

Emergency contact other than parent:

Name: _____

Phone: (____) _____

Medications* _____

Specific Restrictions _____

Other _____

PRST STD
US POSTAGE
PAID
SHIPSEWANA, IN
PERMIT NO. 6

*Parents will be asked to complete additional information for prescriptions being administered during camp.

Track A: Classic Track B: Aquatic

To assist with planning swim lessons, please circle the *Learn to Swim* level your child has completed. If they have never participated in American Red Cross swim lessons please circle "None". (Track B Only)

None 1 2 3

Credit Card payments at www.brethrenretreat.org

Day Camp Cost \$ 90

Extended Care Fee + \$

Camp Photo (\$5 each) + \$

Total Cost \$

Payment Enclosed Online Payment

Scholarship Request: Partial @ 25%
 Full @ 75 %

(Assistance must be requested by Financial Aid Application)

To register, please fill out the above form and send it along with your payment to:

**The Brethren Retreat
at Shipshewana Lake
9095 W. 275 N.
Shipshewana, IN 46565**

**THE BRETHERN RETREAT
AT SHIPSEWANA LAKE**
9095 W. 275 N.
Shipshewana, IN 46565
www.brethrenretreat.org
260.768.4519

RETURN SERVICE REQUESTED



TIME: 9:00 am – 4:00 pm
Extended Care available from 8:00 am – 5:00 pm. Extra \$10 per day.

AGE: 6-11 yrs old by Sept. 1st of the calendar year

COST: \$90 (Includes 5 day's activities led by our trained college-age staff, a well balanced lunch, and an afternoon snack)

ACTIVITIES: Aqua Jump with Mini Blob & Slide, Archery, Basketball, Bible Lessons, Canoeing, Crafts, Field Games, Gaga Ball, Human Foosball, Nature Study, Singing, Swimming, Volleyball ... and much more!



FINANCIAL ASSISTANCE: It is the desire of the Brethren Retreat that no one is discouraged from attending a camp or retreat program due to financial hardships. Families may apply for financial assistance through the Brethren Retreat's Campership Fund by requesting an application at www.brethrenretreat.org or calling the Camp Office

A FREE PICNIC DINNER will be provided for the campers and their families following a closing program at 4:00 pm on Friday.



NEW!! Two different tracks to choose from:

TRACK A: Classic Day Camp will include a variety of traditional camp activities such as: crafts, swimming, archery, canoeing, games, hiking, and skits.

TRACK B: Aquatics Day Camp will include American Red Cross Swim Lessons (Levels 1-3 only), Water Safety Lessons, learning the basics of canoeing and kayaking, and other water related activities. Campers will participate in Bible Lessons and some large group activities with the Classic Day Campers. They will also have the chance to try out some of the other traditional camp activities.



CAMP SHIP SHEWANA COMMUNITY DAY CAMP REGISTRATON

First Time Camper

Name _____

Address _____

City _____

State _____ Zip _____

Parent / Guardian _____

Email _____

Home Phone _____

Cell Phone _____

Grade Going Into _____ Sex _____

Age _____ DOB ____/____/____

Church _____

Pastor _____

Shirt Size: Youth - S M L Adult - S M L

In signing this document, I hereby certify that the written information is accurate and give permission for the use of photography and video of my child to be used in camp publicity; for my child to be transported in camp owned vehicles to and from off campus activities; for the release of medical records in case of illness or injury; and for the camper named herein to engage in all camp activities, except as noted by me or an attending physician. I also give permission to the physician selected by the Brethren Retreat to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child as named above.

Parent or Guardian Signature _____ Date _____