

**HEARTS FOR**

Hearts for Youth Inc.  
PO Box 414  
Alexandria Bay, NY 13607



**YOUTH INC.**

www.heartsforyouth.org  
hfy@alexandriacentral.org  
315-482-9971 ext.2130

**Dear Parent/Guardian,**

Hearts for Youth will be having their annual kayaking program over the summer of 2018. This program is intended for students ages 9 and above. However, students below the age of nine are still welcome to attend as long as they have guardian supervision.

Participants will be at the Alexandria Central School at 9am and go to designated lakes each week. Life jackets and kayaks will be provided. Parents are strongly encouraged to participate in this programs.

See the list of dates and locations below:

- |                   |                                    |                   |                                    |
|-------------------|------------------------------------|-------------------|------------------------------------|
| <b>Fri. 7/13:</b> | <b>Crooked Creek (Hammond)</b>     | <b>Sat. 7/14:</b> | <b>Cooked Creek (Hammond)</b>      |
| <b>Fri.7/20:</b>  | <b>Millsite Lake (Theresa)</b>     | <b>Fri. 7/27:</b> | <b>Clear Lake (Redwood)</b>        |
| <b>Sat. 7/28:</b> | <b>Paddle for Betterment</b>       | <b>Fri. 8/3:</b>  | <b>Sixberry Lake (Theresa)</b>     |
| <b>Sat. 8/4:</b>  | <b>Sixberry Lake (Theresa)</b>     | <b>Fri. 8/10:</b> | <b>Lake of the Woods (Theresa)</b> |
| <b>Sat. 8/11:</b> | <b>Lake of the Woods (Theresa)</b> | <b>Fri. 8/17:</b> | <b>Hyde Lake (Theresa)</b>         |
| <b>Fri. 8/24:</b> | <b>Swan Bay (Alex Bay)</b>         |                   |                                    |

Please include dates selects in the permission slips. Permission slips are due no later than **June 15<sup>th</sup>** to the Hearts for Youth Office. For any question, please call (315) 783-3248. We will call you with a personalized schedule for your child.

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**Kayaking Program**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Parent Email:** \_\_\_\_\_

\_\_\_\_\_ will accompany my child. (If under age 9).

**Dates selected:**

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**Parent Name (Print):** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_