



June 2019 Conservation Camp  
Registration Form  
K-Adults



Please write in which date you prefer for your camper to come \_\_\_\_\_

Camper's Name: \_\_\_\_\_ Parent/Guardian's Phone : \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Gender: M F

Grade (just completed in school): \_\_\_\_\_ T-Shirt size: Youth Extra S S M L Adult S M L

Circle one: t-shirt fee \$10 NO T-shirt fee \$5 Deadline: May 15<sup>th</sup>, 2020

Please make checks payable to Gallia SWCD or cash; no credit cards can be accepted.

Parent/Guardian Name: \_\_\_\_\_ Gender: M F

**Permission, release, and hold harmless agreement:** By signing below; I understand that my child's participation in this event is a privilege not a right. I understand that my child must abide by the rules of Gallia SWCD or I as a parent/guardian, will assume responsibility of the child being sent home. After having fully considered the possibilities of harm and injury I as the parent/ guardian of our child do accept the responsibility and costs of treatment for any and all injury to our child as a result of his/her participating in the activities of this event which may occur during travel time, participation in activity, and any other time involved in the event.

Please check one of the following:

\_\_\_ I give permission for my child's picture to be taken and used for publicity about this camp.

\_\_\_ I do NOT give permission for my child's picture to be taken or used for this camp.

\_\_\_\_\_  
Parent/ Guardian's signature

\_\_\_\_\_  
Date

**Health Information:**

Does your child have any allergies (food, medicine, poison ivy, etc.)? **No Yes** If yes please list \_\_\_\_\_

\_\_\_\_\_

Is there any restriction of activity for medical reasons? **No Yes** If Yes, please explain \_\_\_\_\_

\_\_\_\_\_

Is there any condition now requiring medication? **No Yes** If yes please list:

Name of medication \_\_\_\_\_ Will it be brought to camp? **Yes No**

**ALL MEDICATIONS BROUGHT MUST BE LEFT WITH STAFF AT CHECK-IN!**

If more than one medication, please list on back of this registration form.



Gallia Soil and Water Conservation District  
111 Jackson Pike, Suite 1569  
Gallipolis, OH 45631  
Phone 740-446-6173 ext. 3

Dear Parent/Guardian of Camp Participant,

March, 2020

Thank you for registering your child/children for the 2020 Conservation Day Camp which takes place June 2-3, 2020! In this letter, we have provided additional information about the Day Camp, including a detailed schedule of activities and suggestions on how to prepare for the Camp. The registration form needs to be completed and returned to the Gallia SWCD by the **deadline of May 15<sup>th</sup>, 2020.**

**Preparation for camp:** Campers should wear old, comfortable clothes, and shoes that can get muddy and wet. Bring extra footwear or clothes to change into after the creek seining. We will be taking nature hikes, so children should wear socks and comfortable shoes that are appropriate for a hike. Flip Flops are frowned upon as it will be hard to hike in those. If your child wants to wear boots for wading in the creek please have them bring them for the pond and creek areas. Campers should come with sunscreen and bug spray (with tick guard) already applied.

**Medical Information:** If your child has a special dietary need, please let us know before camp so preparations can be made. If your child has a special medical need or has a medication that must be taken during camp hours, **please speak directly with staff before camp.** Also, please be sure to fill out and provide the camp staff with the proper information on the registration form. Please note that if a child needs to bring any medications to camp and you do not stay with them at camp, it must be left with staff at check-in with written dosage instructions.

Also please note that if you are planning on spending the day at camp with your child, you will need to **fill out a volunteer registration form.** Please contact us for this form or fill out the morning of camp.

**Emergency Contact:** If you need to get in touch with your child during camp or in case of an emergency, please call the Gallia SWCD office at 740-446-6173 ext. 3. Staff of the Gallia SWCD will have a detailed schedule of where campers will be at all times and will take appropriate actions to contact us.

**Directions:** We will be back towards the pond area, so if you turn by the Shake Shoppe keep driving until you come to a gate, turn into the fenced area and follow that road to the registration area. Call if needed (the Gallia Co. Jr. Fairgrounds, 189 Jackson Pike).