



COVE VALLEY CAMP

Winter Retreat Covid-19 Changes & Procedures

5357 Little Cove Road, Mercersburg, PA 17236
Phone: (717) 328-3055 Fax: (717) 328-2350

Drop-Off/Pick-Up

- All payments and necessary paperwork will be sent to the camp 2 weeks prior to the start of the retreat.
- Only one person will drop-off and pick-up a camper or group of campers.
- Only campers will be allowed to enter the cabins.
- The Registration Line will be a drive through. You will not need to leave your vehicle.
- Camper Temperatures will be taken upon arrival.

"Family Groups"

- During the Winter Retreats, we will not have Family Groups.
- The retreat weekends are smaller than our weeks of camp. The amount of campers and staff in the entire retreat, would be very close to the amount in a summer family group.

Masks

- For Retreats, wearing a mask is optional.
- The Kitchen Staff will wear masks when serving food.

Cleaning

- All high touch surfaces (doorknobs, drinking fountains, sink knobs, etc.) will be disinfected at least twice a day.
- All activity items (dodgeballs, etc.) will be disinfected between retreats.
- Frequently touched surfaces on the playground (swing chains, slide handles, etc.) will be disinfected between the retreats.

Health

- The Nurse will do a daily health check and take the temperature of each person at camp.
- 20 second hand washing will be taught and reinforced.
- Handwashing will be observed before every meal.
- Hand Sanitizer will be available at multiple locations throughout camp.
- Campers are encouraged to bring a personal bottle of hand sanitizer.
- Before the retreat, if any staff or camper has a fever, persistent cough, or other Covid-19 symptoms, they need to stay home.
- During the retreat, if any staff or camper has a fever, persistent cough, or other Covid-19 symptoms, they will be immediately separated from the group and sent home.
- If a camper or staff member at a retreat is sent home sick, the entire retreat may possibly be sent home.

I, _____, certify that I will abide by the Winter Retreat Covid-19 Changes & Procedures.
(Printed Name)

Signed Name: _____ Date: ____/____/____



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Covid-19 Winter Retreat Release Statement

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1. I recognize and acknowledge that COVID-19 is a health threat at this time and that my child will be interacting with many people at Cove Valley Christian Youth Camp. I further agree to indemnify and hold harmless Cove Valley Christian Youth Camp from any claims related to the spread of any infectious diseases including but not limited to COVID-19, my child may receive or carry to another individual at Cove Valley Christian Youth Camp as a result of attending Cove Valley Christian Youth Camp's programs and as such I assume all risk associated with these activities.

2. I certify that _____ has not had a fever, persistent cough or any other COVID-19 symptoms in the past 14 days. In addition, I certify that no-one in our household has had any of these symptoms. I have no reason to believe that my child has been in contact with anyone who has had these symptoms.

Printed Name: _____

Signed Name: _____ Date: ____/____/____