

DAY CAMP 2018

Chiques Church of the Brethren-- 4045 Sunnyside Road,-- Manheim, PA 17545
(717) 665-1342 www.chiquescob.org

To: Parents of children completing grades 1 through 6

Chiques COB is preparing for another exciting year of summer day camp to be held at our church pavilion. This program is offered FREE to children who have **completed** grade 1 through grade 6 this school year. Weeks of camp are listed below:

Grade 1: 6/25 – 6/29	Grade 4: 7/16 – 7/20
Grade 2: 7/2 – 7/6	Grade 5: 7/23 – 7/27
Grade 3: 7/9 – 7/13	Grade 6: 7/30 – 8/3

Camp is Monday through Friday from 9:00 am - 3:00 pm and includes a variety of activities including Bible class, music, crafts and games. Tuesday and Thursday afternoons are reserved for swimming at the pond (weather permitting) and Wednesday is field trip day. Members of Chiques Church serve as Directors each week, and are assisted by Junior and Senior High youth.

*Directors have clearances and are trained in CPR.

*Swimming will be at Beck's pond. The shallow end is roped off and includes a sliding board. Children in 1st-3rd grade are not permitted beyond the rope. Those in 4th- 6th grade, who wish to take the swimming test and pass will be permitted in the deeper part. The deepest end is approximately 9 feet and includes a low diving board.

To register your child/children for our summer day camp program, complete the registration below (please complete a separate form for each child) and mail to the following address:

Stephen Geib – 2843 N Chiques Rd – Manheim, PA 17545

Please visit www.chiquescob.org for additional registration forms. Invite your friends!

Questions can be directed to chiquesdaycamp@gmail.com or 717-875-9260.

Registration forms must be received by MAY 15! This deadline is firm.

Please note: The church reserves the right to accept or refuse a child based on staffing capabilities for that week. If your child is registered, he/she will receive additional info by mail or e-mail 3 weeks prior to the start of his/her week of camp. If you have not been contacted one week prior to your camp, please contact Stephen Geib at 717.875.9260.

PLEASE PRINT

CAMPER'S NAME _____ GENDER: Male Female

GRADE COMPLETED _____ WEEK OF CAMP _____

Street Address	City	Zip
HOME PHONE _____	CELL/DAY-TIME PHONE _____	

E-MAIL ADDRESS _____

CHURCH NAME _____

Please list preferences of doctor or hospital and any medical history that we should know:

By signing this registration form, you have given your consent for your child to be involved in all activities at Day Camp while releasing Chiques COB and its members from the liability of injuries that your child may sustain and that first aid may be administered immediately if the need should arise.

Parent or Guardian Signature _____ / _____

Please sign and print your name

- Please check here if you **DO NOT** want your address and phone number on a car pool list.