



Application Instructions

Camp Periwinkle is a week-long overnight camp for children with cancer who receive care at Texas Children’s Hospital. The camp is organized and funded by The Periwinkle Foundation. This year Camp Periwinkle is held July 19 – 25.

Who Can Attend

- Your child must have been seen at the Texas Children’s Cancer Center within the past year.
- Campers must be 7–15 years old.
- One sibling in the same age range may attend camp with the patient. Cousins or friends cannot attend in place of a sibling.
- Camp is free of charge for all campers.

Immunization Requirements

- Campers must submit a copy of their most recent immunization record, including proof of the MMR (measles) vaccine.
- Campers must also meet the vaccination requirements set by the Texas Department of State Health Services.
- If your child is not up to date on vaccines for medical reasons, the medical team will review their eligibility.

How to Apply – Two ways to apply

1. **Online Application** – Scan the QR code at the top.
Or
2. **Paper Application** - Complete the attached application. Please include a current email address (home or work) so we can contact you.

After you Apply

Once your application is submitted, you will receive an “Application Received” email or letter confirming that we received it. If you applied for both a patient and a sibling but do not receive confirmation for each child, please contact The Periwinkle Foundation.

Submitting an application does not guarantee a spot at Camp Periwinkle. After the application deadline, you will receive an email or letter letting you know whether your child has:

- been accepted, or
- been placed on the waitlist.

If your child is accepted, you will receive the required camp forms and instructions.

Waitlist

Medical staff from Texas Children’s Hospital review all applications. They decide who attends camp based on treatment plans, medical needs, and past camp attendance.

If you have any questions or concerns, please contact:

Larry Geiger
The Periwinkle Foundation
3400 Bissonnet Street, Suite 185
Houston, TX 77005
lgeiger@periwinklefoundation.org
(713) 807-0191 Phone
(713) 807-0291 Fax

Michelle Fritsch (Hablo español)
713-501-8128
fritsch.michelle@gmail.com
or

<p style="text-align: center;">IMPORTANT DATES</p> <p>Application due: May 8, 2026</p> <p>Camp Periwinkle: Sunday, July 19th – Saturday, July 25th</p>





General Information

- Camp Periwinkle is funded and organized by The Periwinkle Foundation, which also offers several other programs for children with cancer and their families. These include Camp YOLO, Periwinkle Day Camp, Periwinkle Family Camp, the Periwinkle Arts in Medicine Program at Texas Children's Hospital, and the Adult Long-Term Survivor Program.
- Proof of COVID-19 vaccination or a rapid COVID test is no longer required before attending camp.
- Camp is located in Burton, Texas, about 1.5 hours northwest of Houston. Your camper may ride the camp bus to and from camp, or you may choose to drive your camper.
- A full medical team is on site 24 hours a day, including a pediatric oncologist, nurses, a pediatric nurse practitioner, and pharmacists. If a medical need arises, additional doctors and nurses are available to assist with transportation back to Houston if needed.
- Campers can enjoy many activities, including the challenge course, archery, canoeing, fishing, horseback riding, a small animal farm, arts and crafts, sports, swimming, cooking, parties, and more.
- Each cabin has 3–4 counselors who are age 18 or older. The Head Counselor is an experienced Camp Periwinkle counselor over age 21. All counselors complete a thorough screening process. For new counselors, this includes reference letters, a criminal background check, a National Sex Offender Registry check, and personal interviews.
- About 190 campers attend Camp Periwinkle each year. Campers are placed in cabins by age group and birth gender, with 9 - 11 campers per cabin. Each cabin shares a large barrier-free bathroom with multiple showers and toilets separated by curtains. Each camper has a personal cubby for toiletries.
- Clothing, bedding, and toiletries are available if your family needs them. Please let us know ahead of time if you would like help with these items.
- The dining hall, health hut, arts and crafts building, and cabins are air-conditioned.





Online Application Instructions

1. **For CAMPERS that applied/attended a Periwinkle camp programs**

- a. You already have family profile
- b. please visit <https://periwinkle.campmanagement.com/campers> and log in.
- c. Begin with Step 3**
- d. If you've forgotten your password, please contact Larry Geiger at lgeiger@periwinklefoundation.org or 713-807-0191.

2. **For NEW CAMPERS, follow these steps**

Step 1: Visit <https://periwinkle.campmanagement.com/enroll>

Step 2: Create a Family Profile

Please fill out camper(s), parent(s), and home address information and click on the "Continue to Enrollment Options" button.

You will receive your login and password to log in to the Parent Dashboard via the email address you provide below. This is NOT the application. You will fill out the application once you are in the Parent Dashboard.

Step 3: Click Enroll "Camper Name" for 2026.

Step 4: Enrollment Options

Select the green "Add Enrollment Option", then click "Save and Continue"

Step 5: Camp Questions

Answer all the questions (some are mandatory), then click "Save and Continue"

Step 6: Camp Forms

Camp forms will be available in June after your child has been accepted to Camp Periwinkle. Click "Save and Continue"

Step 7: Checkout

Payment is not required. Read the terms and conditions, then check the box "I have read and agree to the enrollment terms and conditions for The Periwinkle Foundation". Type your full name in the signature box and submit enrollment request.

If you have any questions or concerns about the online application, please contact:

Larry Geiger

The Periwinkle Foundation

lgeiger@periwinklefoundation.org

(713) 807-0191 Phone

(346) 444-9730 Direct Line



Apply Online:



PATIENT

APPLICATION DEADLINE: MAY 08, 2026

CAMP PERIWINKLE PATIENT APPLICATION

(Please print clearly. Use only black or blue ink)

Camper Name _____ Gender **Male** **Female** Date of Birth _____

Address _____

City _____ State _____ Zip _____ County _____

Age at Camp _____ Grade in School (2026-27) _____ Camper's Ethnicity (*Optional, demographic purposes only*) _____

T-shirt size _____ Shoe size _____ Camper's preferred language - **English** **Español** Special Diet **Yes** **No**

Parent Name/Guardian(s) with whom child lives:

Parent/Guardian Name _____ Relationship to Camper _____

E-mail _____ Home # _____ Cell or Work # _____

Parent/Guardian Name _____ Relationship to Camper _____

E-mail _____ Home # _____ Cell or Work # _____

If the camper does not live with both parents, please list the other parent (or guardian) below.

Parent/Guardian Name _____ Relationship to Camper _____

E-mail _____ Home # _____ Cell or Work # _____

Has your child been seen at TCH in the last year? **Yes** **No** If yes, when was the last visit? _____

Is your child currently receiving treatment for their cancer? **Yes** **No** Will your child be taking routine medications at camp? **Yes** **No**

What type of cancer is/was your child treated for? _____

Who is/was your child's nurse coordinator? _____

Name of brother or sister who wishes to attend camp. _____ *(Please complete a sibling application for the sibling)*

Would you prefer receiving information by email or in the mail? **Email** **Mail** Parent/Guardian's preferred language - **English** **Español**

I hereby authorize you to review all medical information concerning my child

Signature of Parent or Guardian _____ Date _____

APPLICATIONS MUST BE COMPLETED AND RETURNED TO:

The Periwinkle Foundation
Camp Periwinkle
3400 Bissonnet St, Suite 185
Houston, TX 77005
Fax: 713-807-0291

OR

Texas Children's Cancer Center and Hematology Center
Share Desk/ 14th Floor
6701 Fannin St
Houston, TX 77030



Camp Periwinkle is a program of The Periwinkle Foundation, a 501(c)(3) organization which develops and provides programs that positively change the lives of children, young adults and families who are challenged by cancer and other life threatening illnesses and are cared for at Texas Children's Hospital.



SIBLING

APPLICATION DEADLINE: MAY 08, 2026

CAMP PERIWINKLE SIBLING APPLICATION

(Please print clearly. Use only black or blue ink)

Camper Name _____ Gender **Male** **Female** Date of Birth _____

Address _____

City _____ State _____ Zip _____ County _____

Age at Camp _____ Grade in School (2026-27) _____ Camper's Ethnicity (*Optional, demographic purposes only*) _____

T-shirt size _____ Shoe size _____ Camper's preferred language - **English** **Español** Special Diet **Yes** **No**

Parent Name/Guardian(s) with whom child lives:

Parent/Guardian Name _____ Relationship to Camper _____

E-mail _____ Home # _____ Cell or Work # _____

Parent/Guardian Name _____ Relationship to Camper _____

E-mail _____ Home # _____ Cell or Work # _____

If the camper does not live with both parents, please list the other parent (or guardian) below.

Parent/Guardian Name _____ Relationship to Camper _____

E-mail _____ Home # _____ Cell or Work # _____

Name of brother or sister who is a patient. _____

Will your child be taking routine medications at camp? **Yes** **No**

Would you prefer receiving information by email or in the mail? **Email** **Mail**

Parent/Guardian's preferred language - **English** **Español**

I hereby authorize you to review all medical information concerning my child.

Signature of Parent or Guardian _____ Date _____

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Camp Periwinkle
3400 Bissonnet St, Suite 185
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6701 Fannin St
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