



**girl scouts**  
of western ohio

**Side Cut Day Camp**  
**Nature's Secrets**

*Side Cut Volunteer Day Camp ID #6A*

**June 8-12, 2026**

Side Cut Metropark Maumee, OH 43537

9 a.m. – 4 p.m.

Registration Deadline: May 1, 2026

registrations must be dropped off or postmarked no later than this date

**NO LATE REGISTRATIONS WILL BE ACCEPTED**

*Please consider volunteering! We can't do it without you! Not only do you receive one discounted camper, but your leadership will allow other campers to participate!*

**OPEN FOR NEWS ABOUT DAY CAMP**

Dear Caregiver:

Thank you for your interest in sending your Girl Scout to volunteer day camp! At day camp, girls will discover, connect and take action as they learn to live the Girl Scout Law and make a difference in the world. They will discover their values and talents through a variety of outdoor activities. Girls will also connect with other girls and adults, learn how to work together as a team and use that teamwork to take action and make the world a better place.

We hope you will see the value in this progressive opportunity and will help keep the history and tradition of the day camp alive by volunteering at camp with your Girl Scout. A dedicated team of specially trained volunteers who work year-round to make this enriching opportunity possible runs this camp. Volunteer day camps are staffed completely by volunteers, so we welcome moms, dads, aunts, uncles, grandparents, and other adult friends to volunteer. A background in Girl Scouting is not necessary, just an enthusiastic attitude and a desire to help girls learn and grow.

For continued progressive opportunities in Girl Scouts, we also offer many other outdoor and camp opportunities listed on our website at [gswo.org](http://gswo.org).

Below you will find basic information about day camp. Detailed information and instructions will be sent in a confirmation packet after you have registered. Note: there are separate forms for youth and adults. All pages with fees must be turned in to be registered and until you receive a confirmation packet via email, your camper's placement is not guaranteed. **LATE REGISTRATIONS WILL NOT BE ACCEPTED.** Look for confirmation packets in your email by May 25th. For additional questions or concerns, please contact Jenni Fulop, Camp Director, by email at [SideCut.gsdaycamp@gmail.com](mailto:SideCut.gsdaycamp@gmail.com).

**CAMP DESCRIPTION:** You will be learning Girl Scout skills and traditions including songs and games. Daily activities will center around our theme of **Side Cut Day Camp Nature's Secrets**.

**PROGRAM AIDE (PA) OPPORTUNITY:** *Just like last year, our 7<sup>th</sup> graders will all be campers. The 7<sup>th</sup> grade unit will have some activities unique to them in order to prepare them to Program Aides the following year.* PAs are Girl Scouts in grades 8 through 12. In order to attend camp as a PA, the PA is expected to attend the Program Aide training session offered at Side Cut Metropark in the **Riverview Shelter**. You will enter from River Road and proceed to the main parking lot. The Riverview Shelter is near the playground and is the building in which crafts are held each year at camp. Training will help you with skills you need to assist adults and girls in your day camp unit. At training you will learn the expectations of your duties at camp this year. **All PAs MUST attend one of the training sessions listed in the Volunteer Opportunity section OR THEY WILL NOT BE ABLE TO ATTEND CAMP!!**

**VOLUNTEER OPPORTUNITY:** Camp can be as much fun for the volunteers as it is for the girls! It's not just for troop leaders and moms! Here is what some of our volunteers have to say:

*"Side Cut Day Camp was such a fun volunteer experience! Just about everything you could possibly need is provided, the programs are enriching and informative, the burden on the volunteers is minimal, and knowing you are helping some awesome kids make some incredible memories is worth it alone. And the way the park seems transformed for the week is incredible. I felt like I was away at camp, not 10 minutes from my house."*  
~Jen~

*"As a first time volunteer that isn't exactly physically fit I was nervous on if I could handle the week or not. It was so well organized and the help from all the PA's made the week totally doable. The energy from the organizers and girls is seriously the most amazing! Very thankful I pushed myself and ended up enjoying the week!"* ~Rebecca~

*"I enjoy volunteering for Side Cut Day Camp. It gives me an opportunity to test and improve my skills as a leader, meet new people and mentor young girls. I enjoy showing girls what camping is all about and showing them new things they wouldn't experience any other way. But the best part is when I run into those girls I led a*

*few months later and they hug me and are excited to see me. It shows that I helped them have a great experience.” ~Wendy~*

*“The Side Cut Metropark team does a great job preparing and maintaining the grounds to make our outdoor day camp experience exciting and fulfilling. The girls learned a lot about our environment and made lifelong memories.” ~Jim~*

*“I was a Girl Scout as a kid and went to day camp at Pearson Metropark. Having the chance to volunteer at Side Cut just makes my heart sing! I can only hope I can have a positive influence on the next generation of amazing girls.” ~Marianne~*

If an adult volunteers for the entire week, they will sponsor one camper FREE for the week. We are always in need of extra help. We will also take adults who can only volunteer for part of the week however full week volunteers will receive priority acceptance. If an adult volunteers for two-four days (minimum 2 days for camper discount and anything less than five is part time) , they will sponsor one camper at a discounted cost of \$55. The sponsored camper does not need to be their own child but MUST submit registration with the volunteering adult.

**Volunteers must be registered with Girl Scouts. They must have completed the volunteer application process and background check, as well as attend training to prepare them for their role at camp.**

**Training is mandatory for all volunteers.** The mandatory training date for all volunteers is **Monday May 18, 2026 from 6 p.m. - 8 p.m.** or **Wednesday May 27, 2026** at Side Cut Metropark in the **Riverview Shelter**. You will enter from River Road and proceed to the main parking lot. The Riverview Shelter is near the playground and is the building in which crafts are held each year at camp. PA training will be held on **Tuesday June 2, 2026 from 6 p.m. – 8p.m.** at Side Cut Metropark in the **Riverview Shelter**. New volunteer and PA training will go over cooking skills, equipment provided, scheduling and other skills necessary to have a good week at Day Camp. We ask that you do not bring Tag-a-longs to this training.

**CHILD CARE:** We offer a tag-a-long unit as a childcare option for just \$40 for the week. This is for girls age 3 to Kindergarten and boys ages 3 to 12. All children must be potty trained. A detailed Tag-a-long letter will come out closer to camp.

**TRANSPORTATION:** Transportation to and from camp will be the responsibility of the caregiver. Camp starts at 9 a.m. Campers may not arrive before 8:45 a.m. Camp ends at 4 p.m. We will have staggered pick-up times to help ease traffic congestion. Campers whose last names begin with A-L pick-up time is 3:45 p.m. and those who begin with M-Z pick-up time is at 3:55 p.m. All campers must be picked up no later than 4 p.m. Campers not picked up by 4:00pm will be brought to the “office” for pick up there. During, inclement weather it may be necessary to pick your camper up earlier in the day. Please be sure to sign up for alerts through the Remind Notification System.

**DIRECTIONS:** Camp is located at Side Cut Metropark, 1025 West River Road, Maumee OH 43537. Camp will be on the riverside of the park across from the playground.

**HEALTH:** A first aider will be available at camp. Check with your physician to see if a tetanus booster or any immunizations are necessary. Special diets and medications are the responsibility of the caregivers. Campers carrying emergency medications such as Inhalers or EpiPens are required to check in with the nurse each morning to confirm the camper has the medication on them and where it is located in case of emergency.

**FOOD: Side Cut Day Camp is nut free.** Please do not bring or pack any items containing nuts. If your child has a nut or other food allergy, please be sure to include this in your registration packet AND mention it to your child’s Unit Leader upon check-in on the first day. We will attempt to accommodate food allergies, but this is not always possible so please plan to provide your camper with a packed lunch if necessary. Also please note that while we do our best to maintain a nut free area, Side Cut Metropark is a public park, and we cannot guarantee that the park is nut free.

**DAY CAMP UNITS:** Day camp is a “Beyond-the-Troop Experience.” Girls will be placed randomly based on program level and the girl’s grade in the fall. **WE WILL NOT ACCEPT BUDDY REQUESTS.**

**CLOTHING:** Campers will get dirty and wet. Proper dress for the weather is necessary. No halters or sandals. Wear closed toe sturdy shoes, socks, and head cover. Bring rain gear (no umbrellas) and a change of clothes. All items should be labeled with the Campers name.

**WEATHER:** Camp is not cancelled because of light rain, but will be cancelled for heavy rain, high winds, thunderstorms, and tornado watches and warnings. If a weather advisory is released during the day, your camper will need to be picked up immediately. We will use the Remind notification system to notify families if camp is cancelled. Details will be included in your confirmation packet.

**INSURANCE:** Every registered Girl Scout and registered adult member is automatically covered under the basic plan by Girl Scouts of the USA. This plan is effective from October to the following October. This insurance provides up to a specified maximum for medical expenses incurred as a result of an accident while a member is participating in an approved Girl Scout activity but is supplemental to individual’s primary insurance.

**CAREGIVERS:** If you feel this camp is unsafe or a hazard to children, you should contact **Lucas County Children’s Services Department at 419.213.3200.**

**PAYMENT POLICY:** Payment in full must be received with registration for registration to be processed. If using Cookie Dough as partial payment, this payment must be processed by wonder of the Cookie Dough by going onto the [GSWO.org](https://www.gswoweb.org) website. We no longer have the means to process cookie dough payments for people but will gladly accept them to be used, but they must be used by the person who owns the cookie dough and you must select Side Cut Day Camp. You need to contact Customer Care if assistance is needed. If using Financial Assistance, this request must be referenced on registration. At times troops will cover the cost campers within their troop and send a single payment. In this instance, please submit all troop registrations together with payment in full included.

**REFUND POLICY:** Full refunds will be given until May 2, 2026 or if camp reaches capacity. Refunds will be issued at half the cost of camp until May 9, 2026. No refunds will be given after that date except for one of the reasons listed below.

1. Illness or exposure to a communicable disease.
2. Required attendance at summer school (determined after May 9, 2026).
3. Camp capacity is reached; refund will be sent out by June 20, 2026.

To request a refund, contact Jenni Fulop, Day Camp Director, at [SideCut.gsdaycamp@gmail.com](mailto:SideCut.gsdaycamp@gmail.com). An email confirmation will be sent to you within a week of receiving the request.

888.350.5090 | [gswoweb.org](https://www.gswoweb.org)  
[customer-care@gswoweb.org](mailto:customer-care@gswoweb.org)



In Partnership With:



**FINANCIAL ASSISTANCE:** Financial assistance may be available for girls who want to attend but are unable to do so because of limited family income. Applicants must pay at least \$55 of the day camp fee. Financial assistance must be applied for online and confirmation of request included with registration.

<b>Activity Costs:</b> Cost includes camp patch, t-shirt, programs, food and activities associated with camp.	
<b>Girl Scout</b> (Scouts entering grades first – seventh in fall 2024)	<b>\$95</b>
<b>Girl Scout Program Aide</b> (Scouts entering grades 8 - 12 in fall 2024) Girls must complete the PA training to attend camp	<b>\$40</b>
<b>Sponsored Camper of partial week volunteer</b> (one discounted Girl Scout per adult volunteer)	<b>\$55</b>
<b>Tag-a-longs of volunteering adults</b> (Girls ages 3-5 and boys ages 3-12. All children must be potty trained)	<b>\$40</b>
<b><i>Additional fee for non-registered girls and adults for registration through Sept 2026</i></b> <i>(Register online at <a href="https://www.gsw.org/en/get-involved/join.html">https://www.gsw.org/en/get-involved/join.html</a>)</i>	

**ALL ADULT VOLUNTEERS MUST BE REGISTERED WITH GIRL SCOUTS FOR THE 2025-2026 YEAR AND HAVE COMPLETED AND PASSED A BACKGROUND CHECK!**

**ALL CAMPERS (except Tag-a-longs) MUST BE REGISTERED WITH GIRL SCOUTS FOR THE 2025-2026 YEAR.**

Please complete all forms in full and mail or drop off registration packet to:

**GSWO Side Cut Day Camp**  
**Attn: Jenni Fulop**  
**1937 E Crest Dr.**  
**Toledo, OH 43614**

**Checks should be payable to: GSWO**

**No registrations will be accepted and no confirmations will be sent to campers without full payment.**



## Day Camp ID # 6A Side Cut Volunteer Day Camp June 8-12, 2026

Every camper, Program Aide, and Tag-a-long who attends camp must fill out all youth pages of the registration packet. Please use black or blue ink only. Please make sure to write legibly.

Camper's Full Name: \_\_\_\_\_ Prefers to be called: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_

School: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_

Caregiver's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Caregiver's email: \_\_\_\_\_

Troop Leader's Name or Troop #: \_\_\_\_\_ Service Unit Name or #: \_\_\_\_\_

**For girls who are NOT a registered Girl Scout for 2025-2026**  
**Side Cut Day Camp can no longer register Adults or Girls through camp for GSWO.**  
 Please visit [www.gswo.org/en/get-involved/join.html](http://www.gswo.org/en/get-involved/join.html) to register with Girl Scouts.

- Units:
- Girl Scout (entering grades first – seventh in Fall 2025) \$95
  - Program Aide (entering grades 8-12 grade in Fall 2025) \$40
  - Tag-a-longs (only available for volunteers) \$40

Volunteering Parent Name \_\_\_\_\_

T-shirt Sizes: **YOUTH:**  XSM  SM  MED  LRG **ADULT:**  SM  MED  LRG  XL  XXL

\$ \_\_\_\_\_ Amount family can pay (applicants must pay at least \$55)

+ \$ \_\_\_\_\_ Financial assistance requested

+ \$ \_\_\_\_\_ Digital Dough used (must be completed by caregiver ONLY online and proof required)

= \$ \_\_\_\_\_ TOTAL

TOTAL FEES (FOR OFFICE USE ONLY)	
Day Camp Fee	\$ _____
<b>TOTAL Fees Due</b>	\$ _____
Volunteer Name (if credit applied)	_____
Payment type/Check number	_____
Date Received	_____

Submit completed registration packet (registration form, and health form) and fees payable to GSWO to:

**GSWO Side Cut Day Camp; Attn: Jenni Fulop; 1937 E Crest Dr; Toledo, OH 43614**

Girls will be accepted on a first come, first served basis based on the number of volunteers available and according to your registration's postmark. Campers are not guaranteed a spot until confirmation is received. Priority will be given to girls with caregivers who are volunteering.

I give full permission for my daughter/son to attend day camp and participate in all phases of activities, except those noted. I have read the Day Camp flier and registration packet and agree to cooperate with the guidelines listed. I understand that anyone transporting my child must show their identification before my child will be released to them. If I cannot be reached in an emergency, I give permission to give emergency treatment to my child.

Caregiver's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Quick Reference Form

Camper's Name: \_\_\_\_\_

Caregiver's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Additional Emergency contact in the event we cannot reach caregiver:

Name	Relationship to girl	Phone #
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### TRANSPORTATION INFORMATION

I understand that my daughter will **ONLY** be released to myself, her emergency contact and the people listed below. I also understand that proper ID must be presented at time of pick up:

Name	Relationship to girl	Phone #
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Name	Relationship to girl	Phone #
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Name	Relationship to girl	Phone #
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### SPECIAL NEEDS/ACCOMODATIONS

Are there any diagnoses that camp staff/leaders should be aware of? Examples ADHD, Autism Spectrum Disorder, Sensory Processing Disorder, etc. If yes, please list: \_\_\_\_\_

Are there any special needs or accommodation required? If yes, please explain: \_\_\_\_\_

Are there any known behavior and/or emotional concerns? If yes, please explain: \_\_\_\_\_

Allergies: \_\_\_\_\_

Dietary modifications: \_\_\_\_\_

Do you consent to Girl Scout day camp staff/leaders assisting your participant in application of bug spray and/or sunscreen **that your participant provides**?  Yes  No



## Additional Information, Release and Health History Form

Camper's Name: \_\_\_\_\_

### MEDICAL INFORMATION

This section **MUST** be completed by all girls and adults attending in order to register for camp.

Date of last injection – if this information is no longer available, write C for childhood if immunized as a child.

DPT: \_\_\_\_\_ Measles/Mumps: \_\_\_\_\_ TB: \_\_\_\_\_ Polio: \_\_\_\_\_ Tetanus: \_\_\_\_\_ Hepatitis: \_\_\_\_\_

Will medications be required at camp?  No  Yes, please specify: \_\_\_\_\_

(Medication must be in original container with written instructions and given to the nurse at camp.)

Are medications currently being taken at home:  No  Yes, please specify: \_\_\_\_\_

Is participant in good physical condition with no serious illness or operation since last health exam?

Yes  No If no, please specify: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

### INSURANCE INFORMATION

Is the participant covered by family medical/hospital insurance?  Yes  No

If so, indicate carrier or plan name: \_\_\_\_\_ Group #: \_\_\_\_\_

Name of insured: \_\_\_\_\_ Relationship to participant: \_\_\_\_\_

Social security number of policyholder or insurance ID number: \_\_\_\_\_



## CAREGIVER PERMISSION AND CONSENT TO TREATMENT

(Name of participant) \_\_\_\_\_ is in good physical health and has had a physical examination within the past 12 months. Participant will be kept home and Camp Director will be notified immediately if my camper is exposed to a confirmed COVID-19 case or experiences COVID-19 symptoms.

Participant has my permission to attend Girl Scout day camp and to participate in all activities except those noted. I have read the day camp flier and registration packet and understand and agree to cooperate with all regulations. I further understand that the fee is refundable only for the reasons noted on the flier and registration packet.

**Emergency Medical Authorization:** This health history is correct to the best of my knowledge, and the person herein described has permission to engage in all prescribed Girl Scout activities except as specifically noted.

**Authorization for Treatment:** In the event reasonable attempts to contact me at the provided phone numbers have been unsuccessful, I hereby give my consent to the administration of emergency medical treatment by any licensed physician or dentist and to transfer the participant to any reasonably accessible hospital facility. This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring in the necessity for such surgery, are obtained prior to the performance of such surgery.

Caregiver Signature: \_\_\_\_\_ Date: \_\_\_\_\_





# Adult Registration Form

Day Camp ID #6A Side Cut Volunteer Day Camp June 8-12, 2026

Please use black or dark blue ink only. Please make sure to write legibly.

Volunteer's Name: \_\_\_\_\_ Preferred camp name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Are you a registered Girl Scout?  Yes  No Are you a leader/assistant leader?  Yes  No

Troop #: \_\_\_\_\_ Troop Grade Level in Fall: \_\_\_\_\_ Service Unit Name or #: \_\_\_\_\_

**For adults who are NOT a registered Girl Scout for 2025-2026.**  
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Please visit [www.gsw.org/en/get-involved/join.html](http://www.gsw.org/en/get-involved/join.html) to register with Girl Scouts.

T-shirt Sizes: **Adult:**  SM  MED  LRG  XL  XXL  XXXL  4XL  5XL

Adult volunteers, please check all that apply:

I will be at Side Cut Day Camp:

All week  Mon, June 8  Tues, June 9  Wed, June 10  Thu, June 11  Fri, June 12

Do you have any camping experience?  Yes  No Have you previously volunteered at Side Cut Day Camp?  Yes  No

I would like to work with (this is a request, we cannot guarantee your unit until confirmations are sent out):

Daisies  Brownies  Juniors  Cadettes  Tag-a-longs

I want to work in my daughter's unit; her name is: \_\_\_\_\_

I prefer not to be with my daughter's unit; her name is: \_\_\_\_\_

I would like to work with the adult listed here: \_\_\_\_\_

*We will try to meet your requests, but volunteer placement will be made based on the needs of the camp.*

I will attend Day Camp Training on **Monday May 18, 2026** from 6:00-8:00 p.m. at Side Cut Metropark Riverview Shelter

I will attend the Make-up Day Camp Training on **Wednesday May 27, 2026** from 6:00-8:00 p.m. at Side Cut Metropark Riverview Shelter

I will attend New Leader Day Camp Training on **Tuesday June 2, 2026** from 6:00-8:00 p.m. at Side Cut Metropark Riverview Shelter

Submit Adult registration packet (Adult registration form and Adult health form):

**GSWO Side Cut Day Camp; Attn: Jenni Fulop; 1937 E Crest Dr. ;Toledo, OH 43614**

I have read the Day Camp flier and registration packet and agree to cooperate with the guidelines listed. I will be there on the days I have indicated above. I will be at camp by 8:30 a.m. until 4:15 p.m. on those days. I will attend day camp training as required. I also certify that I am registered with Girl Scouts and have completed and passed a GSWO background check. I understand that training and evaluation at the end of camp are part of the job description. I will display behavior that exhibits the Girl Scout Law.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## Adult Medical History

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Dentist's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Member ID #: \_\_\_\_\_

Group ID#: \_\_\_\_\_ Insured's Name: \_\_\_\_\_

### EMERGENCY CONTACTS

Name: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship to Participant: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Please list any conditions that a first-aid or health provider would need to know such as?**

Allergies:

Medications:

Chronic Illnesses, injuries or limitations:

**My immunizations are up to date:**  Yes  No

In the event that reasonable attempts to contact my designated person in an emergency have not been successful, I hereby give my consent for the administration of any treatment deemed necessary by medical personnel. This health history is complete and accurate.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Date





# ADDITIONAL INFORMATION SURVEY FOR VOLUNTEERS & PROGRAM AIDES

Name: \_\_\_\_\_ Camp Name (if you have one): \_\_\_\_\_

How long have you been involved in Girl Scouts? \_\_\_\_\_

I would like to be a unit leader? \_\_\_\_\_ I would like to be a unit assistant? \_\_\_\_\_

List something you did as a Girl Scout that had special meaning to you and why. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What are your skills/talents?

Singing

Organizing/Paperwork

Fire Starting

Hiking

Games (to fill time)

Crafts

Outdoor cooking

Other: \_\_\_\_\_

It is tradition for adults and PAs to use Camp Names during Day Camp. These names usually come with a story and we would love to hear yours. What is your camp name and why? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PAs:** What age group are you most comfortable working with and why? \_\_\_\_\_

\_\_\_\_\_

**PAs:** What experience do you have working with younger girls? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PAs:** What is your favorite thing about working with younger girls? \_\_\_\_\_

\_\_\_\_\_

**PAs:** What is your least favorite thing about working with younger girls (be honest)? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

