



Sponsor a Camper Program



The loss of a loved one is difficult for a child and can wreak havoc on families. Unlike adults, children lack the ability to identify and express the conflicting emotions that grief may cause. They can experience changes in behavior, sleep, or eating patterns. Many children struggle at school in the aftermath of a loved one's death. Some children act out in unproductive and potentially dangerous ways. Parents and guardians are often suffering from grief themselves and need additional resources to support their children at home. Led by dedicated professionals and trained volunteers from Seasons Hospice & Palliative Care, Camp Kangaroo helps children feel less alone in their grief, provides them with a supportive environment to express their emotions, and helps them learn effective coping strategies.

Camp Kangaroo is a bereavement camp experience provided free of charge to children in the community who have suffered the death of a loved one. Participants receive grief education and emotional support combined with fun camp activities. The only national bereavement camp of its kind, this program is psychotherapy and creative arts therapy based. It provides an opportunity for children to process their grief and find new meaning following the loss of their loved ones.

Camp Kangaroo offers healing that is felt across generations. The Sponsor a Camper Program is your opportunity to make a difference. By providing a sponsorship, you can help change a child's life forever! A gift of \$300 will sponsor one child to attend our camp. If you would like to sponsor a camper, please complete the Sponsor a Camper Pledge Form or call our office at (847) 692-1000 for more information. The emotional impact that this camp program provides is priceless.



Sponsor a Camper Pledge Form

Yes, I want to sponsor a camper to attend Camp Kangaroo! This donation symbolizes my deep desire to support grieving children through their journey.

Name

Address

City, State, Zip

Phone/Email

Enclosed is my gift of: \$300 Other Amount_____

Please check one: Check Cash

Or charge my credit card AMEX Discover MasterCard Visa

Credit Card #

Exp Date

3 or 4 Digit Security Code

Authorized Signature

I wish to make my gift:

Anonymously In Honor of: In Memory of:

Name

If you would like us to notify the person or the family of the person above, please include their name and mailing address below.

Name

Address

City, State, Zip



Seasons Hospice Foundation is a 501(c) 3 nonprofit organization. Your contribution is tax-deductible to the extent allowed by law. Camp Kangaroo is made possible by the generosity of our donors. To learn more, visit www.seasonsfoundation.org or call 847-692-1000.

SEASONS HOSPICE FOUNDATION
8537 SOLUTION CENTER
CHICAGO, IL 60677-8005