

# **Patterson Park Audubon Center Mean, Green and Growing Summer Camp 2009 Information**

**(Please keep for your records)**

## **Registration Policies**

- 1) Full payment and forms are due two weeks prior to your child's summer camp. Your space at camp is held only when Patterson Park Audubon Center receives your registration forms and deposit. Payment must be cash or check.
- 2) We will send an email and/or phone call to confirm what camp week your child is registered for, please make copies of the registration forms for your records. If we cannot fit your child into the requested week, we will contact you.
- 3) The registration deposit is non-refundable. The remaining camp payment may be refunded or applied to another week of camp provided the camp director is notified before the first day of camp that week.
- 4) The medical form must be filled out completely or your child will not be allowed to attend camp. This is for the health and safety of your child. **Please pay special attention to the Tetanus shot date.**
- 5) Grades listed are for the grade your child is entering this coming fall.

## **Financial Assistance**

Patterson Park Audubon Center has a Scholarship program for several spaces in each week of summer camp. Requests for scholarships are due by June 1. We will make final decisions by June 15. If you would like to apply for a scholarship please call to request a scholarship application or visit our website at [pattersonpark.audubon.org](http://pattersonpark.audubon.org) We will send you a brief form to fill out with some family information on it. A deposit is required with your scholarship application. If Patterson Park Audubon Center is unable to fund your scholarship, your deposit will be refunded.

## **Transportation**

Mean, Green and Growing Summer Camp starts promptly at 8:30 AM and ends at 11:30 PM each weekday. Staff is not available for campers to be dropped off earlier than 8:20 AM. The campers meet each morning in front of the Virginia Baker Recreation Center, located near the intersection of Baltimore Street and Lakewood Avenue. Your child will be in the VB Recreation Center or Patterson Park at all times. They will only be able to leave with a parent or adults listed on the registration paperwork under "Child Pick-Up Information". If a new arrangement develops, a note or email needs to be provided beforehand. Pick up takes place in front of the Virginia Baker Recreation Center.

## **Equipment List**

Please dress campers for outside activity. Clothing should be able to get dirty and keep your child warm/cool and dry. Please do not bring anything to camp that you are afraid of losing. It's recommended to write your child's name on their extra clothing, hats, water bottle, etc.

### **The following items should be brought to camp each day:**

- Refillable water bottle
- Hat or cap
- Sun screen
- Raingear (poncho, rain jacket)

**\*We ask that campers do not bring i-pods, cell phones or other electronic toys to camp.**

**Patterson Park Audubon Center is not responsible for such items if brought and lost at camp.\***

## **Important Notice Regarding Insect Stings**

**Any child or adult attending Patterson Park Audubon Center's Mean, Green and Growing Summer Camp who is allergic to insect stings should have their own emergency insect bite medications including Benadryl® and an Epipen®. For their own protection, they must be able to administer its contents to themselves, and must provide a written statement from their physician stating that they are personally able to use the Epipen® for themselves without assistance. Patterson Park Audubon Center and the National Audubon Society cannot accept any responsibility for administering medications or for the effects of using them.**

**Questions? Please call 410-558-2473 or email: [ppaudubon@gmail.com](mailto:ppaudubon@gmail.com)**

**Patterson Park Audubon Center**  
**Mean, Green and Growing Camp Registration 2009**

Child's Name: \_\_\_\_\_ Birth date:    /    /    Age: \_\_\_\_\_ Grade in Fall: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Mother/Guardian: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Name of Father/Guardian: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

School: \_\_\_\_\_ Email(s): \_\_\_\_\_

This child has my permission to take part in Patterson Park Audubon Center (PPAC) summer camp programs, and I agree to follow all policies governing these programs, which includes payment for all programs. I hereby grant permission for staff members of PPAC to photograph my child/children participating in summer camp. I understand these photographs may be used for future press purposes, brochures or in newsletters.

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**Signature of parent/guardian**

**Please check the week(s) that your child would like to attend in the box [ ]:**

[ ] **July 13- 17, 8:30am-11:30am, \$150**

[ ] **August 3-7, 8:30am- 11:30am, \$150**

**PAYMENT OPTIONS** - please make checks payable to Patterson Park Audubon Center

[ ] I enclosed a \$25.00 **non-refundable** deposit. Full payment is due 14 days prior to the start of each week.

[ ] I enclosed a full payment (\$150 per week)

Child's Last Name: \_\_\_\_\_

## PPAC Mean, Green and Growing Camp 2009 • Emergency Medical Form

**Both sides of this form must be completed in full for your student to attend camp.**

Name of Child	Mother's Name	Father's Name
Street Address	Street Address	Street Address
City/State/Zip	City/State/Zip	City/State/Zip
Birthdate	Day time Phone	Day time Phone
Phone #	Cell Phone	Cell Phone
Camp Week Enrolled		

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**PEOPLE TO BE CONTACTED IN CASE OF EMERGENCY IF PARENTS CANNOT BE REACHED:**

Name	Name
Address City/State/Zip	Address City/State/Zip
Relationship to Child Phone #	Relationship to Child Phone #

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**FAMILY PHYSICIAN & DENTIST:**

NAME OF PHYSICIAN Phone #	NAME OF DENTIST Phone #
Address City/State/Zip	Address City/State/Zip

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**CAMPER PICK-UP INFORMATION**

\_\_\_\_\_ may be picked up by the following people:

(Child's Name)

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Child's Last Name: \_\_\_\_\_

**MEDICAL HISTORY**

Allergies (types & reactions): \_\_\_\_\_

Chronic physical problems: \_\_\_\_\_

Physiological or behavioral problems: \_\_\_\_\_

History of hospitalization: \_\_\_\_\_

List any illnesses/operations the child has had: \_\_\_\_\_

Special medications currently administered:

Medication: \_\_\_\_\_ Dosage: \_\_\_\_\_ Time given: \_\_\_\_\_ Reason: \_\_\_\_\_

Medication: \_\_\_\_\_ Dosage: \_\_\_\_\_ Time given: \_\_\_\_\_ Reason: \_\_\_\_\_

**Date of last Tetanus shot:** \_\_\_\_\_

Name of Maryland school attended \*\*: \_\_\_\_\_

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

**\*\* NOTE: If camper is not enrolled in a Maryland school please attach a copy of his/her immunization record to this form!**

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**MEDICAL AUTHORIZATION AND RELEASE**

Should my child sustain or incur any accident or illness while attending Patterson Park Audubon Center Mean, Green and Growing Camp, and in the event that I, \_\_\_\_\_, cannot be reached in an emergency, I do hereby authorize the staff and employees of Patterson Park Audubon Center to secure proper medical treatment (including hospitalization and/or anesthesia and/or surgery ordered by the physician chosen) and to execute any and all documents, including necessary releases required by any medical facility to perform any emergency or other medical care for my child.

I further agree that in consideration of my child attending Patterson Park Audubon Center Mean, Green and Growing Camp, I will hold the said Patterson Park Audubon Center harmless from any action by me or my child on account of any injury or damage sustained or suffered by my child while attending Mean, Green and Growing Camp. I hereby waive my right of legal action against Patterson Park Audubon Center, Chesapeake Audubon Society, National Audubon Society and the officers and staff thereof.

Signature of parent or guardian: \_\_\_\_\_

Witness \_\_\_\_\_ Date: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ Policy Number: \_\_\_\_\_

**Patterson Park Audubon Center  
Telephone: (410) 558-2473  
Fax: (410) 558-0531  
2437 Eastern Avenue, Baltimore, MD 21224**