

Summer Camp 2012 Registration Form

Carson-Simpson Farm Christian Center
www.CSFarm.org • 215.659.0232
3405 Davisville Road Hatboro, PA 19040

CAMPER INFORMATION: Please PRINT and use a SEPARATE form for each camper. This form may be copied as needed.

Camper's Last Name _____ First Name _____ DOB ___/___/___ Male Female

Street Address _____ City _____ State _____ Zip _____

Grade completed by June _____ School _____ School District _____

Camper Lives with _____ T-shirt size: _____

Church Name and Town _____

Name of Father/Guardian (circle) _____ Home Tel. () _____ E-mail _____

Name of Mother/Guardian (circle) _____ Home Tel. () _____ E-mail _____

How did you find out about Carson-Simpson?* _____

* Referring families receive a thank you gift

Certification Classes						Disciple Program	
6/2	\$90 <input type="checkbox"/>	Red Cross Life Guard Recertification Class (Life Guard, First Aid, CPR)				Weeks coincide with Day Camp – Youth must call for a packet Cost: \$100 – Before and After Care Also Available	
6/2	\$45 <input type="checkbox"/>	Red Cross Life Guard CPR recertification only					
Day Camps							
DATES	Half-day Camp	Day Camp	Day Camp with AM	Day Camp with PM	Day Camp with Extended	Creative Camp Options	
						Day Camp Add-Ons	Swim Enhancement **
6/11 - 15	N/A	\$190 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$240 <input type="checkbox"/>		
6/18 - 22	\$130 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$275 <input type="checkbox"/>		
6/25 - 29	\$130 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$275 <input type="checkbox"/>	6/27 - 3&4 Pool Party <input type="checkbox"/> \$8	
7/2-3 & 5-6 (4 days)	\$104 <input type="checkbox"/>	\$180 <input type="checkbox"/>	\$208 <input type="checkbox"/>	\$208 <input type="checkbox"/>	\$220 <input type="checkbox"/>		
7/9 - 13	\$130 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$275 <input type="checkbox"/>		\$20 MW <input type="checkbox"/> \$20 TTh <input type="checkbox"/>
7/16 - 20	\$130 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$275 <input type="checkbox"/>	5&6 overnite <input type="checkbox"/> \$40*	\$20 MW <input type="checkbox"/> \$20 TTh <input type="checkbox"/>
7/23 - 27	\$130 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$275 <input type="checkbox"/>		\$20 MW <input type="checkbox"/> \$20 TTh <input type="checkbox"/>
7/30 - 8/3	\$130 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$275 <input type="checkbox"/>		\$20 MW <input type="checkbox"/> \$20 TTh <input type="checkbox"/>
8/6 - 10	\$130 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$275 <input type="checkbox"/>	\$75 Guard Start <input type="checkbox"/>	
8/13 - 17	\$130 <input type="checkbox"/>	\$225 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$260 <input type="checkbox"/>	\$275 <input type="checkbox"/>		

*5/6 overnite with AM or PM - \$30, with Extended - \$25

** M/W Class is for campers trying to attain Green Band (deep water). T/Th Class is for campers trying for Blue band (middle level).

SCHOLARSHIP REQUEST If you are requesting a scholarship, please sign below and attach a short letter explaining your reason for scholarship need.

I request a Scholarship for Summer Camp 2012 for _____ (name of camper)

(Signed by Pastor, Parent, Guardian or Sponsoring Agency Representative) _____

• I give my permission for the above named camper to attend the above listed 2012 summer camp event(s) with the Eastern PA Conference-UMC/Carson-Simpson Farm. I understand that part of the camping experience involves activities, arrangements and interactions that may be new to my child, and that they come with certain risks and uncertainties beyond what my child may be used to dealing with at home. I am aware of these risks, and I am assuming them on behalf of my child. I realize that no environment is risk-free, and so I have instructed my child on the importance of abiding by the camp's rules, and my child and I both agree that he or she is familiar with these rules and will obey them.

• I acknowledge my responsibility for payment of all fees in full to Carson-Simpson Farm, **THE MONDAY BEFORE THE START OF THE EVENT**. I understand a late fee of \$10.00 will be charged if payment is not received on time.

• Upon signing, permission has been granted to Carson-Simpson Farm to use photos and video images of the camper for publicity purposes. This could include, but is not limited to brochures, flyers, DVDs, newspaper, and use on the camp website and Facebook page. If you do not agree to this, you must make your request known in writing at the time of registration.

SIGNATURE OF PARENT OR GUARDIAN _____ DATE _____

(Only parents or legal guardians of camper may sign).

Please make checks payable to Carson-Simpson Farm. Please pay full amount or \$25 minimum deposit for each event.

PAYMENT	CHURCH PAYMENT	PAYMENT METHOD
Camper Fees/Deposit \$ _____	<input type="checkbox"/> Check enclosed <input type="checkbox"/> Camp Cash enclosed	<input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other _____
My tax deductible donation to support the ministry of CSF \$ _____	<input type="checkbox"/> Check expected <input type="checkbox"/> Camp Cash expected	<input type="checkbox"/> Discover <input type="checkbox"/> Mastercard <input type="checkbox"/> VISA
Total Payment \$ _____	AMOUNT \$ _____	Card # _____ Exp.date _____
	(SIGNATURE/CHURCH REPRESENTATIVE) _____	(SIGNATURE) _____

PREPARING FOR DAY CAMP

PACKING FOR CAMP

All campers carry their own back pack. Included should be: swim suit and towel, *water bottle*, jacket for cool days, rain gear/umbrella when needed, suntan lotion, and bug repellent.

***We ask that campers wear appropriate clothing to camp. (See camper contract) *Campers should wear sturdy shoes or sneakers*. Flip flops may only be worn at the pool. If extremely hot, campers may wear sandals/flip flops, but please send sneakers in back pack for games or hikes. All articles should be labeled with camper name.

WHAT DO I DO WHEN I GET THERE?

- Please park on the grass to the right of the entrance and bring your child to the sign in/out table by the office.
- Check-in no earlier than 8:50 for Day Camp or between 7:00 and 9:00 for the AM extended program.
- Each day your child must be signed in when arriving at camp, and signed out when picked up. Only persons listed on your release form will be allowed to sign out your child.
- On your child's first day of camp for the summer, after signing in you must stop and see the nurse. The nurse will be available to receive any medications or discuss medical concerns each day from 8:30 - 5.
- Staff will be available if you want to put money on your child's store account.
- If you are bringing payment for a future week's balance, please put it in the mail slot by the office door.
- Check the White Announcement Board for information about weekly specials, dress-up days, and to find out who your child's counselor is.

MEET YOUR CHILD'S COUNSELOR

Each Monday morning between 8:45 and 9:00, you will have the opportunity to meet your child's counselor for the week. The counselor's names will be listed on the announcement board outside the office, and the counselors will be stationed by their group's backpack rack. Please feel free to stop by and introduce yourself.

If you would like to have an extended conversation with a counselor, please stop in the office to make an appointment. You may always discuss any concerns with the Day Camp Director or Program Manager.

POOL NEWS

Prior to swimming, each child will be tested and issued a band that they must wear at all swimming sessions. New bands are given every Monday. If the band is lost or torn intentionally, a replacement will be issued at a charge of \$1.00.

CAMP STORE

The store will be open two (2) times each afternoon. Campers can use a store account or cash. If using cash, campers are responsible for the safe keeping of their own money. If using a store account, parents can stop in office to add money, **request limits**, or on the child's last day, receive any balance. Any moneys left on accounts at the end of camp will be considered a donation to the camper scholarship fund. A complete store price list is available at the registration table.

Examples of items available:

Water/Gatorade/soda/juice	\$.75 - \$1.25	Toys/animals/balls	\$.50 - \$10.00
Ice cream/candy	\$.25 - \$2.00	Jewelry	\$.50 and up
Chips/crackers/cookies	\$.75 - \$1.25	T-shirts/sweat shirts	\$10.00 and up

Carson-Simpson Farm Christian Center Camper/Disciple Contract



Please read over this entire contract with your child and sign

The purpose of camps and retreats are to enjoy the outdoors, to have fun, to enjoy friendships, and also to have a chance to reflect on our own lives and our relationship with Jesus Christ. Each person attending camp or a retreat at Carson-Simpson Farm Christian Center is required to make a commitment to the following statements by signing this contract.

- I agree to **Respect** all other persons attending camp by treating them with kindness and patience, putting the needs of others before my own. I will show respect through both my words and actions toward others. I will also show respect for all personal property of others and of the camp.
- I agree to **Follow Directions** of all camp staff.
- I agree to **Attend All Events** on time and participate in all camp activities, and I will not leave the camp grounds.
- I agree to **Follow All Camp Rules Including:**
 - *God's name should be held in reverence and only used when praying or in worship.*
 - *Personal electronics including cell phones, toys, trading cards, etc. are forbidden at camp.*
 - *Body piercings, other than ears, shall be covered or removed for camp attendance.*
 - *Bathing suits must be modest in appearance, properly covering the body.*
 - *Clothing should be modest with appropriate undergarments. Underwear should not be seen.*
 - *Cursing or current slang that is improper will not be tolerated.*
 - *Behavior not honoring to God (fighting, racism, gossiping, bullying etc.) will not be tolerated.*
 - *Possession of any kind of weapon is reason for immediate dismissal from camp.*
 - *Possession or use of any illegal substance or alcohol is prohibited.*
 - *Agreeing to follow the camp internet policy (OVER)*
- I understand that this camp will present **Biblical Teaching**. I agree to respectfully listen and consider the presentation of Christian attitudes and teaching. If I do not agree with everything, I will still allow others to listen and consider the opinions offered, by showing respect in my words and actions.
- I **Understand** that if I do not follow the statements of this contract that the camp staff will take disciplinary measures as follows:

Disciplinary Steps (written records kept for all steps)

1. Verbal warning by counselor, followed by loss of store or pool time if behavior continues.
2. 1st Disciplinary visit, child meets with Disciplinary Staff, parent is notified.
3. 2nd Disciplinary visit, child calls parent themselves, Disciplinary Staff notifies parent of next step
4. 3rd Disciplinary visit, child must be picked up from camp and must take the following day off from camp (no refund)
5. 4th Disciplinary visit, child will be dismissed from camp for the remainder of the summer (no refund on balance of week and loss of deposit for the remaining weeks)

As a parent or guardian, I agree to be partners with Carson-Simpson Farm Christian Center in the discipline of my child. I agree to support the camp disciplinary code.

Signature of Parent of Guardian _____

Name of Camper/Disciple (please print) _____

As a Camper/Disciple at Carson-Simpson Farm, I agree to follow the Camper Contract and understand the consequences if I do not.

Signature of Camper/Disciple _____

Dear CSF Parents:

We share the concerns of many families, schools, and camps regarding the dangers associated with young people's use of social networking Web sites such as Myspace.com and Facebook.com. As you may know, the risks range from online sexual solicitation to cyber-bullying to the damaging of one's own reputation, school or camp admission status, or job prospects by posting inappropriate information, photos or comments on personal pages.

The American Camp Association (ACA), by whom we are accredited, is working with its members to develop model policies designed to keep campers, employees, and camps safe. Our policy is below for your review. We hope you will discuss it with your child and encourage him or her to share any inappropriate postings by or about members of our camp community.

Please know that we remain committed to the health and safety of all members of our community. As always, we appreciate your support and welcome your comments.

Carson-Simpson Farm Christian Center
Internet Social Networking and Blogging Policy for Campers, Disciples and Staff

In general, our camp views social networking sites (e.g., MySpace, Facebook), personal Web sites, and Weblogs positively and respects the right of campers, disciples and staff to use them as a medium of self-expression. If a camper, disciple or staff member chooses to identify himself or herself as a part of our camp community on such Internet venues, some readers of such Web sites or blogs may view the camper, disciple or staff as a representative or spokesperson of the camp. In light of this possibility, our camp requires, as a condition of participation in the camp, that campers, disciples and staff observe the following guidelines when referring to the camp, its programs or activities, its campers, disciples and/or employees, in a blog or on a Web site.

1. Campers, disciples and staff must be respectful in all communications and blogs related to or referencing the camp, its employees, and other campers or disciples.
2. Campers, disciples and staff must not use obscenities, profanity, or vulgar language.
3. Campers, disciples and staff must not use blogs or personal Web sites to degrade the reputation of the camp, other campers, disciples or employees of the camp.
4. Campers, disciples and staff must not use blogs or personal Web sites to harass, bully, or intimidate other campers, disciples or employees of the camp. Behaviors that constitute harassment and bullying include but are not limited to, comments that are derogatory with respect to race, religion, gender, sexual orientation, color, or disability; sexually suggestive, humiliating, or demeaning comments; and threats to stalk, haze, or physically injure another person.
5. Campers, disciples and staff must not use blogs or personal Web sites to discuss engaging in conduct that is prohibited by camp policies, including, but not limited to, the use of alcohol and drugs, sexual behavior, sexual harassment, and bullying.
6. Staff and disciples must not tag or identify any camper in a photo.

Any camper, disciple or staff found to be in violation of any portion of this Social Networking and Blogging policy will be subject to immediate disciplinary action, up to and including dismissal.

Completed form **MUST** be received **BEFORE** the first day of camp!

HEALTH HISTORY FORM – page 1

Carson-Simpson Farm Christian Center

IDENTIFICATION

NAME: _____
Last First MI

Birth Date: _____ Age: ____ Gender: M ___ F ___

Height _____ Weight _____

Home Address: _____
Street City State Zip

1st Parent/Guardian _____ PH: _____

Business PH: _____ Cell PH: _____

2nd Parent/Guardian _____ PH: _____

Business PH: _____ Cell PH: _____

If not available in an emergency, notify:

Name: _____

Relationship: _____ PH: _____

Health Provider Information:

Physician: _____ PH: _____

Address: _____
Street City State Zip

Dentist: _____ PH: _____

Address: _____
Street City State Zip

Insurance Information:

Is the camper covered by family medical insurance? Yes ___ No ___

Carrier/Plan Name: _____ Policy/Group #: _____

Name of insured: _____

Relationship to camper: _____

ALLERGIES

Allergies: Yes ___ No ___

If yes, please indicate type of allergy AND reaction:

AUTHORIZATION

1. I certify that the information on this health history form is, to the best of my knowledge complete and accurate.
2. The person described herein, has permission to engage in all camp activities except as noted.
3. I hereby give permission to the camp to provide non-prescription, over-the-counter medications and treatments to my child at the discretion of the CSF Camp Nurse in accordance with the written treatment procedures.
4. I agree to the release of any records necessary for insurance purposes or medical treatment.
5. I give permission to the camp to arrange necessary emergency transportation for my child.
6. In the event I cannot be reached in an emergency, I hereby give permission for the camp director or his designee to act in my behalf in securing medical treatment including hospitalization for my child.



Signature of Parent/Guardian Date

HEALTH HISTORY

Has your child ever had or does your child have any of the following?

- | | |
|--|----------------------|
| ___ Serious illness or infectious disease | ___ Asthma |
| ___ Ever been hospitalized | ___ Surgery |
| ___ Frequent headaches | ___ Diabetes |
| ___ Head injury or ever been unconscious | ___ Seizures |
| ___ Frequent ear infections | ___ Ear tubes |
| ___ Heart murmur | ___ ADD/ADHD |
| ___ Emotional difficulties (with counseling) | ___ Autism |
| ___ Joint or back problems | ___ Hypertension |
| ___ Chest pain during or after exercise | ___ Blood disorder |
| ___ Diarrhea or constipation | ___ Glasses/contacts |
| ___ Skin disorders | ___ Sleepwalking |
| ___ Abnormal menses and/or cramps | ___ Bed-wetting |
| ___ Hearing impairment | ___ Tuberculosis |
| ___ Frequent nosebleeds | ___ Special Diet |
| ___ Mononucleosis in the past 12 months | ___ Eating Disorder |

Please explain if your child has any of the above conditions:

IMMUNIZATIONS

All up to date? Yes ___ No ___

Date of Last Tetanus (DPT, DT, TT) _____ If applicable, Tuberculin Test: Type: _____ Results (circle): + --

Completed form **MUST** be received **BEFORE** the first day of camp!

HEALTH HISTORY FORM – Page 2

Carson-Simpson Farm Christian Center

<u>MEDICATIONS TAKEN ON A REGULAR BASIS</u>	<u>WILL THERE BE MEDICATIONS GIVEN AT CAMP BY THE NURSE?</u>
Med #1 _____ Dosage _____ Times _____ Reason _____	Yes ___ No ___ If yes, please list:
Med #2 _____ Dosage _____ Times _____ Reason _____	Med #1 _____ Dosage _____ Times _____ Reason _____
Med #3 _____ Dosage _____ Times _____ Reason _____	Med #2 _____ Dosage _____ Times _____ Reason _____
	Receiving Nurse's Signature _____

Note: ALL medications received MUST be in original pharmacy bottle/packaging accompanied by a doctor's note indicating current dosage.

ADDITIONAL INFORMATION

Please use this area to indicate any limitations or restrictions and any additional information for camp health care staff:

CAMP USE ONLY

Illnesses experienced in the last 30 days ___ Yes ___ No

If Yes, _____

Any recent updates to health history ___ Yes ___ No

If Yes, _____

Screened by _____ Date: _____

Overnight Campers only:

Head check: ___ Positive ___ Negative

Skin Lesions/Bruising: ___ Positive ___ Negative

Parent/Legal Guardian Authorization for Camper Release

Camper/s Name _____

The Camper/s named above may be picked up at camp by persons listed below.

Please list anyone that you permit to pick up your child. If someone attempts to pick up your child that is not on the list, the staff **will not** allow them to leave the property without consent from a parent/guardian. We also reserve the right to ask for picture I.D.

BE SURE TO LIST PARENT/GUARDIAN NAMES

NAME	RELATIONSHIP	PHONE #
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

Signature of Parent/Guardian _____ Date _____

Unless Carson Simpson Farm is restricted by a court order directed expressly to the camp, CSF is hereby authorized to release the child to either parent (or persons authorized by either parent) at any time during the day even if both parents do not live at the same address.

Carson-Simpson Farm - Camper Profile

Dear Parent,

Please complete this profile, regardless of whether your child is new to Carson-Simpson Farm, or a returning camper. Our counseling staff would like to get to know your child better prior to his/her arrival to camp. The information you provide will be treated with the utmost discretion. Thank you, in advance, for your attention to this form.

Camper's Last Name _____ First Name _____

Camper Info

1. Are there Emotional or Physical Limitations or Fears about which we should be aware? Yes ___ No ___

If Yes, please specify: _____

2. Is your child under the care of a psychologist/psychiatrist/therapist? Yes ___ No ___ If Yes, explain nature:

3. Are there outside intervention agencies involved (in school or home care) in your child's development? Yes ___ No ___

If Yes, please specify: _____

4. Does your child receive support in school? Yes ___ No ___ If yes, please specify _____

Family Info

1. List family members with whom the child lives primarily, or if shared residences, specify schedule:

2. Are there any changes or conditions that might impact your child's well-being, such as illness of a family member, parents expecting a new baby, parent's separation or divorce, or move to a new home or school, etc? _____

3. Are there any visitation restrictions of which the camp must be aware? Yes ___ No ___ If Yes, please specify:

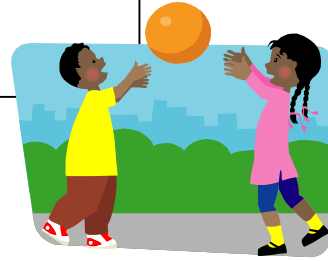
If such a restriction exists, a copy of the current court order must be on file at camp. Every camper, regardless of family issues or disputes, must be safeguarded when in our care. Without legal documentation, we cannot enforce any instructions with regard to parental custody/visitation.

Other Info.

1. Any other information you'd like us to know about your child: _____

Parent Signature _____ Date _____

Carson-Simpson Farm
Christian Center
3405 Davisville Road
Hatboro PA 19040
215-659-0232
JoatCSFarm@aol.com



Dear parents;

As we are preparing to train our staff for the summer of 2012 we would like to include some parents' perspectives. If you would be willing to complete this form, it would help the staff get a good idea of some of the concerns parents have when sending a child to camp. Our training weekend is in early June, so if you return this to us by June 1 we could include your input.

Thank you for your support in helping us train our summer staff in preparation to work with your children.

Sincerely,

Meg Neitz
Meg Neitz
Program Manager

JoAnne Carroll
JoAnne Carroll
Day Camp Director

As a parent sending a child to summer camp, what are your

Fears

Wishes

Please do not ever ..

A word of encouragement for the staff .

Special Events for the Family at Carson-Simpson Farm

Put these dates on your calendar NOW! Plan to join us for as many of these events as you can. These will be our fundraisers for the summer. Due to the aging of our trees, **all funds raised in 2012 will go to purchase new ones.** We thank you in advance for your support of Carson-Simpson Farm.

Family Camp Night and Silent Auction . July 18 5 - 8PM (rain date 7/19)

- A **FREE** event for the whole family.
- Pool will be open from 5:45 - 6:45.
- Join your child in a game of Ga-ga, giant 4-square, basketball or other camp activities.
- You are welcome to bring a picnic dinner. There will be food available for purchase also.
- Family members and friends are welcome, however all children must be watched over by an adult. CSF staff will not be responsible for children during this event.
- CSF campers and staff will provide entertainment on the blacktop from 7:30 - 8:00.
- **Silent Auction** - All items will be available for bidding starting at 7AM. Bidding will end at 7:30PM, and items will be available to take at 8:00.
- **If you, your business or your employer have an item or service you would like to donate for the Silent Auction, please contact JoAnne at camp at 215-659-0232 or JoatCSFarm@verizon.net.**



Rita's Celebrity Scoop . July 26 6 - 8

Join our own celebrities - CSF camp staff - at the Rita's on York Rd. in Abington. CSF staff members will be taking your orders for water ice, Blendinis and Gelatis. Bring the whole family and join in the fun!

Disciple Car Wash . August 8 (rain date 8/9) 10 - 2

The Disciples in our Cornerstone Youth Leadership Program will be washing cars to raise funds to purchase a tree...or two.



CSF Sing-a-Thon . August 15

Sponsor your child for 45 minutes worth of non-stop musical fun! We will be singing old camp favorites, worship songs, and just plain silly songs. We will sing non-stop about love, spiders, poison ivy, frogs, super heroes, Moses, God and heaven. By the time we are done we hope to have covered every song we have ever sung at CSF! This is a fun way for everyone to be involved in raising some funds for the ministry here at Carson Simpson.

CSF Kids Give Back . Kick off date - June 26 Ending date - August 10

The Campers are invited to participate in this year's CSF Kids Give Back. We will be collecting food for the Inter-Faith Housing Alliance Food Pantry. All donations will go to help families in our local area. The whole family can shop together for kid friendly food donations like mac 'n' cheese, peanut butter, jelly, soup, juice boxes, fruit snacks, etc.



Check your Parent's Survival Guide (which you will receive the first day of camp) and the White Board at the sign in table for updates to these events, and for information on weekly themes, dress-up days and specials for the campers each week.

Creative Camp Options 2012

3rd & 4th Grade Pool Party - For children completed 3rd or 4th grade

June 27 7:00 - 8:30 Cost: \$8.00

Come swim under the lights and play some fun pool games with your friends from camp. A snack will be provided.

Pre-Teen Overnight Option - For preteens who have finished grades 5 - 6

July 16 - 20 Cost: \$45.00 - Cost will be adjusted if registered for any extended care.

Boys will stay overnight Wednesday and Thursday (max. 25)

Girls will stay overnight Monday and Tuesday (max. 25)

This option is a chance for the older campers to spend a couple of nights together in the midst of the summer day camp program. Campers will register for the Day Camp week 5 program and then add the overnight option. The program in the evenings will include night swims, bonfires, games, and devotions.

NEW!! Swim Enhancement Program - For children completed 1st - 6th Grade

July 9 - August 3 (4 two-day sessions per level) 3:30 - 4:30 Cost: \$20.00 per 2 day session

This program is for campers who need a little extra help to reach the next pool band level. Campers can register for any or all 4 sessions available. The Monday/Wednesday sessions will be for those campers who are trying to attain the green (highest level) band. Tuesdays and Thursdays will be for those campers seeking the blue (middle level) band. There is a maximum of 5 campers per guard for each session so campers will receive plenty of individual attention.



Guard Start - For children and youth ages 11 - 14

August 6 - 10 Monday through Friday 4 - 6PM

Cost \$75.00 - If you also need AM Care - cost for both is \$100.00

The Red Cross Guard Start Program is an introduction to pool safety, basic CPR, spotting, and beginner guard techniques. This program is used to develop interest in taking the full Lifesaving course when students turn 15. Each student will receive a workbook. Led by CSF Pool Staff.

Please contact office staff for more information or to register for any of these options.