

WHERE SUMMERS HAPPENS

SUMMER DAY CAMP MIAMI COUNTY YMCA

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY



Member Piquarea United Fund





SUMMER DAY CAMP

For Boys and Girls going into grades 1-3 & 4-6



DAY CAMP CONCEPT

Summer Camp provides boys and girls an opportunity to enjoy themselves and make new friends in an outdoor/ camp atmosphere. A variety of activities will be offered including swimming, hiking, arts and crafts, sports, nature studies, and more.

DAY CAMP PROGRAM

During activities, campers will be broken into groups based on their grade in school. First through third graders will focus on activities involving arts & crafts and physical activity (sports, games, etc.). Fourth through sixth graders will focus on leadership building activities and physical activity. Groups will also combine for large camp activities.

Each week will have a different theme, ensuring a variety of activities at camp. Parents will receive a calendar at the beginning of each week which includes daily activities, swim time, and the "trip of the week"

COUNSELOR IN TRAINING (CIT) PROGRAM

The CIT Program is designed for youth in grades seven and up. This program gives these youth a chance to take a leadership role during camp, helping counselors with supervision within their groups and with running camp activities. Many CITs go on later to become Counselors themselves. Spots will be very limited and participants must interview with a Day Camp Director before May 7th. Parents will be notified after the interview on acceptance into the CIT Program.

CAMP STAFF

Our staff is chosen for their experience, leadership skills, strong Christian character and enthusiasm for working with children.

A TYPICAL DAY CAMP SCHEDULE

9:00am Day Campers load the bus and will be driven to one of the following:

1. An area park, camp or nature preserve for outdoor camp activities.

2. The "Trip of the Week"

12:00pm LUNCH

12:30-3:30 Outdoor activities, swimming,

sports games...

4:00pm Camp Closes – Camp ends at

6:00pm on Trip Day

In case of severe weather, camp activities may be changed.

DROP-OFF / PICK-UP

This camp will offer drop-off/pick-up at both the Piqua Branch and Robinson Branch. Drop-off check in begins at 8:45. Pick-ups no later than 4pm unless noted in the schedule.

2023 CAMP SESSIONS

Day Camp begins the week of June 5th and will run for 11 weeks, through August 18th.

Campers attending at least 5 weeks, or more, will be registered first.

Week 1: Red's Game (June 8)

Week 2: Columbus Zoo (June 15)

Week 3: Carillon Park (June 22)

Week 4: Camp Willson (June 29)

Week 5: Kings Island (July 6)

Week 6: Cincinnati Museum (July 13)

Week 7: COSI (July 20)

Week 8: King's Island Water Park (July 27)

Week 9: Boonshoft/Sunwatch Village (August 3)

Week 10: Young's Dairy (August 10)

Week 11: EnterTRAINment Junction (August 17)

Please Check on Departure and Return Times.

Weeks can be reserved with a \$20.00 non-refundable/non-transferrable deposit.

All fees must be paid prior to the Monday of camp for child to attend.

2023 REGISTRATION FORM

ALL AREAS MUST BE COMPLETED BEFORE REGISTRATION IS ACCEPTED

Camper Name	Birth date	Sex	Age Grade
Parent/Guardian			
Home Address		Pi	none
Email Address			
Second Parent or Guardian or Emerge	ncy Contact		
Home Address		PI	hone
Must be completed to eligible for ca	mp		
Health Insurance Provider			
Insurance #	Member ID#	Group #	
Immunization Record: Enter Month/Ye	ear of each Immunization (must be	filled in to register)	
DPT 12	3 4	5.,	
TD			
	3 4		
Measles, Mumps, Rubella - Usually Co	ombined as MMR If separate:	: Measles Mump	s Rubella
Tetanus (Date of last immunization) _	HIB TB test		
Name of Physician or Clinic			
Address	City	Zip	Phone
Name of Dentist or Clinic			
Address	City	Zip	Phone
Health Record			
List all allergies and any special p Environmental)	recautions and treatment indicate		lie. Foods, Medications, oi
3. List medications, food supplemen child:		plements currently be	ing administered to the
4. List any chronic physical problem	s, diseases and any history of hos	pitalization:	
(Special form must be completed	for administration of over the co	ounter/prescribed me	edication by camp staff)
Important - This Box Must be Complete 1. This health history is correct so far as I except as noted. Authorization for treatm X-rays, routine tests, treatment, and nece hereby give permission to the Physician sechild as named above. The completed form Signature of parent or guardian or adult contains the complete of the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete of parent or guardian or adult contains the complete or guardian or adult contains the contains th	know, and the person herein described had been to the medical section to the medical section for the medical section for medical section for medical section for the trips out of the trips out of	dical personnel selected l In the event that I cannot d administer treatment, in	by the camp director to order be reached in an emergency, l cluding hospitalization, for my
Parent/Guardian 2 Lalso understand and agree to abide w	ith the restrictions placed on my camp as	tivities	Date

*If for religious reasons you cannot sign, then the camp should be contacted for a legal waiver which must be signed for attendance.

REGISTRATION FEES

7

3

MEMBER

First Child/Additional Child Weekly Fees (Includes Trip) \$115/\$105

CAMP WFEK

NONMEMBER

First Child/Additional Child Weekly Fees (Includes Trip) \$135/\$125

4

Signature of Witness

CIT FEE

Weekly Fees (Includes Trip) \$60 member /\$80 nonmember T-shirt Fee = \$35

9

10

11

Q

CIRCLE CAMP WEEK CHOICES

1

					-	
Camper Name	T-Shirt Size:	YS (6-8) YN	/ (10-12) YL (14-16) AS	AM A	AL X
	londay of Camp Week. REGIS1 d) Weeks can be reserved wit					
MIAMI COUNTY YMCA PHOTO RE	LEASE					
Camper's Name:	Date:					
I hereby give the Miami County YMCA the absolute a may be included with others.	and irrevocable right and permission, with i	espect to the pho	otographs that have	e been taken of	me or in	which I
A. To copyright the same in the Miami County YM	CA's name or any other name that the Mia	mi County YMCA	may choose.			
B. To Use, re-use, publish, and re-publish the nan whatsoever, including (but no by way of limitat	ne, in whole or part, individually, or in conji ion) illustration, promotion and advertising	unction with othe J and trade, televi	r photographs, in a sion and multimedi	ny medium and a.	for any p	urpose
C. To use name in conjunction there with if the ${\sf M}$	iami County YMCA chooses.					
I hereby release and discharge the Miami County YM cluding all claims for libel. This authorization and rel	ICA from any and all claims and demands a lease shall also ensure the benefit of the le	rising out of or ir egal representativ	n connection with the es, licenses, and as	he use of the ph ssigns of Miami	otograph County Y	is, in- 'MCA.
I hereby certify that I am the parent or guardian of to foregoing on behalf of him, her or them.	the person named above. I do give consent	according to the	terms listed above	without reserva	itions to	the
Printed name of parent/guardian:			<u>-</u>			
Signature of parent/guardian:						

5

6

7

FOR PARENTS

WHAT TO BRING?

Daily Needs: Sack Lunch, suitable clothing, swim suit, towel, sunscreen, insect lotion, change of clothing.

Optional Needs: Swim goggles, aqua socks/sandals, sunglasses, "Trip Day" money. (may need prepaid debit card)

DAY CAMP ORIENTATIONS

Witnessed by:

Day Camp Orientation Meetings will be held for anyone needing information on our summer activities and for all Pre-camp and Post-Camp Participants.

Dates and Times:

May 9 - 6:00 pm - Robinson

May 16 - 6:00 pm - Piqua

SHIRTS

All campers will receive a 2023 Miami County YMCA Summer Day Camp T-Shirt. T-Shirts MUST be worn on all "Trip of the Week" days.

YOUTH MEMBERSHIP

Children who learn the value of a healthy body, mind and spirit at an early age usually continue that life-style in their later years. A membership gives your child the chance to participate in an endless array of programs at a considerable savings! It also provides the opportunity for youth to participate in youth sports leagues, swim or gymnastics programs and open gym and swim times. Don't put it off, a youth membership almost guarantees a memorable year for your child and an economical one for you.

SPONSORSHIPS

Ask the Welcome Center Staff at either branch for a financial assistance application. Once completed and membership is obtained, please speak to a Camp Director about Program Assistance.

CONTACT INFORMATION

For more information covering this year's program, please contact Gage Uderman at 440-9622.