Condon Summer Program 2025!

When: June 16th- July 31st

Monday- Thursday, 9am- 3pm

Who: Children entering 1st Grade- 5th Grade

The Condon Summer Program is a no cost, fun, creative and interactive way to help keep your child(ren) engaged through the summer months! This program is brought to you by Gilliam County Public Health in collaboration with Community Counseling Solutions. The Condon School District is generously allowing the use of the Grade School to center the program from but is not affiliated otherwise. There will not be school staff, teachers or aids available to help in any way. Every effort will be made to meet each child at their level of need and abilities, however, there are limitations in what we can provide. We will not have the ability to provide a specialized one-on-one Aid, and your child must be toilet trained. In addition, to ensure appropriate ratios, we will only be able to accept a maximum of 30 children per day. This will be on a first-come, first-served basis for each day.

What can you expect for your child? The Summer Program will be led by our very own local Eddie Barrera and supported by high schoolers who are employed through the Gilliam County Work Experience Program. Eddie comes with firsthand experience as he held this same role in the summer of 2023. Each day, from 9am- 3pm, activities will be planned to keep your child engaged, learning and playing! We will utilize spaces like the school gym, playground, the park, our local library and the swimming pool. Each child who attends the Summer Program will have snacks provided, taken to pick up a lunch at the Early Learning Center utilizing the summer lunch program and swimming time in the afternoon. Parents can drop off their child(ren) at the Condon Grade School beginning at 9am and pick up at the same location by 3pm. Any deviations from this schedule will need to be directly communicated to Eddie through a phone call or text message. No late pick-ups will be allowed.

We expect your child(ren) to behave in an appropriate manner and respect the staff and other children in attendance. Inappropriate behavior or language will not be tolerated. If issues arise, communication with the parent/guardian will occur explaining the incident. We reserve the right to refuse services to anyone who does not meet this standard.

Please note that unforeseen circumstances may arise and the need to change schedules, reduce the number of children able to attend for the day or daily cancellations may happen. We will do our best to communicate any changes in a timely manner.

Consent for Summer Program

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules of the Summer Program and its personnel/organization. Recognizing the possibility of physical injury associated with any physical activity such as swimming, sporting activities, and all-encompassing activities, I give permission for my child to receive medical treatment. I hereby release, discharge, and/or otherwise indemnify, and hold Gilliam County Public Health and their employees and/or associated personnel, (including but not limited to facilities used in the summer program), against any claim by or on behalf of the registrant as a result of the registrant’s participation in the Summer Program.

**YOUTH INFORMATION**

 NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 AGE & GRADE ENTERING: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 PARENT/GUARDIAN NAME(S): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 PARENT PHONE #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 EMERGENCY CONTACT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 EMERGENCY CONTACT #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IF YOUR CHILD HAS A SPECIAL NEED OR ALLERGY PLEASE LIST BELOW**

(IF MORE SPACE IS NEEDED, PLEASE USE THE BACK OF THIS PAGE TO WRITE ON)

 ALLERGIES \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 SPECIAL NEEDS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**PARENT OR GUARDIAN SIGNATURE: DATE:**

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*\*\*This form must be completed and turned in on or before the first day of the program, June 16th, 2025 in order for your child(ren) to attend. Forms may be turned in to Gilliam County Public Health at 422 N. Main St., Condon, before June 16th, or given to Eddie Barrera the morning of June 16th at the Grade School.*