

Registration

Day Camp

Given Campus

5650 Given Road
Cincinnati, OH 45243
(Ages 5-18)



Camper Name _____ (Please Print) Age _____

Completed Registration Packet must be received at least three weeks prior to the start date of your requested session. However, this does not guarantee a spot. Camps fill up quickly so we strongly recommend getting your completed Registration Packet in by March 1st.

Your participant will need to attend Monday -Friday.

Cost: \$69 per day

___ Wk 1 June 3-7
Life is Better at Summer Camp!

___ Wk 2 June 10-14
Fearless Exploration!

___ Wk 3 June 17-21
Lights, Camera, Action!

___ Wk 4 June 24-28
Wild, Wild, West!

___ Wk 5 July 1-5 ***No Camp 7/4 & 7/5***
Stars, Stripes, Camp !

___ Wk 6 July 8-12
Once Upon a Time!

___ Wk 7 July 15-19
Sea, Sun, Luau Fun!

___ Wk 8 July 22-26
Retro Rock n' Roll!

___ Wk 9 July 29—Aug 2
Stepping Stones Spirit!

Since 1963, Stepping Stones' Summer Day Camp has supported children and teens with disabilities in creating a memorable summer experience that builds independence!

Ages 5 through **18** are invited to find summer adventures in an inclusive and encouraging environment. Our 9-week Summer Day Camp program operates weekdays on a 23-acre property in Indian Hill.

In this adventurous program, campers bond with their peers while enjoying popular summer activities like swimming and fishing as well as creative favorites like art and music. Our highly trained staff are all CPR & First Aid Certified and have the ability to adapt activities to suit each individual's personal talents

Program Includes:

- Adaptive Activities
- Highly Trained Staff
- Certified Lifeguards
- On-Site Licensed Nurses
- Lake for Fishing and Waterfront Activities
- Outdoor Swimming Pool
- Sheltered Outdoor and Air Conditioned Indoor Program Spaces

TRANSPORTATION IS NOT AVAILABLE

Drop-Off for Ages 5-12 will be 9:00 AM and Pick-Up will be 3:00 PM
Drop-Off for Ages 13-18 will be 9:15 AM and Pick-Up will be 3:15 PM
(Times Subject to Change)

Please return
completed paperwork to:
Mail: Client Services
Stepping Stones
5650 Given Rd.
Cincinnati, OH 45243

PDF: jeannie.ludwig@steppingstonesohio.org
Fax: 877-913-1293 (Photos cannot be faxed)
Phone: 513-965-5108 Jeannie Ludwig
Visit our website: www.steppingstonesohio.org



2024 DAY CAMP GIVEN SUMMER REGISTRATION



(Please Print)

Participant Name _____ Age _____
Contact Name _____ Daytime Phone () _____ - _____
Contact Email _____ Residential Facility (If applicable) _____

APPLICATION FEE: \$25

Stepping Stones collects an annual application fee of **\$25 per person** to offset costs relating to the registration process.

This fee:

- Covers all registrations for the period of January 1st through December 31st 2024
- Is out of pocket and not refundable
- Cannot be paid by a Waiver or Voucher
- Covers 1 year unlimited registrations to programs
- *Fee not prorated based on date of enrollment*

Payment of fee:

_____ Check enclosed (Please make out to Stepping Stones)
_____ Paying with credit card (Please call Melissa Geis 513-559-2442)
_____ I've already paid my annual application fee

How to Register For Our Recreation and Leisure Programs

1. Complete the Annual Participant Application*
2. Complete this Registration Form
3. Have Master Medical* form filled out, signed and dated by your Doctor and return to us. (This form can be faxed directly from the Doctor's office)

(You can now do steps 1 and 2 online by going to www.SteppingStonesPrograms.org and clicking on the green "Register Now" button.) (If you register online, you no longer will have to fill out a paper Application or Registration).

Please note: If you are already using our online service, do not use this form. Please log onto your account to register. If you have forgotten your password, please email jeannie.ludwig@steppingstonesohio.org and a password reset email will be sent to you.

If enrolled, a Confirmation Packet will be sent in the mail.

**All forms are available at www.SteppingStonesPrograms.org*

How Are You Paying For Services?

_____ IO Waiver
_____ Level One Waiver
_____ Self Waiver
_____ Private Pay**
_____ Voucher _____ (Name of County)
_____ Applying for Financial Assistance (Limited Funds Available)
_____ Extended School Year _____ (School District)
_____ Third Party _____ (Name of Third Party)
_____ OhioRISE
_____ Other _____

**Private pay clients must confirm their payment plan by May 3, 2024 and be paid in full prior to attending programs. This policy allows us to plan for staffing needs and program enrollment. Additional fees may apply for medical or behavioral care.

DUE DATES: Monday, May 13th
Monday, June 3th
Monday, June 24th

Waiver Questions: Sarah Overholt (513) 965-3053 sarah.overholt@SteppingStonesOhio.org	Other Payment Questions: Teresa Fischer (513) 965-5105 teresa.fischer@SteppingStonesOhio.org	Registration Questions: Jeannie Ludwig (513) 965-5108 jeannie.ludwig@SteppingStonesOhio.org
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