



Critter Camp 2009
APPLICATION FOR REGISTRATION

Please Print Clearly

Camper First Name: _____

Camper Last Name: _____

Parent First Name: _____

Parent Last Name: _____

Day Phone: _____ Evening Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

All correspondence, including confirmation, will be sent via e-mail.

Date of Birth: ____/____/____ Age (at time of camp): _____

Male Female (please circle)

Emergency Contact (other than parent listed above):

Name: _____

Phone: _____ Relation: _____

Health Information

Child's Physician: _____

Phone Number: _____

Health Insurance Carrier: _____

Policy Number: _____

Please list any medical considerations: (allergies, medical conditions, physical limitations, medications)

Please list any behavioral/ special supervision needs: (this will help us staff each camp appropriately)

T-Shirt Size- please circle

Child: M L

Adult: S M L XL

Please indicate 1st & 2nd choice for the session your child would like to attend:

_____ Wk 1: June 15-June 19

_____ Wk 2: June 22-June 26

_____ Wk 3: June 29-July 3

_____ Wk 4: July 6- July 10

_____ Wk 5: July 3-July 17

_____ Wk 6: July 20-July 24

_____ Wk 7: July 27-July 31

_____ Wk 8: Aug 3-Aug 7

_____ Wk 9: Aug 10-Aug 14

_____ Early Drop Off

Office Use Only:
Date Rcvd: _____
Payment Rcvd: _____

As a non-profit organization, we often rely on grants which require certain data. Please check your answers in this optional section in regards to Camper's race/ethnicity:
___White/Caucasian ___African-American ___Hispanic ___Asian/Pacific Islander ___ American Indian

Additional Information
(over)

Parent Authorization for a Minor

I hereby state that the above health history is correct, and the above named child has permission to engage in all activities, except those noted by a physician in writing to Woods Humane Society, Inc. ("Woods Humane Society"). Pursuant to California Family Code Section 6910, should Woods Humane Society personnel deem it necessary for my child to have medical care while participating in Woods Humane Society Critter Camp (the "Camp") and such personnel is unable to contact me despite reasonable attempts to do so using the above contact information, I hereby give Woods Humane Society personnel permission to use their judgment in obtaining medical care for my child as my agent, and I give permission to the physician selected by Woods Humane Society personnel to render medical care deemed necessary and appropriate by the physician. It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required, but it is given to provide authority and power on the part of the Woods Humane Society to give reasonable care.

Release Statement

I hereby give my full consent for the above named child to participate in all activities of the Camp on Woods Humane Society property or other property within San Luis Obispo County. This authorization will remain in effect while the above named child is en route to or from, or involved or participating in any Woods Humane Society program or activity unless otherwise revoked by the undersigned, in writing, delivered to Woods Humane Society at 875 Oklahoma Avenue, San Luis Obispo, California 93405.

If my child should become a disciplinary problem and, by doing so, my child seriously affects the quality of the Camp for other participants, in the opinion of Woods Humane Society personnel, I agree to pick up my child at a location and time designated by a representative of the Woods Humane Society, however inconvenient it may be.

I hereby give my full consent for photographs of my child to be taken during the Camp's activities and such photos may be used for purposes of promoting the Camp.

Indemnity

I hereby agree to indemnify, defend, and hold harmless the Woods Humane Society and its officers, directors, employees, donors, volunteers, and agents from and against all liability, loss, damages, or expense, including reasonable attorneys' fees, resulting from injury to any person, including death, or damage to any property, which either directly or indirectly results from my child's participation in the Camp.

Enrollment Information

Due to limited enrollment, Woods Humane Society will accept all eligible applications on a first come-first served basis. Only children ages 9-12 years old at the time of camp are eligible. It is the parent/guardian's responsibility to deliver and pick up the above named child to and from Camp in a timely manner. Any absence or lateness by the parent/guardian to pick up or drop off a child should be reported immediately by calling (805)543-9316.

A registration fee of One Hundred Fifty Dollars (\$150) is due together with this application. Early Drop Off (8:30am-10am) is available for an additional \$50. A reservation will not be made for your child if full payment is not received together with this application. There will not be any reduction in fees or discount provided for any absence, delay, or early dismissal of your child. There is a twenty-five percent (25%) non-refundable processing fee. If you cancel your child's enrollment up to two (2) weeks prior to the scheduled start of attendance in the Camp, you will be entitled to a refund of seventy-five percent (75%) of the registration fee. If you cancel your child's enrollment less than two (2) weeks and more than one (1) week prior to the scheduled start of attendance in the Camp, you will be entitled to a refund of fifty percent (50%) of the registration fee. There will not be a refund for cancellations made less than (1) week prior to the scheduled start of attendance.

Acceptance

I have read and understand the above terms and conditions and I agree to be bound by such terms and conditions.

Signature of Parent/Guardian: _____ **Date:** _____

Please print the names and phone numbers of anyone else authorized to pick up your child (including grandparents, babysitters, other campers' parents, etc.) **Only people listed on this application will be allowed to pick up your child:**

_____	(_____) _____
_____	(_____) _____
_____	(_____) _____

Early Drop-Off Information

Enrollment for early drop off will close when registration closes. There are only 5 available early drop-off spots each week. Early drop-off is not an extension of camp activities; it is to provide child care for campers while alleviating transportation stress for parents prior to the 10am Camp start time.

Teen Volunteer Counselors

Camp Volunteer Job Description

The job of the camp volunteer is to assist the Woods Humane Society Critter Camp Counselors in educating children about humane attitudes and pet responsibility during week-long day camps. Please read the following requirements for eligibility:

- ☀ Volunteers are required to be at least 15 years old by the beginning of their volunteer week
- ☀ Dependable, mature self-starter
- ☀ Good communications skills, willingness to take on duties
- ☀ Enthusiasm and responsibility are requirements for this position
- ☀ Assist camp counselor and prepare supplies for teachers (before and after camp)
- ☀ Set up and clean up areas following activities
- ☀ Monitor child and animal behavior and safety at all times

All volunteers must be available for one full week from June 15th – August 14th, 2009. Hours are Monday through Thursday 8:30am-4pm. Teen Volunteers will not work on Fridays. Due to the short term nature of the position, no time off requests can be granted.

Camp Volunteer Application Process

1. Complete the Camp Volunteer Application Form.
2. Complete the Volunteer Release with appropriate signature.
3. Applications must be received prior to June 1st.
4. If offered a volunteer position, applicants must attend a **Camp Training Session**. Training session is **MANDATORY** for all volunteers.

