

Vishwa Hindu Parishad of America AND BalGokul

Announce

SHANTINIKETAN FAMILY CAMP

On

Thursday, July 8th to Sunday, July 11th, 2010

Teen Camp : Thursday 8:00 AM to Sunday 12:00 Noon

Family Camp : Thursday 6:00 PM to Sunday 12:00 Noon

Venue: LATHROP E. SMITH ENVIRONMENTAL EDUCATION CENTER
5110 Meadowside Lane, Rockville, MD 20855

Program Synopsis :

- Discussion on issues of identity, service, and leadership in relation to Hindus in America. The focus is on unity.
- Presentations on the culture, spirituality and the current issues by eminent community personalities.
- Moderated debates between parents and children to promote intercultural understanding
- Physical exercises, Yoga, games and entertainment.
- Video Show on life history of great people, Prayers, Bhajans, Pooja and group songs.
- Campfire: participants gather around the fire to share songs, skits, games and stories.

FOR INFORMATION PLEASE CONTACT ANY OF THE FOLLOWING:

Mangal Mandir BalGokul

Dilip Patel (301) 604-6356

Bhargav Desai (301) 604-2927

Vihang Patel (410) 480-1977

Durga BalGokul:

Dhananjay Shevalikar (571)212-6055

Srilekha Palle (703)839-3976

Vibha Harikar (703)266 2055

VHPA-Washington Chapter

Shivaram S (301) 515-8504

Shardanand (301) 917-1555

Mahendra Sapa (301) 549-4145

Chandresh M (202) 834-5697

Jitendra Saxena (301) 294-3379

Vasanthi Vittal (703) 455-5950

Satish Burgadda (703) 715-2232

E-mail: vhpa.dc.camp@gmail.com

Vishwa Hindu Parishad of America Shantiniketan Family Camp

Be united. Speak in harmony. Let your minds apprehend alike. Common be your prayers. Common be the end of your assembly. Common be your resolutions with unanimous understanding. United be your hearts. United be your thoughts. Perfect be your unity.

- Rig-Veda

Come together, no matter what for; have mass programs in unison; Discipline will be learnt; Self-confidence will grow.

- Swami Vivekananda

Let us walk (march) together; Let us speak (and sing) together; let us think together (wedded to a common ideal and goal); Let us behave, act, struggle hard, achieve and preserve the divine qualities of our forefathers (dev-purush).

- Dr. Keshav Baliram Hedgewar

LATHROP E. SMITH ENVIRONMENTAL EDUCATION CENTER 5110 Meadowside Lane, Rockville, Maryland 20855

DIRECTIONS

From I-95 North: Take an exit to Silver Spring (Beltway, I-495 West). Take an exit to Georgia Avenue North (Rt. 97 North). Go about 7-8 miles and take left onto Norbeck Road (Rt. 28 West). Go about few hundred yards and take right onto Muncaster Mill Road (Rt. 115W). Go about one mile and take left onto Meadowside Lane. Center is on your right.

From I-95 South: Take an exit to Beltway (I-495) going towards Rockville (may find signs for Bethesda, Frederick and I-270). Take an exit to Georgia Avenue North (Rt. 97 North) and follow the above directions.

From I-270: Take an exit to Shady Grove Road-East. Go about 3-4 miles and take right onto Muncaster Mill Road (Rt.115E). Go about 3-4 miles and take right onto Meadowside Lane.

IMPORTANT TO REMEMBER

There are bunk beds with mattresses in the cabins. You need to bring a pillow, bed sheets, toothbrush, paste etc. Please bring a Yoga mat. Do not bring any valuables which you may lose. There is no air conditioning in the sleeping cabins; you may bring pedestal / personal fans for your comfort.

Vishwa Hindu Parishad of America, Inc.

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Vishwa Hindu Parishad of America

SHANTINIKETAN FAMILY CAMP

July 8 - 11, 2010

REGISTRATION FORM

Camper's Information:

			<i>Age (optional for adults)</i>	<u>T-Shirt Size</u>
First Name _____	MI _____	Last Name _____	Age ___ M () F () ()	
First Name _____	MI _____	Last Name _____	Age ___ M () F () ()	
First Name _____	MI _____	Last Name _____	Age ___ M () F () ()	
First Name _____	MI _____	Last Name _____	Age ___ M () F () ()	
First Name _____	MI _____	Last Name _____	Age ___ M () F () ()	
First Name _____	MI _____	Last Name _____	Age ___ M () F () ()	

T-Shirt Sizes Codes : Adults : A-XXL, A-XL, A-L, A-M, A-S
Kids : K-L, K-M, K-S
Toddler : T

Address _____

Telephone ()

Email : _____

Medical Insurance: Medical Insurance Company Name:

Group #:

Personal Physician's name:

Emergency Contact info (Name and Phone #):

Subscriber #:

Physician's phone:

Registration Fee:

Registration (On or Before June 20, 2010)

\$85 For the first camper from a family .

\$75 For the second and Third campers of the same family members.

\$70 For additional campers of the same family members.

(Members of the family should have the same Medical Insurance.)

\$15 for children under age five.

\$10 per camper will be charged for the late registration after June 20, 2010.

(REGISTRATION FEE INCLUDES: NIGHT STAY AT CAMP SITE, BREAKFAST, LUNCH, AFTERNOON SNACK AND DINNER)

Total amount \$ _____ Check # _____ Date _____

Please make check payable to **V.H.P. of America** and mail with the registration form to

**VHPA Camp Registration
14610 Bubbling Spring Rd
Boys, MD 20841**

THE FOLLOWING IS TO BE SIGNED BY A PARENT/GUARDIAN OR AN ADULT OVER 18 YEARS OF AGE.

I, the undersigned, hold V.H.P. of America, Inc and Montgomery County and Lathrop E. Smith Center, Rockville in the State of Maryland harmless for any and all liabilities arising out of my and/or my children's/ward's participation in the camp. In the event of any medical emergency, any medical help available to the organization may be used. I will be responsible for all the medical and related expenses. I, hereby, release V.H.P. of America and Montgomery County from any and all claims.

Name:

Signature

Date

Please send only this sheet for the registration along with the check, and keep the other page containing camp information with you.

