside for activities/a dining room. You will stay with other participants in cabins with 6-8 beds. The leaders also live in the house, but in separate rooms. There is always a leader on hand who you can talk to, even at night, for example, if you have trouble sleeping or need to talk about something.

Speak to an adult at home if you would like to attend a camp or want to find out more before applying.

### Residential camps

Organised by us here at Leisure and Recreation Services (Fritidsverksamheten), which is part of the Section for Resource and Support Activities (Sektionen för resurs- och stödverksamhet) at Linköping Municipality. We have been tasked with running residential camp activities by the Child and Youth Welfare Services Committee (Barn- och Ungdomsnämnden). Camps are an opportunity to provide children and young people with a safe and secure break, but they are also about community, memorable experiences and growing as a person. It can be a big step to be away from home for this period of time.

A number of youth leaders and 1-2 assistant managers work at the camp during each period. Overall responsibility for the activity rests with a manager and the operational manager.

### Travel to and from camps

People attending camps travel to and from the camp as a group by bus from Linköping.

## Confirmation of a place

If you are offered a place at a camp, you will receive a letter from us by 2018-05-04 at the latest confirming your place. You will then have about a week to accept or decline the place. NB! Registration is binding.

Cost	Period 1 6 days	Period 2 7 days	Period 3 8 days	Period 4 7 days
1st child	SEK 400	SEK 500	SEK 600	SEK 500
2nd child	SEK 300	SEK 350	SEK 400	SEK 350
3rd/4th child	SEK 200	SEK 250	SEK 300	SEK 250

## Applications (page 3-4) should be sent to:

Linköpings kommun  
Sektionen för resurs- och stödverksamhet, Koloniverksamheten  
Klostergatan 24  
581 81 Linköping

## Closing date for applications: 2018-04-06

Keep hold of pages 1-2 when applying, as it makes things easier if you want to contact us. If you have any questions or queries, please feel free to contact us.

Therése Hansson  
013-20 71 88  
[therese.a.hansson@linkoping.se](mailto:therese.a.hansson@linkoping.se)

## Information about processing personal data (Personal Data Act SFS 1988:204)

Personal data provided in the application is used by the Section for Resource and Support Activities (Sektionen för resurs- och stödverksamhet) for administrative and other purposes that are necessary to arrange matters. Data may also be processed with a view to producing statistics and in connection with the debiting of fees. You are entitled once a calendar year to receive information on processed personal data, provided you have submitted a signed written request.

The Section for Resource and Support Activities (Sektionen för resurs- och stödverksamhet) is obliged to correct inaccurate or misleading data immediately.



**Linköping**  
Där idéer blir verklighet



**UNGDOMSARENOR  
I LINKÖPING**



**Child/Young person**

Name (one application per child)	Personal ID number
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**Parent/Guardian**

Name of parent/guardian 1	Personal ID number
Street address	Postcode and town/city
Home telephone number	Mobile number
E-mail address	

Name of parent/guardian 2	Personal ID number
Street address	Postcode and town/city
Home telephone number	Mobile number
E-mail address	

**School**

Name of school	Class	Class teacher
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**Exchanging information with the child's school**

In connection with our admission procedures for the Municipality's residential camps, we may sometimes need to contact the child's school to get more information about the child's strengths, weaknesses and need to attend the camp. This means that:

"Information deemed confidential by the camp organiser may need to be passed on by the camp organiser to the school, and that information deemed confidential by the school may need to be passed on to the camp organiser."

I/we consent to the camp organiser and the child's school providing one another with information deemed confidential as part of the admission process.

Yes       No       I/we would like to know more



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**UNGDOMSARENOR  
I LINKÖPING**



**Important for us to know**

Allergy-illness-medication	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, allergy to what? Details of any illness Details of any medication	
Special diet	
<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, what?	
Can swim	metres

**Other information**


**Why have you applied for the camp?**


**Please specify the preferred camp period using the number 1=1st choice and 2=2nd choice**

Period 1	year 4-5	<input type="checkbox"/>	Period 2	year 5-6	<input type="checkbox"/>
Period 3	year 6-7	<input type="checkbox"/>	Period 4	year 7-9	<input type="checkbox"/>

Has the child/young person previously attended a camp?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, which year(s)?
Has an application been submitted for any siblings?
<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide the siblings' names and years of birth

**Signature parent/guardian**

Place and date	
Signature parent/guardian 1	Print name
Place and date	
Signature parent/guardian 2	Print name

**Invoice recipient** NB! Registration is binding. Any unused place will be charged for. In the event of illness, a doctor's certificate is required.

Name	Personal ID number
Street address	Postcode and town/city
Signature	Print name

**Closing date for applications: 2018-04-06**

**Applications should be sent to:**

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