



Nature Day Camp Registration Form

Thank you for your interest in our Nature Day Camp at the Boardman River Nature Center! Please use a separate registration form for each child. Please print clearly, sign, and return the completed form to: **Grand Traverse Conservation District, 1450 Cass Road, Traverse City, MI 49684.** For additional information, please call us at 231.941.0960.

A. PROGRAM SELECTION

Register Me!	Age	Program	Dates	Time
	4-6	Nuts about Nature	July 12-16	9 a - 12 p daily
	4-6	Pond Detectives	August 9-13	9 a - 12 p daily
	6-8	Creepy Crawlies	July 19-23	9 a - 12 p daily
	6-8	Woodland Wonders	August 16-20	9 a - 12 p daily
	8-10	River Explorers	July 26-30	9 a - 12 p daily
	10-12	Fossils Frenzy	August 2-6	9 a - 12 p daily

B. CONTACT INFORMATION

Name of child: _____

Age: _____

Birthday (month/day/year): _____

Male Female

Name of parent/guardian: _____

Address 1: _____

Address 2: _____

City, State, Zip: _____

Home phone: _____

Work phone: _____

Cell phone: _____

Email address: _____

Emergency contact name: _____

Relationship: _____

Home phone: _____

Work phone: _____

Cell phone: _____

C. SPECIAL CONSIDERATIONS

Does your child have any known allergies? Yes No
If yes, please describe:

Does your child have any existing health conditions or restrictions on activity? Yes No
If yes, please describe:

Does your child have any special needs? Yes No
If yes, please describe:

Has your child participated in other Boardman River Nature Center programs? Yes No
If yes, please describe:

Please feel free to provide any additional information that you would like us to know about your child below.

D. PAYMENT

Nature Day Camp program fee: \$75 per week

Total fees (\$75 x number of programs): _____

Method of Payment:

- Cash
- Check (made payable to GTCD)
- Credit card

Mastercard _____ Visa _____

Card Number _____

Expiry Date _____

Cardholder Name _____

Signature _____

E. WAIVERS

My signature below indicates my consent to the Grand Traverse Conservation District to use any photograph, picture or likeness of my child for promotional purposes, and for the GTCD staff to transport my child if needed.

I understand that there are no refunds for cancellations within two weeks (14 days) of a camp's start date.

I understand that some day camp programs will include wading into the pond or stream and I give permission for my child to do so. I give my permission to the Grand Traverse Conservation District to administer first aid to my child, or to seek medical treatment for my child, if the need arises.

Signature of parent/guardian: _____

Date: _____

F. CONFIRMATION & LOGISTICS

Upon receipt of your registration form and payment, we will send you a confirmation and additional details about what to wear, what to bring and what to expect at the Nature Day Camp. All campers should be prepared to head outside - rain or shine!

Grand Traverse Conservation District

1450 Cass Road, Traverse City, MI 49684 // 231.941.0960 // www.NatureIsCalling.org