



# PIONEER DAY CAMP REGISTRATION

Camper's Name: \_\_\_\_\_ Age \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

School \_\_\_\_\_ Grade Completed \_\_\_\_\_

Select camp	<input type="checkbox"/>	Survivor skills camp June 8 <sup>th</sup> – 12 <sup>th</sup>
	<input type="checkbox"/>	Science Camp July 6 <sup>h</sup> – July 10 <sup>th</sup>

**\*Registration deadline for June camp is May 11<sup>th</sup> the registration deadline for July camp is June 8<sup>th</sup> this is to help ensure we have adequate time for ordering supplies.**

Parent (guardian 1) Name: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Day time Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Parent (guardian 2) Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Work: \_\_\_\_\_

Email: \_\_\_\_\_

Other/Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Circle child's desired shirt size: Youth- S M L Adult- S M L XL

Name and phone number(s) of person(s) other than parents allowed to pick up children

1 \_\_\_\_\_

2 \_\_\_\_\_



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Please list any other information you would like to share about your camper: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Camper's Medical Information

Child's name: \_\_\_\_\_ DOB: \_\_\_\_\_

Child's Pediatrician's Name \_\_\_\_\_ Phone \_\_\_\_\_

Clinic or Hospital Preference: \_\_\_\_\_

**Please check all that apply**

Medical/Behavioral Conditions	Allergies
Convulsions	Food:
Diabetes	Poison Ivy, etc.
Heart Problems	Insect stings
Asthma	Hay fever
ADD/ADHD	Other:

Does your child require an Epi-pen? \_\_\_\_\_ If yes, you must provide the camp with an Epi-pen to be kept at camp during your child's enrollment.

Any other health problems not listed that prevents physical activity? If so please explain.

\_\_\_\_\_

List of all current medications regardless of whether it needs to be taken at camp or not:

## Parent Authorizations

Please initial the lines that apply and sign below.

1. The health history on this form is correct so far as I know; the child described herein has permission to engage in all program activities, except as noted by me and/or recommended by physician. \_\_\_\_\_
2. If I cannot be reached in an EMERGENCY, I hereby give permission to the physician selected by the program director to hospitalize, secure proper treatment for and to order injection, anesthesia or surgery for my child named above. \_\_\_\_\_

**My signature constitutes authorization for items initialed above**

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_



# PIONEER DAY CAMP REGISTRATION

## Image/Video Release

By allowing your child to participate in the Pioneer Day Camp at the Preserve you are giving the City of Foley exclusive rights to all images and/or video captured of your child while participating in Camp activities. The Foley City of Foley has the right to print, publish, and/or share images /video of your child.

\_\_\_\_\_

Parent/guardian signature

\_\_\_\_\_

Date

## Waiver of Liability Form

In considering my child's participation in this activity \_\_\_\_\_ (print name) hereby release and discharge the City of Foley, Graham Creek Nature Preserve, Foley Environmental Department or any selected volunteer/presenter at the camp from any and all liability arising from accident, injury and illness that he/she may suffer as a result of participation in this program. I understand that I do not have to sign this waiver, but by not doing so my child will not be able to participate in the program.

Child's name \_\_\_\_\_ Parent/Guardian signature \_\_\_\_\_

Parent/guardian name printed \_\_\_\_\_ Date \_\_\_\_\_

## Additional information

**Camp fee:** The camp fee is \$100 for the week, this includes a t-shirt to dye and gear based on the camp your child is attending.

### Survival Skills Camp

This program will teach basic survival skills taught by staff who have been trained in survival techniques. Some of these skills include knot tying, drinking water collection and purification, shelter building, fishing, fire building and emergency first aid. There will be a canoe/kayak trip and mud day as well. The camp is designed for 9-14 year olds and is limited to 15 campers for each session. The camp will be held June 8<sup>th</sup>-12<sup>th</sup> the camp day will begin at 8:00 am and end at 12:30 pm.

### Science Camp

This program will promote environmental education and stewardship by including topics such as water quality, forestry, wetland ecology, mapping, culture and heritage. The camp will also include passive recreation such as hiking, archery, canoeing/kayaking and disc golf. The camp was developed using the Alabama Science Course of Study for Biology. The camp is designed for 9-14 year olds and is limited to 15 campers for each session. The camp will be held July 6<sup>th</sup>-10<sup>th</sup> the camp day will begin at 8:00 am and end at 12:30 pm.



# PIONEER DAY CAMP REGISTRATION

## **Clothing for Camp:**

1. Shoes should be appropriate for athletic and muddy activities (NO OPEN TOE SHOES).
2. Hats/caps are allowed.
3. Clothing should be free of the following:
  - a. Liquor, cigarette or drug messages
  - b. Language or images which are offensive to any group of people.
  - c. Death or satanic images
4. No excessively saggy or baggy clothing or attire that may suggest gang affiliation.
5. Jewelry is discouraged.
6. Clothing should be comfortable and appropriate for the weather and physical activities.
7. No electronic devices or phones will be allowed during camp activities (they may be stored in bags).
8. Sunscreen and bug spray. There will be bug spray available during camp activities.

## **What to bring to camp:**

1. Lunch bag each day with snacks and lunch
2. Bag for personal belongings
3. Sunscreen and bug spray
4. Medication if required
5. Several drinks per day or a refillable water bottle (bottled water or sports drinks preferred)

More detailed camp rules will be given to participants during the introduction period of the first day. The camp coordinators will contact the parents and remove participants that demonstrate a lack of cooperation or uncontrollable or disruptive behavior. Camp counselors will be: Leslie Gahagan, David Eckman, and Angie Eckman, Jackie McGonigal, and other City of Foley Part-time employees.

If you have any questions, please contact the Environmental Department at 251-923-4267 or email [aekman@cityoffoley.org](mailto:aeckman@cityoffoley.org)