



## **CSS is celebrating 60 years in 2022!**

Mark your calendars to join in the celebration for  
**CSS Summer Camp 2022**

The dates for the 2022 summer camp are:  
**July 1 & 5-8 OR July 11-15!!**

The experienced staff for Summer Camp 2022 is excited that summer is near! **We are thrilled to offer activities, music, outings, park time, tours, and more at each session in and around Effingham County!** Join the celebration & see how CSS enhances opportunities to live, learn, work, & play, EVERYDAY!

**Who is eligible?** Any child aged 7-21 who resides in Effingham County and is enrolled in special education.

**Summer Camp 2022 will have 2 different sessions to choose from! Please pick which session you prefer on your registration form (Note: there is a limit of 24 campers per session.) Because of grants and other funding, the only cost to you is providing transportation to/from pick-up locations!** If interested, please complete the attached form and return it by June 15<sup>th</sup>. An agenda will be mailed to you prior to June 28<sup>th</sup>. Please feel free to call 217.343.1785 or 217.663.8665 with any questions.

Sincerely,

Michelle Niebrugge/Kent Probst  
CSS Summer Camp Directors



**Effingham County  
Summer Day Camp 2022  
for Children in Special Education  
(Sponsored by Community Support Systems)**

**Registration Form**

**Camp Dates: July 1+5-8 OR July 11-15**

Name \_\_\_\_\_

Address (including city and zip) \_\_\_\_\_

Name of Parent/Guardian \_\_\_\_\_

Phone # \_\_\_\_\_ Shoe Size (for bowling) \_\_\_\_\_

Family Doctor \_\_\_\_\_ Phone # \_\_\_\_\_

Emergency Contact (if parent or guardian cannot be contacted):

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Prescriptions your child is currently taking: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Pick a session: \_\_\_\_\_ July 1+5-8    or    \_\_\_\_\_ July 11-15**

**\*On the reverse side, please give us any information on your child's physical, mental, or emotional state which you feel we should know.**

\_\_\_\_\_ **(please initial)** I give permission for my child's photo/videos to be used by Community Support Systems for public relations/promotional purposes including but not limited to social media posts, newspaper, newsletter, and webpage.

In case of sickness or accident, I hereby give my consent to Community Support Systems to provide emergency care through a clinic, hospital or a private doctor for my child.

*(Note: We do have camper insurance for each child.)*

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Please return to:  
Summer Camp @ CSS  
618 West Main, Teutopolis, IL 62467**