**** **Day Camps at East Lake Park 2020**

**Registration Form**

Please complete one form for each child attending. Return this completed form, and the medical/release form to the Clarke County Conservation via email or mail. Office hours are 7:30 am – 4 pm Monday – Friday. Call (641) 342-3960 if you have any questions.

Child Name:

Address:

City:

Zip:

Parent Phone:

Grade going into:

Daytime (work) Phone:

Parent or Guardian Name:

E-Mail Address:

**Sky Camp** (*July 28th*) \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Bugs and Plants** (*July 30st*) \_\_\_\_\_\_\_\_\_\_\_

**Animal Mania** (*August 4th*) \_\_\_\_\_\_\_\_\_\_\_\_\_

**Iowa Survivor\*** (*August6th) \_\_\_\_\_\_\_\_\_\_\_\_*

**All Youth must complete and submit the Medical information/Release Form with your registration form.**

***\*Kids who participate in the Iowa Survivor Camp will have the option to attend a campout at East Lake Park on taking place in the evening of August 7thto the morning of August 8th. Must provide own tent and gear. Not mandatory to attend the Day Camp.***

Camps have enrollment limits (Maximum of 10 kids per camp do to COVID-19). Spaces will be filled on a first come/first serve basis. Email registration forms to clarkeccb@gmail.com. If there are any camps your child will be late to or will need picked up early, please include that information as well. All registrations must be submitted the week prior to the week of camp. If accommodations are needed, please notify Clarke County Conservation prior to the start of camp.

**Important information:**

* Parents or person dropping/picking up must sign in and out the child
* IF a child will be arriving late or leaving early please note on registration form
* Grade is based on grade going into
* Weather permitting, we will be outside, therefore students are required to **bring a water bottle, sun screen and appropriate clothes and foot wear**. ***A hat is recommended*.**

Drop off for all camps at 8 am and pick up is at 12 pm. If your child is not picked up within 15 minutes of pickup time, we will call the numbers provided.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cost: $10 per day camp

Paid: \_\_\_\_\_\_\_\_ Check: \_\_\_\_\_\_\_\_\_ Cash: \_\_\_\_\_\_\_\_\_