

☐ Week #10 July 30 – August 3

☐ Week #11 August 6-August 10

## 2018 YMCA Camp Shorwau

FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

Fee \$\_\_\_\_\_

Fee \$\_\_\_\_\_

Date:							
1st CHILD'S N	NAME	<u></u>	сноог				
2st CHILD'S N	NAME		сноог				(Entering fall 2018) GRADE (Entering fall 2018)
3rd CHILD'S N	NAME	S	CHOOL				
PARENT(S) N	NAME	PAREN	T(S) SIGNA	TUR	E		
WEEK OF:	(Pieas (Date)	or stated below forstated by thestated by the	or the rest	of tl	ne sı	ımme	r until further noted.
Please select	the program you ar	e registering your child for:					
☐ Weekly C	amp M-F 🔲 Day	Camp 🗌 Summer School Ca	amp Weekl	у М-	F		
Weekly Fee	es	\$110 per wk per child					
•		\$65 per wk per child					
Daily Rate		\$25 per day per child					
Annual Car	mp Program Fee	\$50 per child					
<ul><li>subject t</li><li>Payment</li><li>No credit</li><li>be applie</li></ul>	o a \$10 late fee per ca s will be drafted each N ts except for hospitalized toward the balance.	Nonday of the current week of care wit ation or death in immediate family. Cre	th our conven	ient e be iss	lectro ued to	nic dra o accou	oft system. Ints with balances due; the credit will
<ul><li>rate for</li><li>Any form</li><li>Camp ho</li></ul>	each additional child in 1 of payment returned f	rom the bank as unpaid will be subject O p.m.; extended care is provided from	to a \$30 NS	F Fee.			·
	•						
Please check	circle the week/day	you are registering your child fo	r:				
			Cam	р 9а	m-4	pm	Fee
□ Week #1	May 29 – June 1	Our Community	МТ	W	TH	F	Fee \$
□ Week #2	June 4 – June 8	Treasure Island	мт	W	ТН	F	Fee \$
□ Week #3	June 11 – June 15	Craft & Create	МТ	W	TH	F	Fee \$
□ Week #4	June 18 – June 22	Decades of Fun	МТ	W	TH	F	Fee \$
□ Week #5	June 25 -June 29	Tropical Beach Bash	МТ	W	TH	F	Fee \$
□ Week #6	July 2 – July 6	All American Party	МТ	•	TH	F	Fee \$
□ Week # 7	July 9 – July 13	Child vs. Wild	МТ	W	тн	F	Fee \$
□ Week #8	July 16 – July 20	Hooray for Hollywood	МТ	W	TH	F	Fee \$
□ Week #9	1uly 23 – 1uly 27	Under the Rig Ton	мт	· w	TH	F	Fee \$

Water Wars!

The Best of the Best



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FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY



# 2018 YMCA Camp Shorwau

## **YMCA Camp Shorwau**

### **PARENT COPY!!**

Week	Date	Weekly Theme	Theme Description and Field Trip
1	May 29-June 1	Our Community	Let's build our Camp Community! We will be exploring new friends, new ideas, and new concepts! All while exploring what is in our Duneland Community!  Field Trip: Perch: FireFly Blue Gill & Northern Pike: Guest Speaker
2	June 4-8	Treasure Island	Campers will travel to an island known for buried treasure. Think pirates, ocean life, treasure mapping and a special treasure huntguaranteed to be an adventure to remember!  Field Trip: Potawatomi Zoo (Arrival 8am)
3	June 11-15	Craft & Create	This week campers will enjoy lots of do it yourself projects. They will create masterpieces of clothes, delicious snacks, and lots of DIY home décor that will be sure to make any room more festive!  Field Trip: Discovery Museum & Splash Pad (Arrival 8am – Swim Gear)
4	June 18-22	Decades of Fun	Travel back with us to days of root beer floats, wild west days with a gold rush, explore caveman drawings as you dinosaur egg hunt, relive the hippie days and disco, and more.  Field Trip: Amish Acres (Arrival 8am)
5	June 25-June 29	Tropical Beach Bash	Grab the lemonade, put on your sunglasses and don't forget your swim suits as we have a Tropical Beach Bash. Enjoy a beach party at the refreshing pool, whiz down the slip n' slide and participate in daily beach games. Nothing says summer like heading to the beach so jump on your boogie board and join the fun!  Field Trip: STAY TRIP Splash Pad & Friendship Park (Arrive 9am)
6	July 2-6	All American Party	Discover the land we call home! We will celebrate everything red, white and blue, from hometown heroes to monuments across the nation – we have so much to learn and explore! * No camp July 4th  Field Trip: Jaks Warehouse (Arrive 8am – Required \$10 each camper)
7	July 9-13	Child vs. Wild	Based in part on the television show, Survivor, tribal alliances are formed, and spirit fills the air as teams participate in competitions to gain points throughout the week. Some challenges involve skill and energy while others involve thought and problem solving. Group unity and participation are essential. All eyes are focused on Friday's closing tribal council where one team will be the victor!  Field Trip: Family Field Trip to the Drive-in 49er! Meet us there!
8	July 16-20	Hooray for Hollywood	"Lights, camera, action!" This week, we are diving into show biz. With skits, songs, and improv, we will be kissing stage fright goodbye! Come on out for a chance to create your own skits, practice and perform them in a live show for your family and friends at the end of the week!  Field Trip: Valparaiso Cinemark (Arrive 9am – Required \$5)
9	July 23-27	Under the Big Top	Fire up the cotton candy machine and crank up the music and games because it's time for Camp Shorwau's Carnival 2018. Step right up and try your hand at the ring toss, stop by the face painting stand, or maybe win a prize at a game booth. These are just a few of the many activities awaiting you at the Carnival.  Field Trip: Porter County Fair (Arrive 9am – Permission slips & Ride money required)
10	July 30-August 3	Water Wars!	It's August. It's hot. It's almost the end of the summer. What should we do? Have a water war, of course! We are ending the summer with a tidal wave! Come get wet as we divide ourselves into teams and try to drench each other all week long. With games and laughter, let's end the summer with water and fun!  Stay Trip: Splash Pad & Ice Cream Sundaes (Arrive 9am) Blue Gill & Northern Pike: LOCK IN Starts at 7pm
11	August 6- August 10	The Best of the Best	From a bowling tournament, super soaker challenge, and saying goodbye to our friends! We challenge you to bring your best game this week!  Field Trip: Stone Lake (Arrival 9am) – Swim Gear required



## 2018 YMCA Camp Shorwau

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Youth will be divided into age appropriate camps

Grade entering fall 2018 Name of Group

Grades 1-2 Perch
Grades 3-4 Blue Gill

Grades 5 and Up Northern Pike

### **Important Information:**

- The Duneland Family YMCA is not responsible for lost or stolen items.
- Label everything brought to camp with your child's name.
- Campers need at camp each day:
  - A sack lunch and water bottle. Lunch boxes are permitted however, please keep in mind that your child will be responsible for his/her lunch box.
  - DISPOSABLE SACK LUNCH IS REQUIRED on field trip days.
  - o A swim suit, towel, sunscreen and goggles in a backpack.
- Tennis shoes MUST be worn at camp (flip flops, sandals, etc. only permitted at pool). Parents will be called to bring appropriate footwear to camp if their child is not in appropriate footwear.
- Sunscreen is more effective if applied one hour before sun exposure. We recommend applying sunscreen
  before arrival at camp. Participants will be encouraged to reapply sunscreen throughout the day and
  required to reapply sunscreen before getting into the pool. Staff assistance will be available in a group
  setting when needed.
- Participants are required to participate in all indoor/outdoor activities.
- The following items may not be brought to camp: <u>toys</u>, <u>qames</u>, <u>electronic games</u>, <u>MP3 players</u>, <u>iPods</u>, expensive clothes or unnecessary items. Please leave these items at home.
- Summer camp will be in various locations throughout the day. Campers are required to be dropped off no later than 9AM unless a field trip requires earlier drop off.



# Out of School Learning & Camp Shorwau Registration Form

Child Information P1(*P1 is par	rticipant one, P2 is part	icipant two, etc.)	Expected Start	Date:/_	
First:	M	.I Last:			
Nickname:					
Address:					
First Name	Additional M.I.	Participant Last Na		D.O.B.	Gender
	IVI.I.	Last No			
P2 Nickname:				/ /	M / F
P3 Nickname:				/ /	M / F
Parent/Guardian 1(Will be respons	sible for all charges ar	nd fees; first to b	e contact in the ev	ent of any situati	on)
First:	M.I	Last: _			
Relationship to Participant:					
D.O.B/ Gende					
Home Phone: ( ) -					
Work Phone: ()					
$\hfill\square$ Please check if address is the same as $\hfill$	participant				
Address:	City: _		State:	Zip Code:	
Parent/Guardian 2					
First:	M.I	Last:			
Relationship to Participant:					
D.O.B/ Gende	r: □Male □Fe	male Email:			
Home Phone: (	Cell	Phone: (			
Work Phone: ()	Emp	oloyer/Occup	ation:		
$\square$ Please check if address is the same as p	•			7' 0 1	
Address:Authorized Pick-Ups (APU) **Pa	-			Zip Code:	
1. Name:				Phone: ()_	
Contact in an emergency?	Kciat	1011.		hone: ()_	
			Cell Pho	one: ()	
2. Name:	Relat	ion:		Phone: ()_ Phone: ()_	
Contact in an emergency?				none: ()_ ione: ()	
3. Name:	Relat	ion:		Phone: ()	
Contact in an emergency?		-	Work P	hone: ()_	

### **Medical Information**

The following information allows our staff to provide your child with quality care according to their individual needs.

(6,	Allergies	(doctor/s noto	Medications required, if taken during at:	tondanco)	Other (behavioral, developmental, etc.
P1	easonal, food, pet, eczema, etc.)	(uoctor s note i	equired, if taken during at	teriuarice)	(benavioral, developmental ,etc,
P2					
Р3					
Me	edical Contacts				
Do	octor's Name:		_ Dentist's Name:		
Of	fice Phone:		Office Phone: _		
Pa	ayment Options				
Da	rest of the year.  Payments will be drafted each A Additional child in the same fam Any form of payment returned for No Credits: except for Hospitalis balances due. The credit will be School Aged Annual Supply Fee Summer Camp Registration Fee If you have questions about bill	Monday of the cur nily will receive 10 from the bank as u zation or Death in applied toward th \$150 (\$75 bille \$50	rent week of care with ou off the lower weekly to unpaid will be subject to n immediate Family. Credi ne balance. ed each August and Janua	ur convenier uition rate. a \$30 NSF F ts will not b	Fee.
□	nk/Credit Card Draft Bank Draft		☐ Credit Card D	raft	
	Bank Name:		_		
	Account Holder:		Credit Card #:		
	Account Type: ☐ Savings	☐ Checking	Card Type: □		•
	Account #:			Discove Master	
	Routing #:		Expiration I	) Visa Date: <i>Mo</i>	<u>/</u> CID:
	(	(Signature)		_	 (Date)

### **Demographic Information:**

The following questions are geared towards the sponsor of the registering participant. This information is used for grant writing purposes only.

What is your age?	
□ 25 or under	What is your current household income?
□ 26-40	□ Under \$10,000
□ 41-55	□ \$10,000-\$20,000
□ 56 or older	□ \$20,000-\$30,000
	□ \$30,000-\$40,000
What is your primary language?	□ \$40,000-\$50,000
□ Arabic	□ \$50,000-\$100,000
□ English	□ \$100,000 and up
□ Spanish	•
Other:	What is your religious background?
	□ Christian
	□ Jewish
How would you classify your ethnicity?	□ Buddhist
□ Asian	□ Hindu
☐ African American	□ Islam
□ Native American	□ Interfaith
☐ Hispanic	Other:
□ Caucasian	
Other:	
	How did you hear about our childcare
	facility?
What is your current marital status?	Online
□ Divorced	□ Newspaper
☐ Living with another	□ Flyer
☐ Married	□ Radio
□ Separated	□ Friend/Family member
□ Single	□ Current participant
□ Widowed	If so, who?
Other:	
	Other:

Permissions
I give permission to allow my child(ren) photo (including: first and I
used in any Dungland Family VMCA media sutlet (evennless newelette

I give permission to allow my child(ren) photo (including: first and last name) to be used in any Duneland Family YMCA media outlet (examples: newsletters, newspapers, yearbooks, brochure, Facebook etc.)  ☐ Yes ☐ No
I give permission to allow my child(ren) to eat foods made within YMCA programs. Yes $\square$ No
l give permission to allow my child(ren) to go on alternate field trips due to inclement weather. □ Yes □ No
I give permission to allow my child(ren) to watch a "PG" movies. □ Yes □ No (If no, your child will be given an alternate activity in the event a movie is included in the program activities)
l give permission for any prescription or non-prescription medications to be administered to my child(ren) provided a doctor's note is on file.  ☐ Yes ☐ No
I authorize the Duneland Family YMCA Childcare to act on my behalf in the event my child(ren) requires emergency medical treatment if I cannot be reached. I hereby authorize the calling of your physician listed on file, or if not available, another licensed physician at my expense to provide whatever emergency medical or surgical treatment is necessary.  ☐ Yes ☐ No
I give permission to allow my child(ren) to go on walking and bus field trips while in attendance. (If no parents will need to make alternate arrangements when field trips are ncluded in the program activities)  Yes  No
I give permission to allow my child(ren) to be administrated the Swim Test Approval for the deep end of the swimming pool.  ☐ Yes ☐ No
l give permission to allow my child(ren) to go swimming. □ Yes □ No
l give permission to allow my child(ren) to participate in water activities. □ Yes □ No
Parent Signature Date

# YMCA OF THE USA Child Abuse Prevention Training

### Form 4 – Parent Statement of Understanding

The following information is important for the safety and protection of your child. Please read the information, sign this form, and return it to the YMCA. A copy will be filed with your child's records.

I understand that YMCA staff and volunteers are not allowed to baby-sit or transport children at any time outside the YMCA program. Immediate disciplinary action will be taken by the YMCA toward staff and volunteers if a violation is discovered.

I understand that I am not to leave my young child or children\* at the YMCA or a program site unless a YMCA staff or volunteer is there to receive and supervise my child.

\*Note: Most YMCA's have a policy that define the specific age.

I understand that children should not receive excessive gifts (e.g., TV, video games, jewelry) from YMCA staff or volunteers, and that I should report this to a supervisor if they do.

I understand that my child will not be allowed to leave the program with an unauthorized person. Any person authorized to pick up my child including older siblings or relatives must be listed with the YMCA and of the age required by this YMCA. Any other arrangements must be made by calling the YMCA office to inform them of a change.

I understand that should a person arrive to pick up my child who appears to be under the influence of drugs or alcohol, for the child's safety, staff may have no recourse but to contact the police. Please do not put staff in a position where they have to make this judgment call.

I understand that I can help ensure my child's safety by taking an active interest in his or her YMCA experience. I too will monitor volunteer and staff interactions with my child and ask my child specific questions about program actives and volunteer or staff relationships with my child.

I understand that the YMCA is mandated by state law to report any suspected cases of child abuse or neglect to the appropriate authorities for investigation.

\*Note: It may be appropriate for the YMCA to insert fees or other policy statements that need emphasis at this point.

I have received a copy of the YMCA Youth Program Handbook and Parent Policies and Procedures and will keep it for future reference.

(Date)

(Parent Signature)

I understand that the Duneland Family YMCA School Aged Childcare Program(SACC) and Summer Camp is not licensed under the laws of Indiana. However, I have been made aware this School Aged Childcare and Summer Camp complies with the State of Indiana rules concerning sanitation and fire safety. I understand that it is my responsibility to inform the staff at the Duneland Family YMCA of any changes in my child's health or welfare information. It is also my responsibility to inform the YMCA staff of any change in parental contact information.

This notice excludes the School Aged Childcare Program and Summer Camp from all injuries aside from negligence or intentional wrongdoing on the part of the Duneland Family YMCA or an employee of the Duneland Family YMCA. The Duneland Family YMCA abides by the rules of the Duneland School Corporation and is not required to share your child's information.

I understand that <u>no</u> employee of the YMCA is permitted to watch my child(ren) outside of the child care program facility. I also understand that at <u>no</u> time is a YMCA employee allowed to transport my child.

### **Ending Statement**

The policies outlined in the Parent's Handbook allow us to maintain high standards in providing a safe, healthy, and productive SACC and Summer Camp environment.

I have read and understand the policies and procedures written in the Duneland Family YMCA SACC or Summer Camp Program Handbook. I agree to follow all policies and procedures written in this handbook. I, also, understand that any and all of the admission policies and procedures may change at any time at eh sole discretion of the Duneland Family YMCA, with or without prior notice to all participants.

I also understand, that the undersigned, as guarantor and agent of the above mentioned person or entity, do hereby agree to pay all charges the Monday morning before the time services are rendered. I am aware that neglecting to keep up with payments on my child's account forfeits their spot in the program and it is mandatory for me to compensate the cost of collection and attorney fees. I further agree that any dispute with regard to payment of this debt shall be subject to the laws of the State of Indiana and by my signature; I am submitting myself to the jurisdiction of the courts of Indiana.

I understand my signature confirms that I have read all of the information above and will be in compliance with all of the aforementioned information.

(Student Name)
 (Parent Name)
 (Parent Signature)
(Date)
 (Driver's License Number)



FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY

### **Discipline/Guidance Policy**

It is very important a child's development is nurtured through caring, patience, and understanding. However, while caring for your children, we may have to respond to your child's misbehavior. Hitting, kicking, spitting, hostile verbal behavior and other behaviors which will hurt another child or teachers are not permitted.

In response to these behaviors we will not use:

- threats or bribes
- physical punishment, even if requested by the parent
- · deprive your child of food or other basic needs
- utilize food as a reward
- humiliation or isolation
- The word bad or while redirecting ex. "you are making bad choices." We will use "you are making poor or sad choices."

In response to misbehavior we will:

- respect your child
- establish clear rules
- be consistent in enforcing rules
- use positive language to explain desired behavior
- speak calmly while bending down to your child's eye level
- give clear choices
- redirect your child to a new activity
- for children ages 2 years and up, move your child to a time-out area for no longer than one minute per year of your child's age, if necessary

If a child's behavior is very disruptive or harmful to himself or others, a confidential meeting will be scheduled with the parent's. The meeting will result in a behavior modification plan. If the situation can be resolved, the child may remain enrolled. If we are unable to resolve the issue, you may be asked to make other child care arrangements or referred to an outside agency for professional assistance.

As a parent, you may have some concerns or wish to offer suggestions. Parents are more than welcome to make suggestions (in writing) and we will be happy to attempt to implement the suggestions as long as they are within the guidelines of this policy and do not required more than reasonable amount of one on one time.

Note: Our program serves children of all abilities, ages 6 weeks-Kindergarten, discipline/guidance techniques will be modified as needed using developmentally appropriate communications according to each child's needs/ability.

Child's Name	Date of Bi	rth	
Child's Name	Date of Bi	rth	
Child's Name	Date of Bi	rth	
Parent/Guardian Signature #1	Parent/Guardian Printed Name #1	Date	
Parent/Guardian Signature #2	Darent/Guardian Drinted Name #2	Date	



FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY



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# Transportation Policy Consent for Child Care Program Activities

Name of Program:	Duneland Family YMC	Duneland Family YMCA Camp Shorwau				
	Address of Program:	215 Roosevelt St., Chesterton IN 46304				
Name of Child:						
Parent/Legal guardia	n consent is given for the	items below: (please initial)				
Activities tal	ke place frequently at the	following locations around the facility property:				
Insid	le the facility; gym, comm	unity room, racquet ball courts, fitness room, and teen center				
Gree	n space outdoors around	the facility				
Facil	ity pool					
Walking Trips	s are taken to the followir	ng locations:				
Walking	trips to the following loca	ations will be taken throughout summer <i>(<mark>If several trips see attached list</mark></i>				
please see att	tached list)					
Location: Cof	ffee Creek Park, downtow	n Chesterton Park, Candy store, fire station, Chesterton Middle School,				
Library, ice c	ream shop, and Designer	Desserts.				
Motor Vehicl	le Transportation					
Trips by	motor vehicle transporta	tion are provided by the Duneland Community School Corporation Bus				
service for cl	hildren ages 3 years and u	p. <i>(If several trips see attached list please see attached list)</i>				
Location:		Date:				
Time depart:	Time returns					
Please list special ne	eds of the child during tra	nsport:				
Parent/Legal Guardia	an Signature	Parent/Legal Guardian Printed Name Date				



FOR YOUTH DEVELOPMENT® FOR HEALTHY LIVING FOR SOCIAL RESPONSIBILITY



Camp Shorwau will transport kids to the following places by Duneland Community Schools Corporation Transportation Department

Week	Date	Weekly Theme	Theme Description and Field Trip
1	May 29-June 1	Our Community	Let's build our Camp Community! We will be exploring new friends, new ideas, and new concepts! All while exploring what is in our Duneland Community!  Field Trip: Perch: FireFly Blue Gill & Northern Pike: Guest Speaker
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