

## Camp Overview

- Four weeks of activity-centered education
- Focus on moving more, eating better, and smiling often
- All students in grades 3 to 5 are eligible
- Sessions held at Murray Lake Elementary
- A healthy snack will be provided

## Dates and Times

- September 18th– October 9th
- Wednesdays, 3:45– 5:30



Supported through a grant partnership with the Lowell Area Community Fund



**GRAND VALLEY**  
**STATE UNIVERSITY**  
DEPARTMENT OF  
PUBLIC HEALTH

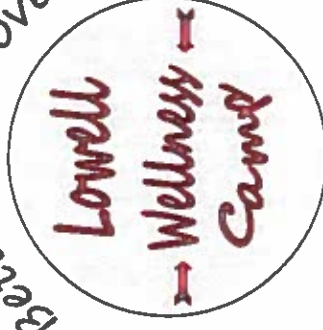


Lowell Community Wellness



Looking for a fun after school activity?

Smile Better  
Move More



Smile Often

Join us at  
**Wellness Camp!**

An innovative program at  
Murray Lake Elementary

## CONTACT US

**Jodie Seese, Program Director**  
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Text or Call  
616-446-7058

## What is Wellness Camp?

Wellness Camp is an after-school program designed to increase awareness of the whole health of your child, including nutrition, physical activity, and emotional health. There will be four (4) sessions held at Murray Lake providing hands-on fun, education, and more to enhance your child's knowledge of healthy habits.

Students will:

- Understand food groups
- Learn how sugar affects our bodies
- Discover the effects of screen time and lack of sleep
- Practice stress management techniques
- Discuss how to express feelings appropriately
- Demonstrate new ways to move more/ stay active
- Create healthy snacks and taste new foods
- Discuss ways to stay safe
- Identify how to deal with bullies and conflict

## ELIGIBILITY

Participants must be currently enrolled in 3rd– 5th grade at Murray Lake Elementary. There is no cost to participate. Enrollment is limited!

## SUPERVISION

The camp will be led by graduate students from Grand Valley State University's Public Health program.

## REGISTRATION

Participants will be enrolled on a first-come, first-served basis. Once we receive the application, we will send you a registration packet. The packet has four forms, (Documents A-D). You will need to return all four forms to the MLE office by Friday, August 30th at 3pm.

## Ethnic Background (optional):

Please circle the race/ethnicity which best applies.

- | African American (not Hispanic) |
- | Caucasian/White (not Hispanic) |
- | American Indian/Alaskan Native |
- | Asian/Pacific Islander |
- | Arab American |
- | Hispanic |
- | Multiracial |

*(The demographic information will be used to enhance our programming efforts)*

## Wellness Camp 2019 Application

Student Name \_\_\_\_\_

Student Street Address \_\_\_\_\_

I will provide pickup at 5:30

I am interested in possible transportation options

City/State/Zip code \_\_\_\_\_

Current Grade Level (2019-2020) \_\_\_\_\_

2019-2020 Teacher \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Preferred Phone \_\_\_\_\_

Email \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Your application has been received