



## Clarke's Amazing Race BELIEVE It, ACHIEVE It!

**SUMMER ADVENTURE: July 5-17, 2015**  
for children and teens who are deaf or hard of hearing

### Greetings!

For over 25 years, Clarke has offered a Summer Adventure Program. This is a two-week, theme-based camp for children with hearing loss who utilize hearing technology (such as hearing aids or cochlear implants) and communicate using listening and spoken language. This year we are excited about expanding our offerings to include campers age 9-17! The groups consist of the **Adventurers (age 9-13)** and the **Explorers (age 14-17)**.

Activities are led by experienced teachers of the deaf and young adult role models with hearing loss. We encourage leadership and independence, while enhancing listening, spoken language, self-advocacy and social skills. Held in Easthampton, Massachusetts, on the campus of The Williston Northampton School, Summer Adventure offers campers the opportunity to interact with other children with hearing loss from all over the country, make new friends and have lots of fun!

Field trips and outings offer opportunities for campers to explore the area and daily activities include swimming and recreation. Respect and communication are fostered; teamwork and building friendships are the focus. Each year campers leave Summer Adventure with a deeper understanding of themselves and as many campers say, they have learned to **embrace** their hearing loss and leave with a group of lifelong friends.

The summer of 2015 brings yet another new **first** to this program in the form of Corporate Sponsorships! If you are interested in having your organization associated with this totally worthwhile and much sought after summer program, please keep on reading...

## 2015 Summer Adventure Sponsorship Opportunity

### Summer Adventure Program Sponsor \$800 (1 available)

- Official 2015 Summer Adventure Sponsor Plaque and Certificate of Appreciation
- Company Banner (supplied by sponsor) will be prominently displayed throughout the entire two-week program
- An invitation for a representative from your organization to attend the Closing Program to meet the campers and parents. *This is a fun, emotional and amazing opportunity to hear the stories and understand the importance of this adventure!*
- Company name & logo included in all **print AND online** promotional materials
- Link on the Clarke Summer Adventure website

### Backpack Sponsor: \$500 (1 available)

- Company name & logo imprinted on each backpack
- Company name & logo included in all **print AND online** promotional materials for the program
- Link on the Clarke Summer Adventure website

### Water Bottle Sponsor: \$350 (1 available)

- Company name & logo imprinted on each water bottle
- Company name & logo included in all online promotional materials for the program
- Link on the Clarke Summer Adventure website

### T-Shirt Sponsor: \$200 (5 available)

- Company name & logo imprinted on back of each t-shirt
- Company name & logo included in all online promotional materials for the program



**Clarke Schools**  
for Hearing and Speech



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### 2015 Summer Adventure Program Sponsorship Reservation Form

**Sponsorship Deadline: April 1, 2015**

PLEASE TYPE OR PRINT CLEARLY

Company

City

State

Zip

Contact Person

Phone

Mailing Address

Fax

Mailing Address, continued

Email

### SPONSORSHIP OPPORTUNITIES AWARDED ON A FIRST-COME, FIRST-SERVED BASIS!

Don't forget to make your selection EARLY, while it is still available!!

#### SPONSORSHIP OPPORTUNITY

#### VALUE

- |   |       |
|---|-------|
| <input type="checkbox"/> Summer Program Sponsor | \$800 |
| <input type="checkbox"/> Backpack Sponsor       | \$500 |
| <input type="checkbox"/> Water Bottle Sponsor   | \$350 |
| <input type="checkbox"/> T-Shirt Sponsor        | \$200 |

**TOTAL VALUE:** \$\_\_\_\_\_

#### PAYMENT OPTIONS:

CHECK

☐ (Payable to: Clarke Schools for Hearing and Speech)

CREDIT CARD

☐ Visa    ☐ MasterCard    ☐ Discover    ☐ AmEx

\_\_\_\_\_  
Name on Card (Please Print)

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Security Code

\_\_\_\_\_  
Signature (Required)

\_\_\_\_\_  
Date

#### MAIL OR FAX FORM TO:

Clarke Mainstream Services  
45 Round Hill Road  
Northampton, MA 01060-2123

**Fax:** 413.586.6654

**Phone:** 413.587.7313

**Email:** btetreault@clarkeschools.org



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