

Help Make A Difference



"Camp taught me that anything is possible. I may need special equipment or to adapt, but there are no limits on what I can do." - Camper

Name

Company

Address

City, State & Zip

Home Phone Work Phone

Email

I would like to make a tax deductible donation to sponsor :

- | | |
|--|----------|
| <input type="checkbox"/> Athlete | \$900.00 |
| <input type="checkbox"/> Coach/Counselor | \$700.00 |
| <input type="checkbox"/> Equipment | \$350.00 |
| <input type="checkbox"/> 1 day of camp for 1 athlete | \$150.00 |
| <input type="checkbox"/> Other _____ | |

Tax ID #: 95-1230865

Please make your check payable to:

Ability First

Rashell Brobst-Co-director
PO Box 4235
Chico, CA 95927



"I have my own new sports. Now I can teach my brother and sister how to play my favorite sports"
- Camper



Ability First Youth Sports Camp

PO Box 4235 Chico, CA 95927
Phone: 916-427-2779
Fax: 916-424-6173
Email: ability1st@yahoo.com

ABILITY FIRST 23RD ANNUAL



YOUTH SPORTS CAMP JUNE 21-27, 2009

At California State University, Chico
Lassen Hall Dormitory

Sponsored By:

The Therapeutic Recreation Program of
The Department of Recreation and Parks Management at
California State University, Chico
& Boys and Girls Clubs of the North Valley
Christopher & Dana Reeve Foundation

*Ability First is committed to
enhancing the quality of life for youth with physical
disabilities through competitive athletics and
recreational programming.*

Director: Eric Snedeker, M.S., Admn. Cred., Ph D.
Co-Directors: Laura McLachlin, Ph.D., R.T.C., C.T.R.S.
Rashell Brobst, C.T.R.S.

Mailing Address:
PO Box 4235
Chico, CA 95927

For more Information Contact: Debbie Doherty
Phone: 916-427-2779
E-Mail: ability1st@yahoo.com
Website: www.abilityfirstsports.org

Camp Highlights

Who:
Athletes who have a physical disability, ranging in age from 8-17.

What:
Ability First is a wheelchair sports camp designed to provide instructional/recreational sports opportunities to youth with physical disabilities. Athletes must be minimum assist to independent and be able to actively engage in sports. Sports range from the beginner through both the junior and national levels of athletic competition. Evening recreation programs are designed to provide opportunities for leisure and social activities.

Where:
Lassen Hall Dormitory on the campus of California State University, Chico.

When:
June 21-27, 2009

Fee:
\$900.00 per athlete. This includes room and board, minimum assistance with daily living activities, a camp T-shirt, a water bottle, instruction in wheelchair sports programs, access to specialized equipment, transportation to the water ski lake and social activities.



"Camp helped me feel more confident in myself!"

-Camper



"I now know I can live on my own"

-Camper

Photos Donated By: Chuck Nadeau

Programs



"I can now be a role model to others."

-Camper

Prior to instruction, athletes' abilities will be assessed. Camp offers a wide range of sports from Basketball, Quad Rugby, Soccer, to Track & Field, Tennis, Water Sports & the Climbing Wall. Evening Programs include; Skit Night (Parent Night), Movie Night, & Dance!!!

Programs are directed toward wheelchair sports instruction for youth who have physical disabilities. Some sports may be appropriate for ambulatory athletes depending on individual ability.

Staff

Ability First Staff are comprised of professionals in the community who have years of experience and knowledge of persons with disabilities. Our Coaches are disabled athletes with training and experience in collegiate, national and international Paralympic sports. Our counselors are students from Chico State and Sacramento State Therapeutic Recreation and Adapted Physical Education Departments, and staff from the Boys & Girls Clubs of the North Valley.



"We learn more from the athletes than they do from us"

-Counselor

Application

This is your application, camp confirmation will be determined by the assessment team after receipt of your health history packet.

Returning Athlete New Athlete

Athlete's Name _____

Social Security Number _____

Age _____

Gender _____

Address _____

City, State & Zip _____

Home Phone _____

Work Phone _____

Parent/Guardian _____

E-mail Address _____

Athlete's Disability _____

Independent Min. Assistance Max. Assistance

T-shirt Sizes:

Youth S Youth M Youth L Adult S

Adult M Adult L Adult XL Adult XXL

I would like to apply for an athlete, enclosed you will find my \$900.00 camp fee. \$900.00

I would like to apply for an athlete, enclosed you will find my \$250.00 application deposit. \$250.00

Regional Center - notify your child's case worker and funding approval must be verified along with this application. \$900.00

Partial Scholarship - A letter of request must be submitted with application.

Amount Due: _____

Total Enclosed: _____

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