



New Jersey Audubon School Vacation Camp Permission Form

This form must be completed and returned with the appropriate documentation (Permission Form, Payment Information, and Health Form Information) prior to the start of camp. **No camper will be allowed to participate without the requested forms on file.**

Please check the boxes for all camp dates that you are registering for.

Fall Explorers 9am-4pm	<input type="checkbox"/> Thurs. November 10th	<input type="checkbox"/> Fri. November 11th
All About Animals Half Day 1-4pm	<input type="checkbox"/> Thurs. November 17th	<input type="checkbox"/> Fri. November 18th
Special Price: \$30	<input type="checkbox"/> Mon. November 21st	<input type="checkbox"/> Tues. November 22nd
Winter Survival 9am-4pm	<input type="checkbox"/> Mon. January 16th	
Spring into Spring Break 9am-4pm	<input type="checkbox"/> Full Week	<input type="checkbox"/> Mon. April 9th <input type="checkbox"/> Tues. April 10th
	<input type="checkbox"/> Wed. April 11th	<input type="checkbox"/> Thurs. April 12th <input type="checkbox"/> Fri. April 13th

Camper Information (please print clearly):

Camper's name: _____

Gender: _____ Age: _____ DOB: _____ Grade currently enrolled in: _____

Parent(s) Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Work Phone: _____ Home Phone: _____

Cell Phone: _____ E-mail: _____

Emergency Contacts:

1. Name: _____ Relationship: _____

Work or Home Phone: _____ Cell Phone: _____

2. Name: _____ Relationship: _____

Work or Home Phone: _____ Cell Phone: _____

Child Pick-up Information

We require that you or a designated person sign your child out of camp each day. In addition to yourself, you authorize the following persons to pick up your child from camp:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Sunscreen/Insect Repellent

Please apply sunscreen and insect repellent to your child prior to camp. In the event I forget, I give New Jersey Audubon permission to apply sunscreen and insect repellent as needed to my child.

- Yes If answered yes, with DEET: Yes No
 No

Photo Release

On occasion, NJ Audubon will use photographs of campers engaged in fun activities to highlight our programs in brochures, camp nature journals, webpages, press releases, and other marketing materials. We've found that campers are excited to be included in camp photos and welcome the opportunity to visually share their experiences with others. No personal information about the child will be shared.

If you do not want your camper included in NJ Audubon camp photos, please fill out and return the Photo Exclusion Form that is available on our website.

Refund Policy

Any registration that is cancelled prior to two weeks of the camp start date will be fully refunded. In the event of a cancellation within two weeks of the camp start date and the camp is filled to capacity, New Jersey Audubon will make every effort to find a replacement to fill your camper's registration slot. If New Jersey Audubon successfully finds a replacement, we will provide you with a voucher good for a future camp of the same value. Otherwise we cannot provide a refund. We thank you for understanding.

Code of Behavior

Participant safety is a high priority and these rules are meant to ensure that participants have a SAFE as well as enjoyable experience.

Be kind to all living things (people and animals too).

Follow all instructions of the nature camp teachers / naturalists.

Respect the property of the NJAS center.

Failure to comply with the above rules will result in discussion between the child, his/her teacher, the summer camp director and the parent/guardian. New Jersey Audubon reserves the right to remove a camper from the program if rules are broken or if a camper's behavior creates an unsafe situation. In the event that we need to remove a camper, a refund will not be offered. By signing this form, I assert that I have read the **Code of Behavior** and discussed it with my child.

Parent/Guardian Authorization

My child, _____, has permission to participate in all camp activities except as noted on the attached health form (for camps lasting four or more days) or as described on the abridged health form (for camps lasting less than four days). Safety is always the primary consideration of Plainsboro Preserve staff.

I understand that camp activities may include varying degrees of risk. I further grant permission to NJ Audubon employees and agents to seek and obtain emergency care for my child in my place if deemed necessary and that transportation may be provided by private or public motor vehicles furnished by NJ Audubon personnel, volunteers or third parties.

Parent/Guardian's Signature: _____ Date: _____



New Jersey Audubon School Vacation Camp Payment Information

Please print clearly:

Child's Name: _____

Your Name: _____

Payment Method

- Mastercard Visa Amex Check (Payable to NJ Audubon)

Card #: _____ V-Code: _____ Expiration Date: _____

Signature: _____

Please send payment information, permission form, and health information to:

New Jersey Audubon
Plainsboro Preserve
80 Scotts Corner Road
Cranbury, NJ 08512

If registering by fax, you MUST fill in a credit card number. Our fax number is (609) 897-0287.

How did you hear about us?

- Returning camper Brochure sent home from school NJ Audubon website Word of mouth
 Magazine, please specify _____ Newspaper, please specify _____
 Camp Fair, please specify _____ From attending other Plainsboro Preserve programs
 Other, please specify _____

Total Days of Camp Attending: (Full Day) _____ x \$60.....\$ _____

Total Days of Camp Attending (Half Day): _____ x \$30.....\$ _____

Camp T-Shirt (optional): \$15.00.....\$ _____

Size: Small Medium Large

New Jersey Audubon Membership Is Not Required, But Encouraged For Vacation Camps:

New Members: \$35 Introductory \$45 Renewal.....\$ _____

Total Fees:.....\$ _____

Health Form Information

This is REQUIRED for your child to attend camp

1) For camps one week or more in length the following health form document must be received in our office:

Universal Child Health Record

We will hold this on file for three years after the examination date.

2) For camps lasting less than one week, please fill out the following:

Universal Child Health Record (recommended)

We will hold this on file for three years after the examination date.

OR

Fill out the section below noting any pre-existing medical conditions.

My child has the following conditions, allergies, and/or restrictions of which NJAS personnel should be aware. **NOTE: NJAS personnel will not administer any medications – please discuss with camp staff to make appropriate arrangements.**

Signature: _____ Date: _____

Prepared campers have the most fun!

*Keep in mind that many activities will be outdoors (rain, snow, or shine)
so come prepared for all weather!*

Nature Camp Checklist

Things to bring everyday:

- Bag lunch
- Water bottle
- Power snack
- Backpack
- Sneakers or hiking boots
- Warm clothing (there may be snow!)
- Gloves
- Hat
- Second set of clothes (in case you get wet!)



Recommended seasonal items:

- Sunscreen
- Insect repellent
- Change of shoes
- Rain boots
- Rain jacket

Please do not bring radios, Ipods, video game consoles, expensive cameras, or jewelry. Also note that flip flops and open-toed sandals are not appropriate footwear for nature camp.