



**THE FLUVARIUM  
SUMMER NATURE CAMPS 2019  
REGISTRATION FORM**

OFFICE USE ONLY: Initial upon receipt of payment _____	
Which Camps: Total:	Date of Payment: MOP:

**Jr. Discovery Camp:** Campers have finished Grades K, 1 or 2  
**Nature Discovery Camp:** Campers have finished Grades 1, 2 or 3  
**Creature Adventure Camp:** Campers have finished Grades 3, 4 or 5

- |   |   |  |   |   |   |
|---|---|--|---|---|---|
| <input type="checkbox"/> A <b>July 2-7</b><br>4-day \$135 | <b>Discovery Camp</b><br>Completed Grades 1-3 | <input type="checkbox"/> D <b>July 22-26</b>                         | <b>Discovery Camp</b><br>Completed Grades 1-3     | <input type="checkbox"/> G <b>Aug 12-16</b> | <b>Adventure Camp</b><br>Completed Grades 3-5     |
| <input type="checkbox"/> B <b>July 8-12</b>               | <b>Discovery Camp</b><br>Completed Grades 1-3 | <input type="checkbox"/> E <b>July 29-Aug 2</b><br>Incl. Regatta Day | <b>Jr. Discovery Camp</b><br>Completed Grades K-2 | <input type="checkbox"/> H <b>Aug 19-23</b> | <b>Discovery Camp</b><br>Completed Grades 1-3     |
| <input type="checkbox"/> C <b>July 15-19</b>              | <b>Adventure Camp</b><br>Completed Grades 3-5 | <input type="checkbox"/> F <b>Aug 5-9</b>                            | <b>Discovery Camp</b><br>Completed Grades 1-3     | <input type="checkbox"/> I <b>Aug 26-30</b> | <b>Jr. Discovery Camp</b><br>Completed Grades K-2 |

**Camp Program runs 9am-4pm**

**Supervision from 8:30am – 4:30pm (extension available at a small fee)**

<b>T-Shirt, Unisex (Circle One):</b>	<b>Youth-S Youth-M Youth-L Youth-XL/Adult-S Adult-M Adult-L Adult-XL</b>
<i>(Only Youth-Medium for Discovery Camp and Adult-Small for Adventure Camp available after May 25)</i>	

*Our Summer Nature camps are designed to capture the interest and the imagination of the campers as they explore the outdoors and nature through engaging and thought provoking programs. Group size is generally 10 campers to one Lead Counsellor plus one or two Junior Counsellors (ages 13-19). Highlights include fishing, hiking to the Botanical Garden (except in Jr. Discovery) and swimming at the Aquarena. Individual camp schedules repeat weekly. Some campers choose to attend multiple weeks and always learn and notice new things, program changes slightly with the season and availability of special guests. Find more details on our website.*

**Register any time at The Fluvarium, 5 Nagle's Place, St. John's, A1B 2Z2 or by Phone at 709-754-3474**

Forms can be submitted by: Fax 709-754-5947 Email at [kids@fluvarium.ca](mailto:kids@fluvarium.ca) (call to confirm availability and arrange payment).

**COST: \$165 + 15% HST** per week (total: \$189.75) and includes a T-shirt (personalized size selection available until May 24).  **Early drop off (8 a.m.)** available at \$10 + HST per week (\$11.50).  **Late pick up (5 p.m.)** available at \$10 + HST per week (\$11.50).

**Refund Policy:** A \$50 charge will be withheld on any cancellations after May 15. If that partial refund is requested due to extenuating circumstances after May 15, a seven day notice is required or a Doctor's note in case of illness. Fees will not be reduced for missed days.

All Payments are due at the time of registration.	Method: <input type="checkbox"/> Visa/ MC/ Amex _____ Expiry _____
TOTAL PAYMENT: _____	<input type="checkbox"/> Cash/ Cheque (Attached) CVV# _____

Camper's Name \_\_\_\_\_  
 Date of Birth (Year/Month/Day) \_\_\_\_\_  
 Age (at camp) \_\_\_\_\_ Grade currently completing: \_\_\_\_\_  
 Address & Town \_\_\_\_\_  
 Postal Code \_\_\_\_\_  
 Parent/Guardian \_\_\_\_\_  
 Relationship \_\_\_\_\_  
 Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_  
 (C) \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Second or Emergency Contact \_\_\_\_\_  
 Relationship \_\_\_\_\_  
 Phone: (H) \_\_\_\_\_ (W) \_\_\_\_\_  
 (C) \_\_\_\_\_  
 Name of person(s) other than those listed above who may pick up the child (please notify us of any changes): \_\_\_\_\_  
 \_\_\_\_\_

**BASIC CAMP GUIDELINES:** Camp program will begin 9:00 a.m. and end 4:00 p.m. daily. Activities are planned to fill the whole time. Supervision is provided from 8:30 a.m. to 4:30 p.m. Extension available at a small fee.

Campers are to adhere to our safety rules and code of conduct as reviewed and posted on the first day of the Camp.

Campers will be outdoors daily. Please dress for the weather and bring a change of clothing. A full kit list will be supplied closer to camp.

Campers are to bring a nut-free bagged lunch daily (allergy concerns will be outlined closer to camp). Refrigerator and microwave are unavailable.

No electronics at camp (cameras allowed). Leave all valuable items at home; The Fluvarium is not responsible for lost or stolen items.

**Initial:** \_\_\_\_\_

**PARTICIPATION:** As guardian of the mentioned minor I hereby grant permission for the Minor to participate in all aspects of The Fluvarium's Summer Nature Camps including outdoor exploration, hikes and swimming at the Aquarena with the understanding that there will be adequate supervision at all times.

**Initial:** \_\_\_\_\_

**IMAGE RELEASE:** I understand that during the course of the event pictures may be taken of my child. I give permission for my child's image (without the use of his/her name) to be used for promotional purposes as The Fluvarium aims to reach the public with its message and promote programs.

**Initial:** \_\_\_\_\_

Please note or attach details about Special Needs, Medical Conditions or Allergies the staff should be aware of (including reaction and treatment):  
 \_\_\_\_\_  
 \_\_\_\_\_

We have no specialized staff to assist children with special needs. Though we aim to be as inclusive as possible, please discuss any special needs with the Camp Director before enrolling your child.

**AUTHORIZATION FOR CONSENT FOR TREATMENT:** Should a medical emergency arise whereby the staff of The Fluvarium were unable to contact me, I the undersigned authorize the staff of The Fluvarium to give consent for medical examination, diagnosis and treatment of \_\_\_\_\_ (name of child) until such time as I am notified. **Child's MCP#** \_\_\_\_\_ **exp:** \_\_\_\_\_

**Guardian:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Relationship to child:** \_\_\_\_\_ **Date:** \_\_\_\_\_