

# Bug It!

## Ney Nature Center's Day Camp 2010 Information Sheet

Ney Nature Center, PO Box 93, Henderson MN 56044  
507-248-3474

### *Join us for an insect and spider extravaganza!*

Students who have completed Kindergarten through 5<sup>th</sup> grade are invited to join the NNC for this great opportunity to explore, learn, and experience nature at the Ney Nature Center. During the two days of camp you will be hiking, observing, studying and enjoying what nature has to offer in reference to Bugs!!!. You can sign up for one, two, or all three sessions. Each session will offer different activities.

The program will be held rain or shine and weather is changeable so please wear shoes and clothing appropriate for the weather and rough terrain. All participants are responsible for providing their own lunch, insect repellent, sun protection and a water bottle. A daily snack and lunch beverage will be provided.

### **Days and Times**

#### **Session 1:**

Bluebirds (completed grades K-2nd) - June 21st to 22nd - 9am to 4:00pm

Eagles (completed grades 3-5th) - June 28th to 29th - 9am to 4:00pm

#### **Session 2:**

Bluebirds (completed grades K-2nd) - July 19th to 20th - 9am to 4:00pm

Eagles (completed grades 3-5th) - July 26th to 27th - 9am to 4:00pm

#### **Session 3:**

Bluebirds (completed grades K-2nd) - August 16th to 17th - 9am to 4:00pm

Eagles (completed grades 3-5th) - August 23rd to 24th - 9am to 4:00pm

### **Fees**

#### One Session:

\$45.00 for Non-Ney Nature Center Members

\$42.00 for Ney Nature Center Members

#### Two Sessions:

\$85.00 for Non-Ney Nature Center Members (\$5 discount)

\$79.00 for Ney Nature Center Members (\$5 discount)

#### Three Sessions:

\$125.00 for Non-Ney Nature Center Members (\$10 discount)

\$116.00 for Ney Nature Center Members (\$10 discount)

### **Registration**

Mail the complete NNC Day Camp Registration forms with the fee by May 28th for a t-shirt.

Confirmation and additional information will be e-mailed or mailed as soon as registrations are received. Registrations will be accepted until program is full.

### **Volunteers**

We could use your help. Complete the enclosed adult registration form if you can help. We can use bus chaperones, group helpers, 1st aiders, and someone in charge of snack. If you have an area of interest and would like to share your time, please contact us. Volunteers who commit to help two or more days and register by May 28th will receive a Bug It! Day Camp t-shirt.

### **For more information or to answer questions, contact:**

Becky Pollack, NNC Director, 507-248-3474, [neynaturecenter@frontiernet.net](mailto:neynaturecenter@frontiernet.net)

# Camper Registration Form

## Ney Nature Center's Day Camp 2010

### **Camper Information – Please Print**

Camper's Name (First, MI, Last) \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Grade in Fall of 2010 \_\_\_\_\_ Blue Bird (completed K-2) \_\_\_\_\_ Eagle (completed 3-5) \_\_\_\_\_

T-shirt Size if registering before May 29th (circle) YS YM YL AS AM AL AXL

Household Member of the Ney Nature Center \_\_\_\_\_ Yes \_\_\_\_\_ No

(Become a member at the \$25 Household level to receive member discount on day camp fees, for more information on membership visit <[www.neycenter.org](http://www.neycenter.org)> or contact Becky 507-248-3474/[neynaturecenter@frontiernet.net](mailto:neynaturecenter@frontiernet.net))

Session Attending check all that apply:

Session 1 \_\_\_\_\_ Session 2 \_\_\_\_\_ Session 3 \_\_\_\_\_

### **COMPLETE HEALTH/AUTHORIZATION FORM ON REVERSE SIDE**

Fee is due at time of registration. Make checks payable to 'Ney Nature Center'

Please sign and mail completed forms with check to:

Ney Nature Center  
PO Box 93  
Henderson MN 56044

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### Office Use Only

#### Payment Information

Date Received \_\_\_\_\_

Day Camp Fee Due \_\_\_\_\_

Amount Paid \_\_\_\_\_

Check # \_\_\_\_\_

March 2010

Camper Health Form/ Authorization  
Ney Nature Center's Day Camp 2010

Camper's Name (First, MI, Last) \_\_\_\_\_  
Session(s) Attending: Session 1 \_\_\_\_\_ Session 2 \_\_\_\_\_ Session 3 \_\_\_\_\_

Parent/Guardian Information (Please Print)

In the care of: Both Parents \_\_\_\_\_ Mother Only \_\_\_\_\_ Father Only \_\_\_\_\_ Other \_\_\_\_\_  
Name of Custodial Parent(s)/Guardian(s) \_\_\_\_\_  
Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_ Cell \_\_\_\_\_

Person to contact in case of an emergency if parent/guardian cannot be reached.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Day Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Medical Contact Information

Physician's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Medical Insurance Carrier: \_\_\_\_\_ Policy: \_\_\_\_\_

Health Considerations of Camper

Vaccinations required by school up-to-date? Yes \_\_\_\_\_ No \_\_\_\_\_ (if no, please send an explanation note)  
Allergies (include Medication and other): \_\_\_\_\_ Reaction and Treatment: \_\_\_\_\_

Chronic Concerns:

\_\_\_\_\_ This camper has no chronic health concerns and is capable for full participation.  
\_\_\_\_\_ This camper has the following chronic health Concern(s). Check all that apply.  
\_\_\_\_\_ Asthma \_\_\_\_\_ Diabetes \_\_\_\_\_ Headaches  
\_\_\_\_\_ Epilepsy \_\_\_\_\_ Other(s) \_\_\_\_\_

Provide information about supportive health care needs for each checked item:

Please explain if your camper has had a history of illness, injury or surgery which will effect participation: \_\_\_\_\_

Parent/Guardian Authorization

I give permission for my camper to attend NNC's Day Camp and participate in all activities. I give permission for my camper to be photographed and for the Ney Nature Center to use the picture for publicity.

The Emergency Care Information about my camper is complete and accurate. I know of no reason other than indicated why my child should not participate in prescribed activities except as noted. In the event my child needs medical attention while at Day Camp, I authorize the adult in charge to see that my child receives reasonable first aid and to transport my child to a health care facility for emergency services as needed.

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_