



2018 Great Outdoors Day Camp Information & Schedule

Camp Dates: July 3 to August 24, 2018 (Monday to Friday), 8:30 am – 4:30 pm

Note: No Camp – July 2 (Canada Day) & August 6 (Civic Holiday)

Camp Rates: \$28.00 per day (\$140.00 per week)

\$5.00 for EARLY drop off (8:00-8:30am) and/or \$5.00 for LATE pick-up (4:30-5:00pm)

Maximum: 30 children per day (15 children to 1 day camp staff ratio)

Ages: 7 – 12 years old (**must be 7 years old when they start Day Camp**)

Activities: Most of our time will be spent in the Great Outdoors! We will also make crafts, play games, have Wet & Wild Days (river activities, crayfish catch & release etc.), swimming, bus trips and more! During Lunch we get out of the heat and go inside the Administration Centre to watch a movie.

What to Bring Every Day:

- A nut free lunch, nut free snacks, and water bottle.
- Hat, running shoes, pool shoes, swim suit, and towel.
- Waterproof sunscreen (SPF 60 or higher) and bug repellent.
- No electronic devices (cellphones, games, music etc.).

What will we be doing?

| | |
|---|--|
| Week 1 July 3 - July 6 No Camp on Monday | <u>Survivor & The Magical Kingdom</u> Nature games, shelter creation, hike safety, how nature survives. Your imagination will be taken to the outer limits in the creation of our own Kingdom: flags, castles, currency, laws, and more. Swimming at Harrison Park pool on Wednesday. |
| Week 2 July 9 – 13 | <u>Curious Creepy Crawlers</u> Catch, identification & release, rock turnovers, explore habitats. Bus trip to GSC property on Tuesday (ie. Hibou Conservation Area). Swimming at Harrison Park pool on Thursday. |
| Week 3 July 16 – 20 | <u>Fishy Friends & River Wandering</u> Catch & release, wet feet, identification, build and race your own boats. Bus trip to GSC property on Wednesday (ie. Hibou). Swimming at Harrison Park pool on Friday. |
| Week 4 July 23 – 27 | <u>River Wandering & The Magical Kingdom</u> Nature games, wet feet, crayfish catch and release. Your imagination will be taken to the outer limits in the creation of our own Kingdom - flags, castles, currency, laws, and more. Swimming at Harrison Park pool on Monday. Bus trip to GSC property on Thursday (ie. Hibou). |
| Week 5 July 30 – August 3 | <u>Predator/Prey</u> Learn what it is like to be predator and prey, learn how animals avoid capture in special games. Swimming at Harrison Park pool on Tuesday. Bus trip to GSC property on Wednesday (ie. Hibou). |
| Week 6 August 7 – 10 No camp on Monday | <u>The Great Outdoors - Canada Summer Games</u> Crazy Games, relays and awards ceremony! Swimming at Harrison Park pool on Wednesday. Bus trip to GSC property on Thursday (ie. Hibou). |
| Week 7 August 13 – 17 | <u>Fishy Friends & River Wandering</u> Catch & release, wet feet, identification, build and race your own boats. Bus trip to GSC property on Tuesday (ie. Hibou). Swimming at Harrison Park pool on Thursday. |
| Week 8 August 20 – 24 | <u>River Wandering & The Magical Kingdom</u> Nature games, wet feet, crayfish catch and release. Your imagination will be taken to the outer limits in the creation of our own Kingdom: flags, castles, currency, laws, and more. Swimming at Harrison Park pool on Tuesday. Bus trip to GSC property on Wednesday (ie. Hibou). |

Please note – The schedule and activities are subject to change.

Great Outdoors Adventure Day Camp

Registration Information – Rules & Procedures



Registration

Your registration form can be faxed, mailed, or dropped off at our office. All registrations are processed on a first come, first served basis. We cannot take registrations over the phone. We require your completed registration form and payment to secure your enrolment into day camp.

Changing your Registration and Refund Request

There will be a service of charge of \$20.00 to your refund or to change the child's registration. Less than 2 weeks prior to camp, refunds will not be given with the exception of medical reasons and a doctor's note. Refunds will not be granted if a child is asked to leave our Day Camp due to misbehavior.

Payment

We accept **debit, cheque (preferred methods of payment), Visa or Mastercard** – full payment for all registered days is required – no post-dated payment plan will be offered. Cheques must be dated two weeks prior to camp start date. Cheques are to be made payable to Grey Sauble Conservation and will be cashed two weeks prior to camp start date. Official Tax Receipts will be issued in January.

Freedom of Information

Under the Freedom of Information Act, we cannot advise you of children's names that are registered in our camp.

Day Camp Hours of Operation

Our Day Camp is open for registration for 8 weeks beginning the first week in July through to mid/end of August. Day Camp hours are from 8:30 am to 4:30 pm Monday to Friday. We do our best to accommodate your working schedule by offering a \$5.00 early drop off fee (8:00 -8:30 am) and a \$5.00 late pickup fee (4:30 – 5:00 pm). **This SERVICE must be arranged at the time of registration or with the office prior to dropping off your child.**

Please remember that this service affects our staff schedule.

Parents will be billed for late pickup after 5:00 pm at a rate of one dollar per minute.

Absences

If your child is sick or you are running late, please let us know (519-376-3076) and leave us a message. **Our camp activities start at 9:00 am and if your child is not here we will proceed with our day camp program.**

Campers Behaviour

Children attending our day camp are expected to interact appropriately with fellow campers and respect camp employees. Our staff work hard to provide a positive camp experience for everyone. However, if a situation arises where a camper is threatening the safety of another person, we will work with that camper to correct this behavior and staff will discuss this action with the parents. Should disruptive behavior continue, the camper may be dismissed from the Day Camp.

We expect our Campers to: 1. Respect themselves, others, and our environment and 2. Be responsible for their actions, safety, behavior, interactions with others and treat others equally.

We reserve the right to cancel or alter The Great Outdoors Camp due to registration numbers or availability of staff.



Child(ren)'s Last Name _____

The GREAT OUTDOORS ADVENTURE DAY CAMP 2018

c/o Grey Sauble Conservation, 237897 Inglis Falls Road, R.R.#4, Owen Sound, Ontario N4K 5N6

Phone 519 376-3076 fax 519 371-0437

We are a NUT FREE CAMP

Please complete all pages of this form. This form may be used for more than one child.

REGISTRATION INFORMATION:

Day Camp hours of operation are 8:30am to 4:30pm. Place an X through the days you want to book. If you require early drop off or late pickup, please fill in the dates below.

1. **Child's First & Last Name** _____ **Date of Birth** _____ (D/M/Y) **Age** _____

| July | Mon | Tue | Wed | Thurs | Fri |
|---|---------|-----|-----|-------|-----|
| Week 1: Survivor & Magical Kingdom | No camp | 3 | 4 | 5 | 6 |
| Week 2: Curious Creepy Crawlers | 9 | 10 | 11 | 12 | 13 |
| Week 3: Fishy Friends & River Wandering | 16 | 17 | 18 | 19 | 20 |
| Week 4: River Wandering & Magical Kingdom | 23 | 24 | 25 | 26 | 27 |

| July/August | Mon | Tue | Wed | Thurs | Fri |
|--|---------|-----|-----|-------|-----|
| Week 5: Predator/Prey | 30 | 31 | 1 | 2 | 3 |
| Week 6: Canada Summer Games | No camp | 7 | 8 | 9 | 10 |
| Week 7: Fishy Friends & River Wandering | 13 | 14 | 15 | 16 | 17 |
| Week 8: River Wandering & Magical Kindom | 20 | 21 | 22 | 23 | 24 |

Early drop off (8:00-8:30am):

Late Pick up (4:30-5:00pm):

2. **Child's First & Last Name** _____ **Date of Birth** _____ (D/M/Y) **Age** _____

| July | Mon | Tue | Wed | Thurs | Fri |
|---|---------|-----|-----|-------|-----|
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Early drop off (8:00-8:30am):

Late Pick up (4:30-5:00pm):

Parent/Guardian Contact Information

| | | | |
|---|---|---|---------------------------------------|
| Guardian Name | Work Telephone Number/Cell Telephone Number | | Home Telephone Number |
| Guardian Name | Work Telephone Number/Cell Telephone Number | | Home Telephone Number |
| Address | City | Postal Code | E-mail (to send credit card receipts) |
| Please circle appropriate answer: Child resides with - both parents/father/mother/other: | | Which parent/guardian may we contact during work hours? | |

PAYMENT INFORMATION:

- Fee per Child: \$28 per day (\$140.00 per week) (8:30 am– 4:30pm) _____ Days x \$28 = _____
 - AM Early Drop off \$5.00 (8:00–8:30am) AM Early Drop off _____ Days x \$5.00 = _____
 PM Late Pickup \$5.00 (4:30-5:00pm) PM Late Pick up _____ Days x \$5.00 = _____
- Payment Options: Cash Cheque Debit Visa Mastercard Total Amount Paid: _____

EMERGENCY HEALTH INFORMATION:

Health Card Number (s): _____/_____

Child #1

Child #2

Family Doctor: _____ Phone No. _____

Please list any health concerns or problems that we should be aware of (ie. allergies, bees, asthma, other)

In case of a medical emergency, I give permission to have my child(ren) taken to the nearest hospital or medical center.

Signature of Parent or Guardian

Date

PERMISSION TO Participate in River/Water Activities or Swimming and Sunscreen

Can your child swim? – please CIRCLE ONE - YES - NO Comment _____

I, _____, (parents name) **please CIRCLE ONE** – I do give permission OR I do not give permission for my children to participate in river/water activities or public swims at the Harrison Park Pool (if offered by The Great Outdoors Program). Camp supervisors will remind children to apply sunscreen throughout the day, camp supervisors will apply your child’s SPRAY WATERPROOF sunscreen spray to their back or will advise your child to wear a T-shirt for protection.

POOL RULES - Parents please note: Our camp must follow the Public Swim rules at Harrison Park Pool: Swimmers who are 6-9 years old must pass the swim test to swim by themselves OR have a guardian who is 14 years of age or older with the following ratios of supervisors to swimmers: 1 supervisor to 4 swimmers not wearing lifejackets: 1 supervisor to 8 swimmers wearing lifejackets.*

**Swim Test- child must swim 2 widths of the shallow pool using proper front crawl or breaststroke without stopping.*

PERMISSION TO take Photographs

please CIRCLE ONE: I do give permission OR I do not give permission to take photos of my child at Day Camp. (newspaper articles or Grey Sauble Conservation Reports)

Signature of Parent/Guardian

Date

WAIVER AND ASSUMPTION OF RISK

I, _____ wish to have my child/ren _____
(Parent or Guardian’s name) (child/ren’s name/s)

Participate in the above noted program, co-hosted by The Great Outdoors Adventure Day Camp and the Grey Sauble Conservation. As part of registering my child/ren, I hereby agree as follows:

1. I acknowledge that I am aware of the risks associated with this activity and the possibilities of accident or injury which are inherent in this type of activity. I declare that my child/ren is fully covered by medical, dental and hospital insurance, including emergency treatment, and that I am fully protected in the case of an accident to my child/ren.
2. That I acknowledge that there are inherent risks associated with this activity and that my child/ren could sustain personal injury through participation in this activity and I am hereby accepting to take that risk on behalf of myself and my child/ren.
3. To save harmless and keep indemnified The Great Outdoors Adventure Day Camp and the Grey Sauble Conservation and their respective agents, officials, servants and representatives from and against all claims and actions, costs and expenses and demands, in respect of injury, loss or damage or death to myself or my child/ren’s person.
4. That I affirm that my child/ren is in good health, capable of participating in the program and activities of The Great Outdoors Adventure Day Camp, and I accept personal risk on behalf of myself and my child/ren for the consequences of such participation.
5. That I agree that my child/ren will follow the rules and guidelines of The Great Outdoors Adventure Day Camp.
6. In the event of an accident or medical problem suffered by my child/ren, I consent to The Great Outdoors Adventure Day Camp leaders to seek out the appropriate medical care.
7. That I declare this Waiver and Assumption of Risk is binding on me, my child/ren, my heirs, executors, administrators and assigns.

I have read this Waiver and Assumption of Risk and I fully understand all aspects of it.

Signature of Parent/Guardian

Date