



Summer Camp 2011 Registration

Camper Name: _____ Grade level for 2011-2012: _____

Parent/Guardian: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____

Emergency Contact 1: _____ Phone: _____

Emergency Contact 2: _____ Phone: _____

Special needs/Medical Information (medical, dietary, physical): _____

Camp instructors can not administer medication, but can remind camper to take medication. Please make sure your child can take their medication without assistance, or make alternate arrangements.

Are you a member of The Gulf Breeze Zoo? yes no

Please indicate your choice of camp with an "x" in the choice column next to the camp you wish to enroll in.

| Choices | Grade | Date(s) | Time | Cost Members | Cost Non-members |
|--------------------------|-------|------------------------|-----------|--------------|------------------|
| <input type="checkbox"/> | K-2 | June 20-24, 2011 | 9AM –1PM | \$160 | \$210 |
| <input type="checkbox"/> | 3-5 | June 27 – July 1, 2011 | 9AM – 3PM | \$260 | \$310 |
| <input type="checkbox"/> | 6-8 | July 4-8, 2011 | 9AM – 3PM | \$260 | \$310 |
| <input type="checkbox"/> | K-2 | July 11-15, 2011 | 9AM –1PM | \$160 | \$210 |
| <input type="checkbox"/> | 3-5 | July 18-22, 2011 | 9AM – 3PM | \$260 | \$310 |
| <input type="checkbox"/> | 6-8 | July 25-29, 2011 | 9AM – 3PM | \$260 | \$310 |

Payment type: check Credit Card (Visa or Master Card) Cash

Check # _____

Card type: _____

CC Number: _____

Make checks payable to: The Gulf Breeze Zoo. **Expiration:** _____ **CVS:** _____

Drop off/mail forms and payment to:

The Gulf Breeze Zoo
Attn: Zoo camp
5701 Gulf Breeze Pkwy
Gulf Breeze, FL 32563

**READ AND SIGN
ZOO CAMP POLICIES
AND RELEASE FORM
ON NEXT PAGE.**

For official Zoo use:
Pymt amount: _____
Date: _____
Employee: _____



Zoo Camp Policies and Release Form

Please read and sign to indicate you have read and agree to the Hold Harmless Statement, Behavioral Policy, Photo Release, and Emergency Treatment Authorization.

Child's name: _____

Hold Harmless Statement

I am the parent or legal guardian of above named child who is under 18 years and who wants to participate in Zoo Camp at The Gulf Breeze Zoo. I agree that my child's or ward's participation in the program(s) and its activities is voluntary and at the sole risk of the undersigned. In consideration of my child's or ward's participation in the program(s), I hereby release the Gulf Breeze Zoo, all its instructors, employees, officers, directors, agents, and volunteers from any and all liability, losses or claims to me, to my child or ward, and to all my legal representatives, assigns, heirs, and next of kin for damage and injury to me or my child or ward or to any person or property arising out of participation in the program(s) whether on The Gulf Breeze Zoo property or elsewhere. This agreement includes but is not limited to claims or demands on account of injury or damage caused by negligence of The Gulf Breeze Zoo staff and any other individual listed above.

Behavior Policy

The Zoo is committed to ensuring that all children who attend Zoo programs are provided an atmosphere where they can learn together free of harassment or intimidation. Fun and safety are only possible when there are behavior guidelines that all campers agree to follow. You and your child or ward are advised to inform Zoo Camp instructors of any conduct that is offensive or that is in contradiction to the Zoo's commitment to a harassment-free environment. All participants are expected to show respect for instructors, fellow campers, zoo visitors, facilities, and animals, and themselves. Disruptive or dangerous behaviors and physical aggression are not acceptable. Our instructors are professionals and will use sound, positive management tools within their programs and activities. If any camper does not respond to these measures, the student may be taken for a time out or asked to sit out of an activity. If problem behavior persists, the parent or guardian will be contacted and the participant may be removed from the program with no refund of program fees.

Photo Release

I hereby confer on Mandy Evers Events and Promotions, The Gulf Breeze Zoo, and their employees the absolute and irrevocable right and permission with respect to photographs and/or motion pictures taken of my minor child or ward in which they may be included with others: to use, re-use and re-publish, in whole or in part, in any medium for any purpose including but not limited to promotions, advertising, and trade. I hereby release and discharge Mandy Evers Events and Promotions, The Gulf Breeze Zoo, and their employees from all and any claims and demands ensuing from or in connection with the use of photographs or motion pictures. By signing below represent that I am the parent/guardian of the above named child/ward, and I consent to the foregoing on behalf of my minor child/ward.

Emergency Treatment Authorization

I give permission for immediate medical treatment of my child/minor as required in the judgment of any licensed physician, emergency medical technician, paramedic, nurse, hospital, or any other medical or health care provider. I understand and agree that I will be responsible for any fees associated with such treatment. I acknowledge that there is a possibility of complication and unforeseen consequences in any medical treatment and I knowingly and voluntarily agree to assume such risk for and on behalf of myself and my minor child/ward.

By signing below I agree to the hold harmless, behavior policy, photo release, and emergency treatment authorization.

Signature of parent/guardian: _____ Date: _____