



Eco-Explorers Registration 2017

Mission: The Arboretum at Flagstaff is committed to nurturing awareness and a sense of connection to the natural world through experiential, place-based, and STEAM education centered on the ecology of the Colorado Plateau. Camps are focused on four principal themes: scientific investigation, outdoor exploration, health, and stewardship, and are designed to nurture respect for others and the environment, promote a sense of wonder for our natural world, and increase awareness of environmental issues.

Camper Expectations and Behavioral Policy: Campers are expected to participate meaningfully in nature games, activities, and study. Campers are expected to treat all living things with respect.

Camp is outdoors unless there is severe weather. Campers hike and explore the landscape on a daily basis. Please dress your child appropriately and remember to **pack the essentials**: a bottle of water (a reusable bottle is recommended and may be refilled at camp), appropriate footwear (no sandals), sun hat, sunscreen, appropriate layers of clothing, and a rain jacket during monsoon season. Lunch and a substantial snack are required for each day of camp (9am-1pm for ages 5-6, 9am-4pm for ages 7-12).

Cell phones, tablets, and other **electronic devices** are not allowed. Our staff will take away any such devices and will return it to the camper at the end of the day.

If a camper is participating in unacceptable or aggressive behavior towards other campers, Arboretum staff, or Arboretum property, appropriate measures will be taken including possible consultation with the camper's parent or guardian. If inappropriate behavior persists, The Arboretum reserves the right to send a camper home. In the event of blatant aggression, campers will not be allowed back to camp.

Refunds: Once payment has been made, it is non-refundable unless the camper suffers a medical emergency, attested to by a physician, which keeps the child from attending. In this circumstance, refund will be given after documentation is received. Refunds will not be given for failure to attend, absence or sick days, or if a child is dismissed due to behavioral issues.

Cancellation Policy: The Arboretum reserves the right to cancel any camp session due to insufficient enrollment. If this occurs, all fees will be refunded.

Emergency and evacuation: The Arboretum follows a predetermined evacuation policy and set of procedures. In the event of a wildfire or other emergency, The Arboretum will take the necessary measures to evacuate all persons on Arboretum property as deemed appropriate. These measures may include the transportation of campers in Arboretum vehicles as well as Arboretum staff and intern vehicles. In the event of an emergency, parents will be notified as quickly as possible.

Aftercare: Child care will be available to campers attending the half day camp (5-6 year olds) for an additional charge of \$25 per day from 1pm-4pm.

Drop off and pick up: Drop off is between 8:45am-9am in front of the Visitor Center. Please pick up your child promptly at the end of the scheduled camp or scheduled aftercare (1pm or 4pm). If another person is scheduled to pick up your child, please ensure The Arboretum has his or her information under "Pick-up Authorization" on the Camper Information form. Students **will not be released** to anyone not on the pre-approved authorization list.

Extra camp activities: If an additional campout or family event in connection with a camp occurs, you will be given as much notice as possible for you to make arrangements for your attendance.

Please fill out Camper Information Form and Health Form and mail or email signed copies to:

Eco-Explorers Summer Camps
Attn: Coreen Walsh
The Arboretum at Flagstaff
4001 S. Woody Mountain Road
Flagstaff, AZ 86005

education@thearb.org

IMPORTANT: All registration forms must be submitted no later than two weeks prior to the start of registered camp. Completed forms are required to participate at camp.

Camper Information Form

(one form per child)

Camp Name(s) and Date(s) your child is registered for:

Camper Name:

Sex: M F

Nickname:

Date of Birth:

Age:

T-shirt size (Included in camp fee): Youth S

M L

M L

Address:

(Street, City, State, Zip)

Parent/Guardian:

Work Phone:

Cell Phone:

E-mail:

Parent/Guardian:

Work Phone:

Cell Phone:

E-mail:

Pick-Up Authorization

Please list all of the people who are authorized to pick-up your child from camp:

Aftercare needed? (Only for ages 5-6 from 1-4pm)

Please note which days and dates needed. Cost is \$25 per day.

(Payment may be made by phone, check, or in person prior to scheduled aftercare.)

Parental Consent

I am aware that while participating in a program or activity arranged by The Arboretum at Flagstaff, some risks and dangers may be present, including but not limited to those generally associated with certain activities, accidents, illness, and forces of nature.

I agree to indemnify The Arboretum at Flagstaff and hold it harmless from and against any and all claims, suits, damages, liabilities and expenses, including attorney's fees and The Arboretum's costs of defense in connection with the loss of life, personal or bodily injury, and/or damage to or loss of property that arises from the participation of _____ (name of participant) in the 2017 Eco-Explorers Camps. The Arboretum has my consent to secure treatment at the closest hospital in the event of a medical emergency.

The Arboretum (**circle one**) **has** OR **does not have** consent to take my child on off-site field trips, outdoor excursions, and hikes, including travel with Arboretum staff and interns in Arboretum vehicles as well as in staff and intern vehicles. I understand that if my consent is not given for the above that my child will remain at The Arboretum during scheduled field trips and excursions with supervision and limited programming.

The Arboretum (**circle one**) **has** OR **does not have** consent to photograph or quote my child for advertising purposes. Failing to circle one will be understood as giving approval.

Many of the classes involve touching and tasting edible plants.

The Arboretum (**circle one**) **has** OR **does not have** consent to allow my child to taste and touch edible plants.

Signature of Parent/Guardian: _____
(signature required)
Date: _____

Health Form

(Must be completed in full)

Camper Name:

Date of Birth:

Camper's Primary Physician:

Physician Phone:

Emergency Contacts

Please provide us with at least three people to contact in case of an emergency:

<u>Name</u>	<u>Relationship</u>	<u>Daytime Phone</u>
-------------	---------------------	----------------------

Allergies

Please list any medication, food, or environmental allergies your child has.

Medication

Will your child need to take regular medication (prescription or non-prescription at camp? **(circle one)**): YES NO

Please list any medication (prescription or non-prescription) your child is taking **even if it is only administered at home** (include dose, reason for taking the medication and possible side effects, and **if the medication must be administered during camp--provide all related instructions, including the time the medication must be administered**):

Please list any emergency medication (epi-pen, inhaler, etc.), including related instructions, that your child will need to have at camp:

Information and History

Please list any pertinent information on any health problems your child has including physical, psychiatric, or behavior problems that may affect his or her participation in camp activities:

Special Needs

Please explain any special learning, medical, or behavior needs your child may have:

Parental Consent

I release The Arboretum at Flagstaff and The Arboretum at Flagstaff's personnel of any liability related to the administration of the over-the-counter and emergency medication listed above. The Arboretum at Flagstaff's personnel have consent to administer basic first aid treatment, for which they have been trained. The Arboretum at Flagstaff's personnel have consent to perform CPR in the event of a medical emergency. The Arboretum at Flagstaff has consent to secure treatment by a local doctor or area hospital in the event of a medical emergency.

I have read and understand all the information in the registration and information forms and agree to the conditions stated therein.

Signature: _____ Date: _____
(signature required)

Relationship to Camper (parent/guardian): _____

Please mail or email completed forms with original signature to:

Eco-Explorers Summer Camps
Attn: Coreen Walsh
The Arboretum at Flagstaff
4001 S. Woody Mountain Road
Flagstaff, AZ 86005

education@thearb.org