



2022 Summer Camp Registration Form

7191 Wagner Way Suite 101-102, Gig Harbor, WA 98335

Phone: 253-514-6338 ext. 3

Website: www.gigharborfoundation.org/cbns

Email: curiousbynature@gigharborfoundation.org

Please return forms with payment to the above address. Checks should be payable to GGHF Curious by Nature School. ***If you are registering more than one child, please use a separate form for each child.***

CHILD INFORMATION:

Child's Full Name: _____ Preferred Name: _____

Age on first day of camp (*see camp requirements*): _____ Date of Birth: _____ Gender: _____

Current school/daycare (if any): _____ Toilet trained (month/yr or N/A): _____

PARENT / GUARDIAN INFORMATION:

Parent(s)/Guardian(s): _____

Phone: _____ Alternate Phone: _____ Email: _____

Emergency Contact(s)/Authorized Pick-up and Phone: _____

CAMP REGISTRATION:

Please check how you heard about our Summer Program (check all that apply):

☐ School ☐ Web Site ☐ Flyer/Ad ☐ Community Event ☐ Word of Mouth ☐ Other: _____

Camp Details: Maximum class size is 12 to 16, and staff to child ratio is 1:6 to 1:8, depending on age group. Campers must bring a water bottle and non-perishable, nut-free snack daily. *We have COVID-19 safety measures in place and follow the WA State Department of Health guidelines.*

PAYMENT DETAILS

Camp Fees: Full payment and registration forms are due at least 2 weeks before camp.

- \$80: 2-day half-day camps (*4-day combo available for select age groups*)
- \$110: 3-day half-day camps

Discounts: Full summer, 5% (*must be registered for camp weeks 1-7*); Multi-child, 10%.

We accept check, cash, or credit/debit cards (+2.59% to 3.39% card processing fee).

Cancellation Policy: Cancellations made at least 14 days before camp start date receive full refund minus a \$25 cancellation fee per camp. Cancellations made less than 14 days before camp start date receive a 50% refund per camp. Inside of 7 days, no refund will be given unless the camp is canceled.

Payment method: ☐ Cash ☐ Check (list check #) _____ ☐ Visa ☐ MasterCard ☐ Discover ☐ Am Ex

Authorized Signature: _____ Date: _____

CAMP REGISTRATION *continued*:

CBNS' summer camp program is a combination of nature play and outdoor exploration, STEAM topics, sustainable make & take crafts, games, stories and of course, fun! For the campers' enjoyment and safety, campers will be divided by age group and spaces, and will not mix to the extent possible. Please see the requirements for each age group and select accordingly.

Campers in the sessions for ages 3 and up must be 3 years old by the first day of camp AND toilet trained and independent in the bathroom.

Campers in the sessions for ages 2-3 must be 2 years old by the first day of camp and are not required to be toilet trained.

Sessions / Theme	Camp Fee(s)
WEEK 1: July 6-8 - WILDLIFE DETECTIVES	
<input type="checkbox"/> Ages 3-4 / Wed-Thu / 9:15 AM-12:15 PM / \$80	
<input type="checkbox"/> Ages 5-9 (Primarily outdoors) / Wed-Thu / 9 AM-12 PM / \$80	
WEEK 2: July 11-14 - JR. EXPLORERS	
<input type="checkbox"/> Ages 3-4 / Tue-Thu / 9:15 AM-12:15 PM / \$110	
<input type="checkbox"/> Ages 4-5 / Tue-Thu / 9:15 AM-12:15 PM / \$110	
<input type="checkbox"/> Ages 5-9 (All outdoors) / Wed-Thu / 9 AM-12 PM / \$80	
WEEK 3: July 18-21 - NATURE'S ART	
<input type="checkbox"/> Ages 3-5 / Tue-Thu / 9:15 AM-12:15 PM / \$110	
<input type="checkbox"/> Ages 4-6 (Primarily outdoors) / Mon-Tue / 9 AM-12 PM / \$80	
<input type="checkbox"/> Ages 5-9 (Primarily outdoors) / Wed-Thu / 9 AM-12 PM / \$80	
WEEK 4: July 25-28 - MAD SCIENCE	
<input type="checkbox"/> Ages 3-5 / Tue-Thu / 9:15 AM-12:15 PM / \$110	
<input type="checkbox"/> Ages 4-6 (Primarily outdoors) / Mon-Tue / 9 AM-12 PM / \$80	
<input type="checkbox"/> Ages 5-9 (Primarily outdoors) / Wed-Thu / 9 AM-12 PM / \$80	
WEEK 5: August 1-4 - NATURE'S BUILDERS	
<input type="checkbox"/> Ages 2-3 / Tue-Wed / 9 AM-11:30 AM / \$80	
<input type="checkbox"/> Ages 3-5 / Tue-Thu / 9:15 AM-12:15 PM / \$110	
<input type="checkbox"/> Ages 4-6 (Primarily outdoors) / Mon-Tue / 9 AM-12 PM / \$80	
<input type="checkbox"/> Ages 5-9 (Primarily outdoors) / Wed-Thu / 9 AM-12 PM / \$80	
WEEK 6: August 8-11 - FOREST THEATER	
<input type="checkbox"/> Ages 2-3 / Tue-Wed / 9 AM-11:30 AM / \$80	
<input type="checkbox"/> Ages 3-5 / Tue-Thu / 9:15 AM-12:15 PM / \$110	
<input type="checkbox"/> Ages 4-6 (Primarily outdoors) / Mon-Tue / 9 AM-12 PM / \$80	
<input type="checkbox"/> Ages 5-9 (Primarily outdoors) / Wed-Thu / 9 AM-12 PM / \$80	
WEEK 7: August 15-18 - NATURE'S MARKET	
<input type="checkbox"/> Ages 2-3 / Tue-Wed / 9 AM-11:30 AM / \$80	
<input type="checkbox"/> Ages 3-5 / Tue-Thu / 9:15 AM-12:15 PM / \$110	
<input type="checkbox"/> Ages 4-6 (Primarily outdoors) / Mon-Tue / 9 AM-12 PM / \$80	
<input type="checkbox"/> Ages 5-9 (Primarily outdoors) / Wed-Thu / 9 AM-12 PM / \$80	
Camp Fees Subtotal	\$
Additional discount/fees	\$
TOTAL DUE	\$

PERMISSION AND LIABILITY WAIVER:

Does your child have any illnesses, health irregularities, physical challenges or other special considerations that require special accommodations for participation in camp activities? If yes, please describe.

Please list all allergies, current medications, vitamins, inhalers, etc. Please note that if your child requires an emergency allergy kit (e.g. EpiPen, bee sting kit, or inhaler, etc.), you must supply medication labeled with child's name and detailed instructions on our Permission to Administer Medication Form to the office prior to your child's attendance. Kits are returned if unused.

My child, _____, has permission to fully participate in GGHF Curious by Nature School's Summer Program activities. I, as parent/legal guardian, do hereby grant the GGHF CBNS staff and designated adults the right to authorize emergency medical treatment for my child in the event that I or my designated representative cannot be reached. I agree to hold harmless GGHF Curious by Nature School and its agents from liability resulting from an accident.

I hereby grant permission for staff to take whatever steps may be necessary to obtain emergency treatment for my child. These steps may include, but are not limited to, the following:

1. In a life-threatening emergency or urgent situation, staff will call 911 before making an attempt to contact parents.
2. For a non-life-threatening emergency, we will attempt to call the parent/guardian first, and if we cannot reach them, we will attempt to contact the Emergency contacts listed on the Emergency Information form. If we cannot make an appropriate contact, we will call paramedics or the child's health care provider.

I understand that GGHF CBNS and staff will not be responsible for anything that may happen as a result of false information provided by parents/guardians, or as a result of the parent/guardian's failure to provide information at the time of enrollment. I understand that staff will not administer drug or medication without specific written & signed instruction from the health care provider and/or the child's parent/guardian.

Enrollment for your child in GGHF CBNS' Camp Program constitutes your agreement to this waiver.

I understand that all Emergency and contact information must be completed before my child may attend camp.

I have read and understand all policy and procedural information, including discipline, health, payment, and cancellation policies.

Signature Parent/Guardian _____ Date _____

Publicity Release Form (optional): I authorize GGHF Curious by Nature School to use a photograph or other image of my child for public relations purposes connected to this camp program and future programs associated with GGHF CBNS. I understand that my child's name will not be published with an image.

Signature Parent/Guardian _____ Date _____