2019 Woodbury County Conservation Summer Day Camps Registration Form

Sponsored by: Woodbury County Conservation Board & Foundation and Dorothy Pecaut Nature Center Return Form & Payment to: WCCF, c/o Theresa Kruid, 4500 Sioux River Road, Sioux City, IA 51109 Please use a separate form for each camper. Complete the front & back of this page & print clearly.

Commonio No				Nielranna if ann
Camper's Na	me			Nickname if any
Age	Date of Birth	Grad	e Next Fall	
Parent/Guard	ian Name			E-mail Address (For confirmation letter & other Camps info)
Complete Add	dress			City State Zip
Mom Cell Phone			Cell Phone	Alternate Phone (Indicate Home, Work, etc.)
WIGHT GENT TI		Baa	Sell I Hone	/ itemate i none (indicate nome, work, etc.)
Wee Wanderers (9:30-11:30am) ☐ July 1-2 Wee Wanderers (9:30-11:30am) ☐ July 29-30 Bumblebees: (age 4) ~ 3-Day Camps - \$50 Animal ABC's (9am-Noon) ☐ June 24-26 Animal ABC's (9am-Noon) ☐ July 16-18				All Camps held at the Dorothy Pecaut Nature Center unless otherwise noted
				Water Works (9am-Noon) ☐ June 13-14 - AT Little Sioux Park, Correctionville Nature Survivors (9am-Noon) ☐ July 22-23 - AT Southwood Cons. Area, Smithland
Grasshoppers: (ages 5-6) ~ 2-Day Camp - \$35 Below Your Toes (9am-Noon) □ July 29-30				Meadowlarks: (ages 9-10) ~ 3-Day Camps - \$70 Science Sampler (9am-2pm) ☐ June 18-20
Grasshoppers: (ages 5-6) ~ 3-Day Camps - \$50 Insectigations (9am-Noon) □ June 24-26 Night Noises (9am-Noon) □ July 16-18 Insectigations (9am-Noon) □ July 22-24 Bluebirds: (ages 7-8) ~ 2-Day Camps - \$35 Fuel for Flight (9am-Noon) □ July 16-17 - AT Snyder Bend Park, Salix Bluebirds: (ages 7-8) ~ 3-Day Camps - \$50 Creature Feature (9am-Noon) □ June 18-20 Follow Those Tracks (9am-Noon) □ July 9-11 Creature Feature (9am-Noon) □ July 22-24				Badgers: (ages 11-12) ~ 2-Day Camps - \$40 S.O.S. (Seeking Outdoors Skills) (9am-Noon)
Circle	T-shirt size ~ Chil	d Sizes: XS (4)	S (6-8)	M (10-12) L (12-14) <u>OR</u> Adult Sizes: S M L XL
Payment I (Please include \$	20 deposit <u>OR</u> total camp amol	int with form) §	Total Enclosed nty Conservation/ Expiration Da	Name
Name on Card (print) Signature Scholarships available. E-mail <u>Camps@woodburyparks.org</u> for more information				Check Payable to WCCF: Check #* *Note: membership & camp fees are processed separately, need 2 checks* **For a full list of WCCF Membership benefits visit woodburyparks.org
Office Use O Date Deposi	only t received	Amount \$	Check #	# Cash
Date Balanc	e received	Amount \$	Check #	# Cash □ Credit□ Staff WCCF Mem

Name & Relationship	Phone
Family Physician	Phone
Hospital Preference	
• • • • • • • • • • • • • • • • • • • •	nditions or special medications of which our staff should 58-0838 if your camper will need special accommodations.)
Emergency Release In the event of an emergency, I give permission for the minister first aid and/or obtain medical treatment for munderstand that every effort will be made to contact m for emergency care and transportation to the nearest for any transportation and/or treatment will be my response.	ny child, I further ne and/or my emergency contacts. I give permission hospital, if necessary. I agree that any cost incurred
Parent/Guardian Signature	Date
Photography Permission for Participants: (Please I grant permission to have my child photographed selected, may be used in publications and other mate Publications may include area newspapers and in-how webpage and presentations. Photographs are the pro	d, and further agree that such photograph(s), if erials produced by or about WCCB & DPNC. use publications, such as newletters, brochures,
Parent/Guardian Signature	Date
☐ I do NOT want my child photographed	
Parent/Guardian Signature	Date
Carpool Information: My child may be dropped off o	r picked up by the following people:
Name & Relationship	Phone
Name & Relationship	Phone

Emergency contact other than parent: