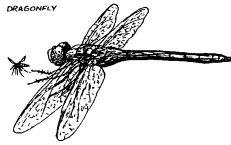


2017 Summer Camp Registration Form  
*Sponsored by the Washington County Conservation Board*

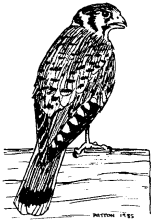
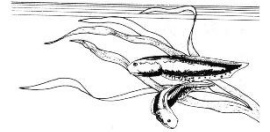
These day camps focus on the natural world at Marr Park. Activities include hiking, fishing, exploration, water study, crafts (including t-shirt), and daily refreshments. All camps are based in the Conservation Center.

Participation is limited to 12 students and run from 9:00 a.m. to noon Monday . Friday, except for Tadpole Camp. **Campers may only register for the appropriate grade level. Pre-registration and non-refundable payment is required. Thursday prior to camp start date is deadline for registration.**

**Dragonfly Camp:** Campers entering 1<sup>st</sup> . 2<sup>nd</sup> grade will explore the four elements.

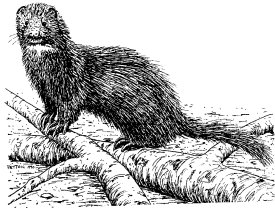


**Tadpole Camp:** this three-day introductory camp is for 4 . 5 year olds who have yet to enter kindergarten. Camp runs from 9:00 . 10:30 a.m. and is limited to 8 campers.



**Kestrel Camp:** The theme will be on Natural Connections for campers entering 3<sup>rd</sup> . 4<sup>th</sup> grade.

**Mink Camp:** Those entering 5<sup>th</sup> . 7<sup>th</sup> grade will focus on Competition and Cooperation.



**Scholarships Available** courtesy of the Washington Noon Kiwanis. Campers apply by writing or drawing an age appropriate letter on why they wish to attend camp.

**Volunteers Needed.** Those volunteering may receive a free registration for the camper of their choice.

For more information, contact the naturalist at 319/657-2400 or [wccbnaturalist@iowatelecom.net](mailto:wccbnaturalist@iowatelecom.net).



Please fill out both sides of form.

Student's name \_\_\_\_\_ Grade in Fall \_\_\_\_\_

Parent or Guardian's name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Daytime Phone \_\_\_\_\_ Evening phone \_\_\_\_\_

E-mail (if preferred over mail) \_\_\_\_\_



Please make checks payable to: *Washington County Conservation Board*

Mail with payment to: *Washington CCB  
Day Camp Program  
2943 Highway 92  
Ainsworth, IA 52201*

Or drop off at Conservation Education Center in Marr Park.

2017 WCCB Summer Camp Registration Form

Camper Name \_\_\_\_\_

Please check one:

Camp	Entering	Dates	Cost
___ <b>Dragonfly Camp</b>	1 <sup>st</sup> – 2 <sup>nd</sup> grade	June 26 – 30	\$25
___ <b>Dragonfly Camp</b>	1 <sup>st</sup> – 2 <sup>nd</sup> grade	July 10 – 14	\$25
___ <b>Kestrel Camp</b>	3 <sup>rd</sup> – 4 <sup>th</sup> grade	June 19 – 23	\$25
___ <b>Kestrel Camp</b>	3 <sup>rd</sup> – 4 <sup>th</sup> grade	July 31 – Aug. 4	\$25
___ <b>Mink Camp</b>	5 <sup>th</sup> – 7 <sup>th</sup> grade	July 24 – 28	\$25
___ <b>Tadpole Camp</b>	Pre-kindergarten	June 7 – 9	\$15
___ <b>Tadpole Camp</b>	Pre-kindergarten	July 19 – 21	\$15

1. Camper's t-shirt size (please specify child or adult): \_\_\_\_\_
2. List any medical conditions, limitations, or allergies of which we should be aware.
3. Will your child be taking any medications during the time she or he is participating in the program? If so, please list the name and purpose:
4. Does your child have any food allergies or dietary restrictions?

\_\_\_ yes The Washington County Conservation Board has my permission to take photos of my child for publicity purposes. Last names will not be used in identifying children in captioned photos.

\_\_\_\_\_ has my permission to participate in the Washington County Conservation Board Day Camp  
(name of child)

Program. In the event that the student sustains injury or illness while participating in this program, I hereby authorize the rendering of any emergency first aid, medication, medical treatment, or surgery if deemed necessary by licensed medical personnel. I also give my permission for attending medical personnel to execute on my behalf any permission forms and/or other necessary medical documents and to act on my behalf if I am not immediately available.

**Waiver & Release from Liability**

In registering the minor to participate in this Washington County Conservation Day Camp Program, I certify that I am acting as the minor's parent/guardian, and understand that in outdoor group activities there are always risks of illness or injury, however much organizers have attempted to prevent and negate such risks, so I **HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE** the Washington County Conservation Board, Washington County, or any employee of, or volunteers for, Washington County, all for the purposes herein referred to as ~~releases~~, from all liability to the undersigned, the minor, his/her personal representatives, assigns, heirs, and next of kin for any and all damage, and any claim or demands therefore on account of illness or injury to the person or paperweight or resulting in death of the undersigned, whether caused by the negligence of the releases or otherwise while participating in the event.

\_\_\_\_\_  
(signature of parent/guardian)

\_\_\_\_\_  
(date)