



# CHRISTIAN CHURCH IN OHIO

D I S C I P L E S O F C H R I S T

A covenant network of congregations in mission:

We are the Body of Christ gifted and called in covenant together as Disciples of Christ to be centers of transformation on the new mission frontier of our own communities

## Grandparent and Me Camp!

An interactive Camp for Children who have completed Kindergarten, 1<sup>st</sup> or 2<sup>nd</sup> grade AND their \*Grandparent

*\*Child may be accompanied by another related adult (not Mom or Dad) if Grandparent is unavailable*

## Theme – More Stories of Jesus!

June 9<sup>th</sup> - 11<sup>th</sup> 2022

Camp Christian

Bible stories, crafts, fishing,  
and lots of fun.

*Please note, this will be a CABIN experience for Child & Grandparent.*



Thursday night 7:00 p.m. (does not include supper) to  
Saturday (after supper) 6:00 p.m.

### Directors

Rev. Mary Jo Bray  
[revmjbray@gmail.com](mailto:revmjbray@gmail.com)

Rev. Margot Connor  
[ogram842@yahoo.com](mailto:ogram842@yahoo.com)

Marsha Mueller  
[mueller.marsha@gmail.com](mailto:mueller.marsha@gmail.com)

## What to bring List for Campers and Grandparents for Grandparent and Me Camp:

- Bible
- Clothes to play in and get dirty
  - Adults – Shoes appropriate for outdoor activities
  - Kids – Sneakers
- Sleeping bag/pillow/sheet
- Personal Hygiene Items (Towels, Toothbrush, Soap, etc)
- Flashlight
- Hat to protect from the sun
- Sunscreen
- Bug repellent
- If you have any games you like to play with your grandchild
- Fishing gear if you would like to fish

Registration will begin at 6pm on Thursday, June 9<sup>th</sup> with the program beginning at 7pm. We will conclude our time together on Saturday, June 11<sup>th</sup> at 11am. Do you have questions? Email Mary Jo at [revmjbray@gmail.com](mailto:revmjbray@gmail.com). Thank you! God bless you!

Camp Christian  
10335 Maple Dell Road  
Marysville, OH 43040

Need Directions? Check out the website: [www.ccinoh.org](http://www.ccinoh.org) or call the Regional Church Office at: (614) 433-0343.





# Grandparents Camp Registration Form

Camp Christian Thursday 7:00pm – Saturday 11:00am

## June 9<sup>th</sup> - 11<sup>th</sup>, 2022

This camp is for children currently (Spring 2022) in Kindergarten, 1<sup>st</sup> or 2<sup>nd</sup> grade. This year's theme is "Stories of Jesus". This camp is an introduction to Camp Christian and is intended to be totally interactive with an adult at all times. Youth may bring more than one Grandparent; however One Grandparent may only bring one child. This is due to the one on one activities that are planned for this week. **Add \$100 for an additional Adult.**

Campers and their Grandparents or Adults will enjoy singing, meals together, snacks, bible stories, crafts, boating, fishing, and sleeping overnight in the cabins. Persons with disabilities and/or medical reasons can be given other sleeping arrangements if necessary. This will need to be arranged ahead of time.

### Cost Per One Child and One Adult

Early Bird Registration - \$165.00 Postmarked no later than May 2, 2022

Regular Registration - \$180.00 Postmarked May 3 – 30, 2022

Late/Onsite Registration - \$195.00 Postmarked May 31 and later or Registration received onsite.

**Additional adult - \$100.00**

You can register by filling out the registration form and sending it along with payment (made out to **Christian Church in Ohio**) to **Camp Christian, 10335 Maple Dell Rd., Marysville, OH 43040** or register online with a credit card at: [www.ccinoh.org](http://www.ccinoh.org). ALL FEES ARE DUE WITH APPLICATION - NO EXCEPTIONS. It is very important that your registration be sent in by the Regular Registration deadline in order that we may have a place for you in camp. **Refund Policy:** A \$30.00 processing fee will be retained by CCIO on all refund requests.

### **Please Print**

**Youth** Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Youth Address \_\_\_\_\_

Parent Email Address \_\_\_\_\_

Phone \_\_\_\_\_ DOB \_\_\_\_\_ Grade Spring 2022 \_\_\_\_\_

**Grandparent/Adult** Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Youth Church \_\_\_\_\_ Grandparent Church \_\_\_\_\_

Additional Adult Name (if Applicable) \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Are there any medical or dietary concerns that we should be aware of for the **Adult(s)**?

**\*PLEASE NOTE:** We are more than happy to accommodate special dietary needs. However, you **must provide** specific information **in advance** in order that we may provide alternative options as needed. Failure to send this information in advance may result in additional fees as there may be extra expenses for special purchase of foods not already on hand.

\_\_\_\_\_ By checking this line, permission is **NOT** given to the Christian Church in Ohio to use the registered camper in any video recordings or photos for Camp Promotional material either printed or web based.

***\*You must fill out the parent & medical information on the next page for each youth.***

**PARENT'S CERTIFICATION CONSENT FORM FOR HOSPITAL AND MEDICAL PROCEDURES FOR MINORS**

State law requires your consent for medical treatment and procedures as deemed necessary in case of an emergency. Please read the form carefully and fill it in completely. Ask about anything that you do not understand.

I, \_\_\_\_\_ do hereby authorize emergency treatment by a qualified physician or dentist for my child \_\_\_\_\_ during the period of June 9<sup>th</sup> - 11<sup>th</sup>, 2022.

Our family physician is Dr. \_\_\_\_\_

Address \_\_\_\_\_ Phone( \_\_\_\_\_ ) \_\_\_\_\_

Our family dentist is Dr. \_\_\_\_\_

Address \_\_\_\_\_ Phone( \_\_\_\_\_ ) \_\_\_\_\_

In case of an emergency, I want my child taken to Grady Memorial Hospital, Delaware, OH.

Please Initial \_\_\_\_\_

Dietary Needs \_\_\_\_\_

Allergies \_\_\_\_\_

Medication now being taken:

\_\_\_\_\_  
*\*Please note, all medications brought to Camp will be the responsibility of the onsite registered adult to hold on to and administer.*

Last Tetanus Toxoid \_\_\_\_\_

Camp Directors have my permission to administer basic first aid or give my child:

Tylenol, Ibuprofen, Benadryl, Other: \_\_\_\_\_ as needed without contacting me.  
(Circle or Cross through) Please Initial \_\_\_\_\_

**MEDICAL INSURANCE INFORMATION**

Group Insurance Name \_\_\_\_\_

Subscriber \_\_\_\_\_

Group No. \_\_\_\_\_ Cert./Policy No. \_\_\_\_\_

Prescription Plan \_\_\_\_\_

**Parent's or Legal Guardian's Signature:** \_\_\_\_\_ Date \_\_\_\_\_

Relationship \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_ Business Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Can you be reached at these numbers during Grandparents Camp? \_\_\_\_ Yes \_\_\_\_ No

## Coronavirus Health Policy & Procedures Agreement

The Christian Church in Ohio has COVID-19 policies and procedures for Camp Christian.

Please sign below that you (or your camper) have read and agree to the policies and procedures as advised by the Union County Health Department and the CDC. The full document can be downloaded at <https://www.ccinoh.com/camp-christian/summer-programs.aspx>.

Before attending any event, camp or conference at Camp Christian, I agree to the following:

1. I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID-19
2. I am not experiencing any symptoms of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
3. I have not traveled internationally within the last 14 days.
4. I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
5. I have not been diagnosed with Coronavirus/Covid-19 and/or have been cleared as non-contagious by state or local public health authorities.
6. I agree to be tested onsite by the Camp Nurse or Campsite Manager should the need arise
7. I release liability or claim that I, my heirs, or any personal representatives may have against The Christian Church in Ohio with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from The Christian Church in Ohio.

If I do not follow these guidelines and/or if I begin experiencing symptoms of the Coronavirus/COVID-19 immediately before coming to Camp Christian, I will not attend the camp or conference. (If you do not attend due to the Coronavirus/COVID-19, you are entitled to a full refund.)

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Name of Attendee (Printed)

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Week of Camp/Conference

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Signature

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Date

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Signature of Parent/Guardian

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Date

*Please return to Camp Christian (10335 Maple Dell Rd, Marysville, OH 43040) with all other Summer Camp and Conference forms. Thank You!*