

Kenai Watershed Forum

WILDERNESS, WILDLIFE & WONDER

A Recreational Day Camp

2018 Registration Form

Child Name _____ Age _____
 Mailing Address _____ Birthdate _____
 City _____ State _____ Zip _____ M/F (please circle)

Contact Information

Name _____	Name _____
Relation to Child _____	Relation to Child _____
Home Phone _____	Home Phone _____
Work Phone _____	Work Phone _____
Cell Phone _____	Cell Phone _____
Email _____	Email _____

Emergency Daytime Contact (other than parents – someone who can pick your child up if you can not be reached)

Name _____	Home Phone _____	Cell Phone _____
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Which week(s) of camp will your child be attending?

June 11-15 _____ Novice Naturalists (*6-8)	July 16-20 _____ Intermediate Ecologists (9-12)
June 18-22 _____ Intermediate Ecologists (9-12)	July 23-27 _____ Art of Wondering (13-16)
June 25-29 _____ Novice Naturalists (*6-8)	July 30-Aug 3 _____ Novice Naturalists (*6-8)
July 9-13 _____ Novice Naturalists (*6-8)	

**Must have completed kindergarten*

Cost for one week of camp is \$150/week per child. Check enclosed Charge Visa/MasterCard

Account number _____ Exp. date: _____

Billing Address for Card _____

Signature _____

Please note: To complete your child's registration, you must submit the following in addition to the Registration Form: Health Form, Policies Form and Immunization Records

Kenai Watershed Forum
WILDERNESS, WILDLIFE & WONDER
A Recreational Day Camp
2018 Health Record

Child Name: _____

Age: _____ Birth date: _____ Gender: M/F (please circle) Ht _____ Wt _____

HOW TO REACH PARENT(S) OR LEGAL GUARDIAN

Parent/Guardian 1 _____ Parent/Guardian 2 _____

Home Address _____ Home Address _____

Home Phone _____ Home Phone _____

Business Address _____ Business Address _____

Business Phone _____ Business Phone _____

Cell Phone _____ Cell Phone _____

Name, address, and phone number of contact person if the parents cannot be reached in an emergency:

Person(s) authorized to take the child from the camp facility:

HEALTH HISTORY

Please check below those diseases or conditions that the participant currently has or has had in the past:

Chicken Pox: _____ Measles: _____ Shortness of Breath, Hoarseness or Asthma: _____

Diabetes: _____ Hay Fever: _____ Drug Allergies: _____

Seizures: _____ Heart Disease/Chest Pain/Palpitations: _____

Food Allergies: _____ Insect or other Allergies: _____

Blood Disorders/Anemia: _____ Chronic Illness: _____

Skin Conditions: _____ Hospitalizations: _____

Surgeries: _____ Emotional/Mental Illness: _____

Ears/Hearing Problems: _____ Eyes/Vision Problems: _____

Nervous System: _____ Nose/Throat Problems: _____

Mouth/Teeth Problems: _____ Abdomen-Hernia: _____

Orthopedic Problems: _____ Headaches, Dizziness, Fainting: _____

Date of last tetanus shot _____ T.B. vaccination _____

Constipation, Diarrhea, Salmonella, Giardia or other intestinal disorder: _____

Tetanus _____

Any Mental, Emotional, or Physical Disorder not listed above:

Please provide us with any details on any of the above conditions we may need to know: _____

Description of any current health conditions requiring medication, treatment, or special restrictions or considerations while at camp. Please provide us with details:

Do you authorize KWF staff to administer the following: sunscreen _____, insect repellent _____

Is there a special Medical, Dietary regimen that should be continued? Please describe

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WILDERNESS, WILDLIFE & WONDER
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KWF Day Camp involves young people in active activities in a variety of outdoor settings in all kinds of weather conditions. Safety is our premier concern, but active young people will on occasion find ways to injure themselves. Are there activities which your child should not participate in due to health concerns or parental desires? Yes _____ No _____ If "Yes" please give details:

AUTHORIZATIONS: My son/daughter/dependent has permission to participate in all camp activities, except as noted by me. I recognize that my child will be participating in active, outdoor programs with other children and that accidental injuries or illness may result. I take full responsibility for any and all accidents and injuries which may be sustained by my child during this activity and understand KWF does not assume responsibility for accidents or injuries which occur. I assume the inherent risks including but not limited to, moose, bear, and inclement weather, and authorize my child's participation. Children will walk or be transported to local parks, areas in the Kenai National Wildlife Refuge, and other destinations around the Kenai Peninsula. I authorize Kenai Watershed Forum staff members to transport my child in the manner described.

Health Insurance Company: _____

Policy Number: _____

Name and telephone number of individual's physician or health care facility _____

I HAVE READ THIS FORM, AGREE TO ITS TERMS AS NOTED, AND I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND ACCURATE AND COMPLETED TO THE BEST OF MY KNOWLEDGE.

Parent/Guardian Signature

Date

Parent/Guardian Printed Name

CONSENT FOR EMERGENCY MEDICAL OR SURGICAL CARE: In the rare event of an emergency, I hereby give permission to the medical personnel selected by the Camp Director to provide routine health care; to administer medications; to order x-rays, routine tests, treatment; to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation for me or my child. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Camp Director to secure and administer treatment, including hospitalization, for the participant named above. This completed form may be photocopied for trips out of camp. All information is strictly confidential. I authorize all information for insurance purposes.

It is understood that a conscientious effort will be made to locate me or my child's other parent or legal guardian. I understand my obligation to keep Kenai Watershed Forum informed of my whereabouts. I will assume the cost of necessary medical or surgical care.

Signature of Parent or Legal Guardian

Date

***YOU MUST SUBMIT COPIES OF CHILD'S IMMUNIZATION RECORD
WITH REGISTRATION***

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WILDERNESS, WILDLIFE & WONDER

A Recreational Day Camp

2018 Camp Policies

Parents: Please read and initial at the bottom of each page. A copy of the policies with your initials will be available upon request.

1. **Type of Service Offered:** Environmental Education **Ages Served:** 6-12
2. **Hours of Operation:** 9:00 am - 4:00pm. Students may be dropped off at the Pavilion in Soldotna Creek Park between 8:45 - 9:00 am. Camp staff will NOT be available before 8:45 am.
3. **Children With Special Needs:** Please talk to the Director to see if our program can meet your child's needs.
4. **Enrollment Requirements:** The following completed forms must be submitted with payment in full to secure enrollment: Registration Form, Camp Policies, Health Form, and Immunization Records.
5. **Discipline/Behavior Management:** Many behavior problems common at school and home disappear when we take students into outdoor settings. When it is necessary to modify the behavior of children, positive behavioral management techniques are used. If a child is unsuccessful in meeting the behavioral expectations of our program, a parent conference is arranged, and a child may be dismissed from camp. Corporal punishment is not a component of our program. A child will be restrained only in the event of possible injury to the child or other children in the group.
6. **Meals, Snacks, and Beverages:** Students will be very active all day long. Families must provide a nutritious snack, sack lunch, and a reusable/refillable water bottle, NOT plastic that will not spoil in the heat. In addition, the Kenai Watershed Forum will be providing one healthy snack per day of camp.
7. **Nondiscrimination Statement:** Kenai Watershed Forum programs are open to all children and there is no discrimination allowed on the grounds of race, age, parenthood, color, national origin, sex, religion, physical disability, marital status, or pregnancy.
8. **Fees and Payment Arrangement:** Full payment in the form of cash, check, Visa or MasterCard must be received for registration to be complete. We recognize circumstances may arise and a fully registered camper may not be able to attend camp. We will make every effort to accommodate the family by transferring the registration to another session if available. If another session is unavailable and a full cancellation is necessary, we will make every effort to fill the empty spot. If the spot is filled, you will receive a full refund. If the spot cannot be filled, you will receive a 25% refund.
9. **Liability Insurance:** The Kenai Watershed Forum carries general liability insurance as well as Camp & Conference Accident Medical Insurance.
10. **Rules Concerning Personal Belongings:** Every child will keep her/his belongings in a personal daypack with them at all times. We ask that all non-essential personal belongings such as, cell phones, sports equipment, electronic games, toys and cards be left at home. Cameras are encouraged!
11. **Transportation:** Students are required to arrive at Soldotna Creek by their own means every day. Once at camp, all travel will be on foot. When traveling on roads, all pedestrian laws will be followed.
12. **Parent Visits/Release /Absentees camper** Parents may visit WW&W Day Camp. Parents should consult with the Camp Director to arrange an appropriate time and place for a visit. All children must be released to authorized persons during camp or at the end of camp. Parents should make every effort to contact camp staff if their child is going to be absent. If a child is not present by 9:30 a.m. each day the director or designate may call parents to verify non-attendance.
13. **Permission for Activities Outside the Center:** Children in our programs will be exploring a variety of terrain such as wetlands, forests, streams, and rivers of Alaska. Risks during day programs, trips/travel may include falling, bad weather, bears, moose, insects, and other risks that are inherent

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WILDERNESS, WILDLIFE & WONDER
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2018 Camp Policies

while in a wilderness setting. Camp will take all precautions possible to prepare children for all inherent risks in conducting activities. By signing the required health form, parents authorize children to spend their days outdoors with our Camp staff.

14. **WW&W is Bear Aware in Soldotna Creek Park:** To ensure safety while out on the trails, WW&W instructors have been trained in proper bear safety by the US Fish and Wildlife Service, plus each instructor carries bear spray on them at all times. Additionally, campers stay close to one another while on the trail and make plenty of noise to deter any encounters with bears while at camp.
15. **Smoking, Alcohol, Drugs and Weapons** are prohibited in all Wilderness, Wildlife & Wonder programs.
16. **Policy for Outdoor Activities:** Children participating in our programs should come prepared to journey into wild lands on rainy and sunny days. On very rainy days, our groups will seek shelter in local parks or at the camp yurt for brief periods during the day. However, even when it is wet outdoors, Wilderness, Wildlife & Wonder programs will continue. Rain gear and warm clothing are very important on these days. Please, no open-toed shoes! Parents should understand clothing worn, especially footwear, may come back dirty or muddy.
17. **Animals:** Are prohibited unless approved by the Camp Director,
18. **Substitutes:** In the event an instructor is injured or becomes ill during the week your child is enrolled, a qualified substitute will lead the group. Our substitute pool includes other Kenai Watershed Forum staff.
19. **Emergency Care Provisions:** Parents take full responsibility for any and all accidents and injuries which may be sustained by children during this activity and understand KWF does not assume responsibility for accidents or injuries which occur. **Care for Ill Children:** If a child becomes ill while outdoors with WW&W, attempts will be made to contact parents to arrange for the child to go home for the day. If parents are unreachable, Camp staff will attempt to contact the Emergency Contact. If it is not advisable for the child to continue with group activities and his/her condition is acute requiring medical attention, all reasonable attempts will be made to contact parents and/or the Emergency Contact while the child is being taken to a local medical facility by ambulance.
Medication: Camp staff members are not authorized to administer any medications to children, including aspirin. If medicine needs to be administered while your child is at Camp, we will need the parent to fill out an authorization form. Please contact the KWF office for a copy.
20. **Topical Products:** If parents wish to have their child use insect repellents or sunscreens they should send the product with the child in a container labeled with the child's name.
21. **Notification of Changes:** Any changes in programs or policies will be sent to all participants.
22. **Photo Release:** The Kenai Watershed Forum (KWF) has permission to use Wilderness, Wildlife & Wonder photographs in publications, websites and other materials for promotional purposes. Identification of individuals not considered camp staff will be protected. All photos of camp activities taken by KWF will be considered property of KWF.

I have read, understand and agree with all Kenai Watershed Forum Summer Camp Policies:

Name _____ Signature _____

Child(ren) _____

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