

# 2018 Fall Evening Camp Enrollment Form

Paid	_____
Cash	_____
Check Number	_____
Confirmation	_____

Friday, September 28, 2018 5:30 P.M.- 9:30 P.M.

\$30 registration fee

Children must be 6-12 years of age to attend.

PLEASE PRINT THE FOLLOWING INFORMATION:

CAMPER'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

(Information to parents will be sent via e-mail)

MEDICAL, PHYSICAL, AND/OR LEARNING DISABILITIES

\_\_\_\_\_  
(Important for coordinating staffing and resources. Acceptance and participation is not affected by this information.)

PARENT'S or GUARDIAN'S NAME \_\_\_\_\_

PHONE #: (HOME) \_\_\_\_\_ (WORK) \_\_\_\_\_

We, the parents or legal guardians of \_\_\_\_\_, would like to register our child for the camp experience at the Ohio Bird Sanctuary at its outdoor facility at 3774 Orweiler Rd., Mansfield, Ohio and hereby permit our child to attend.

We understand that while all possible precautions will be taken to allow our child to have a rewarding, educational experience, the Ohio Bird Sanctuary will not be held responsible for injuries or losses, either to person or property, while our child visits this facility, and we release the Ohio Bird Sanctuary from such liability.

We understand that some of the activities, such as trail hiking, have risks and may be strenuous. We are aware of these risks and of our child's ability. We give the staff of the Ohio Bird Sanctuary permission in an emergency situation to seek medical attention for our child.

We also understand that we are responsible for our child's actions while at the facility. We agree to be responsible and pay for any property damage caused by our child.

\_\_\_\_\_  
Parent or Guardian's Signature

\_\_\_\_\_  
Date

Send form & payment to: Ohio Bird Sanctuary 3774 Orweiler Road, Mansfield, Ohio 44903