

Mason Twilight Enchanted Forest Camp 7B

Pine Hill Park
211 Kings Mills Rd.
Mason, OH 45040
Monday-Thursday
June 12-15, 2023
6:30-9:00 p.m.

Cost: Grades 1-6 \$65
 Grades 7-12 \$35

Patches and T-shirts are
included in camp cost for girls,
extras can be purchased.



Question?

Contact: Emily Huisman at 513.448.7455 or Nichole Leporati at 513.306.8658.

13604/2023





Twilight Enchanted Forest 7B

Camp Information

Dates: Monday-Thursday, June 12–15, 2023
Time: 6:30–9:00 p.m.
Location: Pine Hill Park, 211 Kings Mill Rd., Mason, OH 45040
Day Camp Directors: Nicole Leporati at 513.306.8658 or Emily Huisman at 513.448.7455

Dear Caregiver:

Thank you for your interest in sending your Girl Scout to volunteer day camp. At camp, girls 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. Please complete and return a Camper Registration, Health History, and Photo Release Forms found in this packet, for each camper.

Adults Volunteers needed:

Day camp is staffed entirely by adult volunteers. Volunteer-led day camps are run by a dedicated team of specially trained volunteer directors who work year-round to make this enriching opportunity possible. Each camp recruits and trains their own volunteers to help lead units, activities, and offer support at camp. We welcome moms, dads, aunts, uncles, grandparents, and other adult friends to volunteer, without the support of volunteers camp is not possible. A background in Girl Scouting is not necessary.

All volunteers must complete the Adult Camp Registration, Health History, and Photo Release Forms found in this packet. If you are not a current approved Girl Scout volunteer, you will be asked to complete a Girl Scouts of Western Ohio Volunteer Application, a background check, and become a registered member of Girl Scouts.

Training is mandatory for all volunteers. PA training will be Saturday, June 10, 2023, 12:00–4:00 p.m. Adult training can be completed during PA sessions, once registration has closed. It can also be completed individually, if needed. The date and time listed is our dry run of camp, training only takes about 15 minutes and can be completed anytime that day. RSVP to Emily Huisman at 513.448.7455 or twilightcampmason@gmail.com.

Camp Details

This year's theme for camp is Enchanted Forest. Come and join us as we sing camp songs, do science and nature experiments, get messy, and run our famous obstacle course. We do request that you bring a water bottle for your own use.

Transportation: Transportation will be the responsibility of the caregivers. Drop off and pickup will be at the park, near the small pond. Campers should arrive by 6:30 p.m. and be picked up by 9:00 p.m.

Directions to camp: Pine Hill Park, 211 Kings Mills Rd, Mason, Ohio 45040. You can park in the parking lot at the park or at the community center and walk over. Often, folks find it easier to park at the far end of the community center parking lot and enter the park there, by foot. It is closer to headquarters and checking in, than if you were to park at the park entrance and walk across the dam. Once you enter the park, we are located on the side with the small pond, near the gazebo. You will see multiple canopies and the trailer we use for storage.

Health: A nurse or first aider will be available at camp. Check with your physician to see if a tetanus booster or any immunizations are necessary. It is the responsibility of the caregiver to ensure that all necessary medications get to camp. Routine medication is unable to be dispensed at camp. Please indicate on the health form any emergency medication that your camper needs so the camp staff is aware of any ongoing potential concern. On the first night of camp, please check in with the Camp Nurse at the First Aid Station so your camper is aware of the location and the individuals she will need to connect with throughout camp. Campers may carry emergency medications such as epipens, albuterol inhalers, etc to be self administered. Please instruct your camper to notify the Camp Nurse when they administer these emergency medications at camp. We will notify the caregiver of the ongoing medical situation. Ensure that any allergies or dietary restrictions are recorded on your Girl Scout's Health History form and pointed out during check in.

Clothing: Proper dress for the weather is necessary. No halters or sandals. Wear sturdy shoes, socks, and head cover (if desired). Campers should wear comfortable clothing and closed toes shoes. They'll get a camp shirt on the first day and should wear that each night to camp. We'll let you know which day they should wear a bathing suit for our water night. Please apply sunscreen and bug spray prior to arrival, as we cannot provide this. Camp is not canceled because of rain.

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, after the individual's primary insurance pays out.

Caregivers: If you feel this camp is unsafe or a hazard to children, you should contact **Warren County Children's Services Department at 513.695.1546 or Warren County Combined Health District at 513.695.1228.**

Activity Costs:

Cost **includes** girl T-shirt and patch.

Girl Scout Daisies/Brownies/Juniors (Grades K–6)	\$ 65
Girl Scout Cadettes/Seniors/Ambassadors/PAs (Grades 7–12)	\$ 35
Membership fee to register a girl or adult if needed	\$ 25
Extended Membership fee for non-registered new girls and new adults, that have not registered in the last 5 years.	\$ 35
(All girls and adults participating in camp must register as Girl Scouts.)	

T-shirts for each volunteer attending (optional) \$10/each - *unless volunteering for 4 nights.

This year! If you are a new girl registering to attend day camp who will continue as a Girl Scout in the fall as a member of a troop, you can select the Extended Year Membership for \$35. This will register you for the remainder of this membership year (covering your participation in day camp) and get you all set for the next membership year as well! You will be a registered Girl Scout through September 30, 2024. *New girls include girls who lapsed in membership for at least three full membership years.

Make checks payable to Girl Scouts of Western Ohio (GSWO). Complete the camper registration, health history, and photo release forms and return with payment to:

**Twilight Enchanted Forest Camp
Attn: Nichole Leporati
6400 Amber Court
Mason, OH 45040**

Do not send registrations to the Girl Scout Center. All registration received at the Girl Scout Center will be forwarded to the appropriate day camp on a weekly basis and may cause your child to be closed out of camp. 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 50 percent of the day camp fee. Please include payment for the total amount your family can pay with the registration form.

Refund Policy: Money may be refunded for the following reasons only:

1. Moving out of town.
2. Illness or exposure to a communicable disease.
3. Required attendance at summer school.
4. Camp capacity is reached, and no other camp is attended; refund will be sent withing four weeks of registration date.

To request a refund, send a written request within ten business days from the end of camp to:

**Twilight Enchanted Forest Camp
Attn: Nichole Leporati
6400 Amber Court
Mason, OH 45040**

Camper Registration Form

Twilight Enchanted Forest Camp 7B

June 12-15, 2023

Camper's Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

School: _____ County: _____

DOB: _____ Age: _____ Grade in Fall: _____

Caregiver's Name: _____ Phone: _____

Caregiver's Email: _____

Custodial Care: Mother only Father only Both Other _____

Troop Leader's Name or Troop #: _____ Service Unit Name or #: _____

Camper is a: Girl Scout Member Re-registering Girl Scout New Girl Scout

Units: **1F Y!f Y[]ghYf]b['UbX'BYk ';]f'GWti hg'a i ghidUnia Ya VYfg\]d'ZY'**

School grade in the Fall 2023

Girl Scout Daisies (Going into Grade 1, no fall Kindergartners)

Girl Scout Brownies (Grades 2-3)

Girl Scout Juniors (Grades 4-5)

Girl Scout Cadettes (Grade 6)

Program Aide (Grades 6 and up)



Scan to register as a camper.

Buddy's Name(s): _____

T-Shirt Sizes: Youth Adult SM MED LRG XL XXL

Check Youth or Adult and preferred size

Additional T-shirts and patches may be purchased.

Camp Registration	
Day Camp Fee	\$
Membership Fee for non-Girl Scouts (if applicable)	\$
Patch (extra patches - \$3 per patch)	\$
T-Shirt (extra T-shirts - \$10 per shirt)	\$
Digital Dough	- \$
Financial Assistance Amount Requested	- \$
Total Due	= \$

Membership Fee: All campers must be registered Girl Scouts. To join Girl Scouts, the fee is an additional \$25 for membership through September 30, 2023 or \$35 for new membership through September 30, 2024.

Registrations this year are happening via Rallyhood with credit card payment. Please print out and complete a paper copy of the Health history and photo release forms and return with any cookie dough (if using) to: Twilight Enchanted Forest Camp, Attn: Nichole Leporati, 6400 Amber Court, Mason OH 45040.

Financial Assistance: Register and pay for camp now for the amount that you can pay. A minimum of 50% (\$33 minimum) of camp fee must be paid by camper.

The Camp Director will contact you with the amount of financial aid that you received and if there is a balance owed.



Scan to register as a PA.

Financial Assistance (if needed): Please complete the section below. To be answered by a caregiver: How would this girl benefit from day camp?

I give full permission for my child to attend day camp and participate in all activities, except those noted. I agree to cooperate with the camp guidelines. I understand that my camper must have written permission to leave camp early or with someone other than a caregiver. If I cannot be reached in an emergency, I give permission to give emergency treatment to my child.

Caregiver Signature: _____ Date: _____

Make checks payable to Girl Scouts of Western Ohio (GSWO). Complete the camper registration, health history, and photo release forms and return with payment to:

Twilight Enchanted Forest Camp
Attn: Nichole Leporati
6400 Amber Court
Mason, OH 45040

Deadline: Registrations will be accepted from now until Saturday, April 15, 2023.

Girls will be accepted on a first come, first served basis based on the number of volunteers available and according to postmark. Priority will be given to girls with caregivers who are volunteering.



Adult Volunteer Registration Form

Twilight Enchanted Forest Camp 7B

June 12-15, 2023

Volunteer's Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Cell Phone: _____

Volunteer is a: ☐ Currently registered Girl Scout ☐ Re-registering Girl Scout ☐ New Girl Scout
(If adult is not a currently registered Girl Scout, must submit your \$25 Girl Scout membership fee*.)

Are you a leader/assistant leader? ☐ Yes ☐ No

Troop #: _____ Troop Grade Level in Fall: _____ Service Unit Name/#: _____

Do you have any camping experience? ☐ Yes ☐ No

I would like to be a unit leader and work with:

☐ Girl Scout Daisies

☐ Girl Scout Brownies

☐ Girl Scout Juniors

☐ Girl Scout Cadettes

☐ Girl Scout Seniors

☐ Daughter's Unit

There is an adult at camp that I would like to work with (name) _____

Name of Girl Scout attending with me: _____

Days I can help ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday

T-shirts are free for adults who volunteer for 4 nights.

T-shirts

Sizes: **Adult:** ☐ Small ☐ Medium ☐ Large ☐ X-Large ☐ XX-Large ☐ XXX-Large

Registrations for adults will be accepted postmarked from now until May 15, 2023 - earlier is better.

Total Fees (payable to GSWO)	
Membership Fee for non-Girl Scouts (\$25 if applicable) *	\$
T-shirt (extra T-shirt cost is \$10)	\$
Total Due	\$

Mail completed Adult Registration Form to:

Twilight Enchanted Forest Camp
Attn: Nichole Leporati 6400
Amber Court
Mason, OH 45040



Scan to register as an adult.

*** Additional steps will need to be taken to secure your Girl Scout volunteer role.** All adult volunteers are **required** to have a current Girl Scout membership and updated background check. Membership with a volunteer role will trigger an emailed criminal background check which needs completed once every 3 years.

Adults who do not have a current background check will not be permitted to volunteer.

I acknowledge that COVID-19 is an extremely contagious virus that spreads easily in the community. I agree to adhere to Girl Scouts of Western Ohio and State and local guidelines/mandates. I will take all reasonable precautions to limit potential exposure for girls, volunteers, and families.

Signature: _____

Date: _____



Please print the
following forms
single side only.
Thank you.

Camper Additional Information and Release Form (Side 1)

A separate form (both sides) MUST be completed for ALL camp participants (girls, boys, and preschoolers).

Camper's Name _____ Date of birth _____ Age _____

Address _____

Caregiver's Name _____ Phone _____

Caregiver's Email _____

Medical Information

This section must be completed by *everyone* attending in order to register for camp.

Immunizations:

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

DPT: _____ Measles/Mumps: _____ TB: _____ Polio: _____ Tetanus: _____ Hepatitis: _____

Are medications currently being taken: ☐ No ☐ Yes (if yes, please specify): _____

(Medication **must** be in original container with written instructions and given to the Day Camp Nurse at camp).

Are there any special needs or accommodations required? If yes, please explain: _____

Are there any known behavior and/or emotional problems? If yes, please explain: _____

Allergies and/or dietary modifications: _____

Is participant in good physical condition with no serious illness or operation since their 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 #: _____

Insurance ID number: _____

Name of insured: _____ Relationship to participant: _____

Emergency Contact Information

In case of emergency during day camp hours, if caregiver cannot be reached please contact:

Name: _____ Home Phone: _____

Relationship to camper: _____ Cell Phone: _____

Continue on back



Camper Additional Information and Release Form (Side 2)

Camper's Name: _____

Transportation Information (for registered Girl Scouts only)

I understand that my daughter will be released **only** to the people listed below with proper ID:

Name	Relationship to girl	Phone #
Name	Relationship to girl	Phone #
Name	Relationship to girl	Phone #
Name	Relationship to girl	Phone #

Caregiver Permission and Consent to Treatment

(Name of participant) _____ is in good physical health and has had a physical examination in the past 12 months. 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 understand and agree to cooperate with all regulations. I further understand that the deposit is refundable only for the reasons noted on the flier.

Photography: NOTICE OF FILMING AND PHOTOGRAPHY: By attending a Girl Scouts of Western Ohio event, you enter an area where photography, and audio/video recording may occur. By entering the premises, you consent to photography, audio/video recording and its release of publication, exhibition or reproduction by GSWO and its affiliates and representatives and you waive rights to claims of payment or royalties for its use. You have been fully informed of your consent, waiver of liability, and release before entering the event. If any child or adult does not consent to being in photos or videos, you must let your camp director know at event check-in.

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 child 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.

My daughter may be registered as a Girl Scout member through September 30, 2023.

Caregiver Signature (required): _____ Date: _____



Unit Rules

I, _____, agree to follow the rules below in order to keep our unit running smoothly and to promote harmony within our unit.

1. I will keep track of when it is my turn to complete a kaper. I will not need to be reminded by my unit leader or fellow unit members that I have a job to do.
2. I will stay with my patrol until the kaper is completed. The entire patrol must agree that the kaper has been completed satisfactorily before anyone leaves the job site.
3. I will respect my lodge/tent partners by keeping my personal belongings neat and orderly. I will not leave my personal belongings lying around the unit. There will be bunk inspection each morning – your patrol is counting on you!
4. I understand that within our lodge, footwear rules will be relaxed, but that outside our lodge, regular camp rules on shoes will be enforced (no open toed shoes). The exception to this is that I am allowed to wear flip-flops to walk to the pool and back.
5. I will not bring food, candy or drink to my tent or bunk.
6. I will respect the property of all unit members. I will not “borrow” anything without asking permission first. I will not look through any member’s personal belongings without asking permission first.
7. I will respect the feelings of my fellow unit members by not calling anyone names, telling secrets, talking about another member behind her back, tattling or telling their real names to the younger campers.
8. I will respect the space and privacy of my fellow unit members by asking before sitting on their bunk or entering their tent and allowing others to rest or “chill” if need be. This respect for privacy extends to the showers as well.
9. I pledge to be friendly and kind. I will help a sister unit member when she is in need.
10. I will not leave the unit without informing the unit leaders first. When I have permission to leave the unit, I will always take a buddy with me.
11. I understand that it is lights out at 11:00 p.m. and I will not disturb any members who choose to sleep.
12. I am aware that the unit leaders will wake the unit up at 6:45 a.m. sharp each morning. Regardless of how much sleep I have received, I will get up and will not act grumpy towards any member of day camp.
13. I understand all resources are limited and will not waste them.
14. I will always clean up after myself without being told.
15. I will not take part in any behavior that will jeopardize the safety or well-being of any member or unit leader.
16. Cell phone usage is at the discretion of unit leader. If permitted to be brought to camp, no cell phones will be used during camp hours of 8:00 a.m.-4:00 p.m. No usage will occur during unit meetings or planned unit activities that may occur after day camp hours. Cell phones will be confiscated by unit leader if they disrupt any camp activity and should only be used during camp week for basic conversations between parent and Girl Scout camper.

As an older Girl Scout, I will always remember that the younger Girl Scouts look up to me as a model for good behavior. My behavior will always be proper so that others may follow my example.

Violation of rule #15 will require that the member be sent home immediately.

Girl’s Signature: _____ Date: _____

As the parent/caregiver of the above, I have read over the unit rules and discussed them with my daughter.

Parent/Caregiver Signature: _____ Date: _____

