



Warrington Township

3345 Rosstown Road

Wellsville, PA 17365

Phone: 717-432-9082

Email: warringtowntp.org

Hello Campers and Parents,

The **Warrington Township Summer Day Camp for Kids** staff are very excited about spending a week of camp with you. This year's theme is **Ocean Life**. The week of **June 22 through June 26, 2026**, is about having fun and learning something new. There will be exhibits, games, projects, and crafts and most of all lots of FUN!

PLEASE TAKE NOTE OF THE FOLLOWING INSTRUCTIONS:

1. **Please** be aware that the ages for campers are **6 years to 12 years**.
2. **Please** note that there is a **\$25 registration fee** for each camper. Check, cash, credit cards accepted in the office. Payment must be made prior to the start of camp.
3. **Please** fill out **ALL** required registration forms included in this **CAMP REGISTRATION PACKET** Return to Warrington Township office prior to **June 4th, 2026**.
4. **NO REGISTRATIONS WILL BE ACCEPTED AFTER JUNE 5TH**.
5. **Day Camp is 9:00 AM TO 2:00 PM** at **WARRINGTON MUNICIPAL PARK, 3325 ROSSTOWN RD, WELLSVILLE**
6. **Please** drop off campers at Warrington Municipal Park at 3325 Rosstown Rd.
7. **Please** check in campers at the check-in station. If there is to be an early pick-up or a special concern, please speak to check-in staff.
8. **Please** do not drop off children before 8:45am and everyone is to be picked up at 2:00pm.
9. **Please** be on time to pick up. Anyone left late will remain with a Day Camp staff member at Warrington Park to wait for pick-up.
10. **Please** don't take campers away from camp without signing them out with Day Camp staff.
11. **Please** do not bring anyone along to Day Camp who is not registered, such as a friend who spent the night, a relative visiting, or someone you are babysitting.
12. **Please** note that this camp is for **Warrington Township residents** only and registration is required in advance.
13. **Please** do not allow children to bring cell phones to camp. **Absolutely no cell phone use** during camp hours. If discovered, cell phones will be held by camp leaders until the end of the day. No exceptions.
14. **Please** send a **bag lunch** with your child, except on Friday lunch will be provided. Snacks and drinks will be provided daily.

If we experience severe weather, please pick up your child at the Warrington Township Municipal building. Also enclosed is an Emergency Contact Form. **No child will be able to attend without this form.**

Thank you for your cooperation. We are all looking forward to an exciting week of fun and memorable times! If you have any questions, please feel free to call the Township Office, 717-432-9082. See you at camp!

2026 - WARRINGTON TOWNSHIP SUMMER DAY CAMP FOR KIDS

MONDAY, JUNE 22nd – FRIDAY, JUNE 26th

REGISTRATION FORM

NAME OF CHILD: _____ AGE: _____

NAME OF CHILD: _____ AGE: _____

NAME OF CHILD: _____ AGE: _____

NAME OF CHILD: _____ AGE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

PARENTS/GUARDIAN NAME: _____

ADULT PICKING UP CHILD(REN) - IF OTHER THAN PARENTS/GUARDIAN: _____

CHILD ALLERGIES OR SPECIFIC DISPOSITION OR NEEDS THAT STAFF SHOULD KNOW ABOUT:

CHILD TEE SHIRT SIZE: (circle one) YOUTH SM YOUTH MED YOUTH LARGE

ADULT SM ADULT MED ADULT LARGE

*Please complete registration forms and return with payment by June 4, 2026, mail or drop off at our office:

Warrington Township, 3345 Rosstown Rd, Wellsville, PA 17365

NO REGISTRATIONS WILL BE ACCEPTED AFTER JUNE 5TH

**→ PLEASE NOTE THAT 2026 DAY CAMP FOR KIDS IS BEING HELD AT
WARRINGTON TOWNSHIP MUNICIPAL PARK
3325 ROSSTOWN ROAD WELLSVILLE**

2026 - EMERGENCY CONTACT FORM

NO CHILD WILL BE ABLE TO ATTEND WITHOUT THIS FORM.

CHILD'S NAME: _____ AGE _____

ADDRESS: _____

PARENTS CELL: _____

PARENTS CELL: _____

EMERGENCY CONTACT: _____

PHONE NUMBER: _____

CHILD'S ALLERGIES: _____

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**2026 PHOTO AUTHORIZATION FORM**

Would you like to see your child's photo on our website. Our webmaster needs your permission to be able to use photos of your child.

I do hereby authorize Warrington Township or any of its agents to use photos, information or likenesses of my child(ren) surrounding participation in the 2026 Warrington Township Day Camp for Kids located at the **Warrington Township Municipal Park**, for the purpose of:

- 1. Township website
- 2. Township newsletter
- 3. Promotion of subsequent events

I do not want my child(ren) to be photographed.

Parent/Guardian Signature: \_\_\_\_\_

Print name: \_\_\_\_\_

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

**2026 - Warrington Township Summer Day Camp for Kids**

**Sunscreen, Bug Repellent Permission Slip**

I, \_\_\_\_\_, give my consent for Warrington Township Day Camp Staff to administer sunscreen, bug repellent or basic first aid, as deemed necessary, to my child(ren) listed below during the duration of Summer Day Camp.

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_ Sunscreen SPF 30

\_\_\_\_ Off Sensitive Skin Bug Repellent

\_\_\_\_ Basic First Aid (provided by camp nurse)– Neosporin, Band aid, Anti-Itch Cream, ice pack, etc.

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_ Sunscreen SPF 30

\_\_\_\_ Off Sensitive Skin Bug Repellent

\_\_\_\_ Basic First Aid (provided by camp nurse)– Neosporin, Band aid, Anti-Itch Cream, ice pack, etc.

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_ Sunscreen SPF 30

\_\_\_\_ Off Sensitive Skin Bug Repellent

\_\_\_\_ Basic First Aid (provided by camp nurse)– Neosporin, Band aid, Anti-Itch Cream, ice pack, etc.

**Parent/Guardian Signature:** \_\_\_\_\_

**Print name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **Participation Waiver of Liability and Release and Indemnity Agreement**

In consideration of being permitted to participate in the activities located at, or sponsored by Warrington Township,

I acknowledge that my child(ren) is in good health and in the proper physical condition to participate in the activity, and

I understand that the activity involves risks of injury to my child(ren) and damage to my property, and I knowingly accept and assume all such risks of personal injury and property damage because of participating in the activity, and

I agree to release Warrington Township from all liability to personal injury and property damage and agree to hold Warrington Township and all its agents, employees, and representatives harmless and indemnify them from all losses resulting from my participation in the activity.

Please note that we request that campers do not bring cell phones to camp. Cell phone use during the hours of camp/or lunch times will not be permitted. Any cell phones discovered will be held by camp leaders during camp hours and returned at the end of the day. No exceptions.

I have read this agreement, understand its terms, and understand that I have given up substantial rights by signing below.

**Name of Activity:** 2026 Summer Day Camp for Kids

**Child(ren) names:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Print Parent/Guardian Name:** \_\_\_\_\_