

**Louisa County Conservation  
2011 Summer Nature Camp Registration**

<b>*</b>	<b>Camp</b>	<b>Grade 2011-12</b>	<b>Dates</b>	<b>Times</b>	<b>Cost</b>
	Cricket Camp	(3-4 yrs old)	June 8-10	9:00 -11:30 am	\$30
	Polliwogs	K – 1 <sup>st</sup>	June 20-24	8:30 - 11:30 am	\$35
	Nature Detectives	2 <sup>nd</sup> – 3 <sup>rd</sup>	June 27 - July 1	8:30 - Noon	\$40
	Fishing Camp	3 <sup>rd</sup> – 5 <sup>th</sup>	June 13-17	8:30 - Noon	\$40
	Junior Naturalists	4 <sup>th</sup> – 6 <sup>th</sup>	August 1-4	8:30 - Noon 8:30-2:30 on the 4th	\$45
	River Raiders Upper Iowa Canoe Trek	7 <sup>th</sup> - 8 <sup>th</sup>	July 27, 1-5 pm (Training) August 10, 9 am – August 12, 5 pm (Trip)		\$75
	Boundary Waters Wilderness Canoe Trek	High School Ages 14-18	June 25 – July 2	For more info or to register... <a href="http://www.extension.iastate.edu/4h/center/4HWildernessTrips.htm">www.extension.iastate.edu/4h/center/4HWildernessTrips.htm</a> Cost \$400 – includes most meals, gear and transportation	

**T-shirt size:**     Youth XS (4-5)     Youth S (6-8)     Youth M (10-12)     Youth L (14-16)  
 Adult S     Adult M     Adult L     Adult XL

**Participant Information**

Name: _____	Date of Birth: _____
School: _____	Entering Grade: _____
Allergies or Health Conditions: _____	
Medications & Instructions: _____	

**Parent or Guardian Information**

**Emergency Contact (Relative or Friend)**

Name: _____	Name: _____
Relation to Camper: _____	Relation to Camper: _____
Daytime Phone: _____	Daytime Phone: _____
Evening Phone: _____	Evening Phone: _____
Cell Phone: _____	Cell Phone: _____
E-mail: _____	

Can we send camp confirmation and info via email?  Yes     No

**Sign Medical Release (page 2) and return with payment to:**

Nature Camps  
Louisa County Conservation  
12635 County Rd G-56, Suite 101  
Wapello, IA 52653

For Office Use Only:
Total \$ Received: _____
Check Number: _____

To reserve a place, registration form must be received along with payment and signed medical release (page 2).  
Cancellations must be made one month prior to the camp for payment refund unless a replacement camper is found.



## Louisa County Conservation Medical Information/Release Form

### To Be Read and Signed By Parent or Guardian

I understand that my child must be healthy and reasonably fit in order to safely participate in Louisa County recreation activities and that I will inform the program leader(s) of any medication, ailment, condition, or injury that may affect his/her ability to participate safely.

#### Medical Emergency Parental Permission

The health and history for my child is correct and complete to my knowledge. If an injury or other medical condition occurs or arises, I hereby give permission to the Louisa County Conservation staff or volunteer to provide routine health care and seek emergency treatment including x-rays or routine tests. I agree to the release of any record necessary for treatment, referral, billing or insurance purposes. I understand that I am financially responsible for charges and hereby guarantee full payment to the attending physicians or health care unit. In the event of an emergency where I cannot decide for my child, I give permission to the physician/hospital selected by the Louisa County Conservation staff or volunteer to secure and administer treatment for my child, including hospitalization.

#### Publicity/Image/Voice Permission

The Louisa County Conservation program normally takes photographs, video, and or tape recordings of our programs. During activities, a photograph or video/audio recording may be taken of you or your child. Unless you request otherwise, your signature below will be considered permission for Louisa County Conservation to photograph, film, audio/video tape, record and/or televise your image and/or voice for the image and/or voice of your child for use in any publications or promotional materials, in any medium now known or developed in the future without any restrictions.

#### Behavior Guidelines

Behavior guidelines and consequences are established at each of Louisa County Conservation's camps and clubs. These guidelines (or rules) are designed to protect our staff as well as the safety of the campers and club members. It is our goal to provide a safe and fun outdoor learning experience for all participants. I understand failure to follow behavior guidelines will include discipline measures which may include dismissal from the camp or club without refund.

#### Louisa County Conservation Assumption of Risk and Release of Liability (Please read carefully.)

I give permission for \_\_\_\_\_ to participant in the Louisa County Conservation Program.  
(Child's name)

I understand that Louisa County Conservation (LCC) project activities/events may involve certain risks of physical activity and possible injury and that Louisa County Conservation will provide each participant with reasonable care, but that LCC cannot guarantee that my child will remain free of injury. In addition, some LCC projects including but not limited to: challenge course, canoeing, kayaking and other sporting activities have a higher degree of risk. I nonetheless wish to have my child participate in Louisa County Conservation activities and assume the risk of participating. I agree to release from liability, indemnify and hold harmless the Louisa County Conservation Board employees, volunteers and agents from any and all claim and/or cause of action arising out of and related to any injury, loss, penalties, damage, settlement, costs or other expenses or liabilities that occur as a result of my child's participation. This release, however, is not intended to release the above-mentioned from liability arising out of their sole negligence.

Parent or guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

For more info about summer nature camps visit: [www.lccb.org](http://www.lccb.org) or call 319-523-8381.