



EECO Centre

2363A Springfield Rd.
Kelowna, B.C. V1X 7N7
Telephone: (250) 469-6140
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Summer Nature Camps

Important Information

Our Summer Nature Camps are for kids who love to learn about plants and animals and can't wait to get outside and explore! They will learn about the natural environment by participating in fun hands-on activities that focus on something new each day. Children will use all of their senses to uncover the wonders of our Regional Parks while exploring ponds, bugs, birds, flowers and much more!

The camps are designed and led by RDCO Park Interpreters. In addition to having experience working with children, they are trained in first aid. Our camper to interpreter ratio of 8:1 enables interpreters to give your child individual attention.

Our camp registration is based on age to ensure that we deliver information at a developmentally appropriate level as well as, allow children to become comfortable with their peers.

We do our best to make sure your children are safe when attending our camps. If dangers arise in our parks, our interpreters are trained to make alternate arrangements while still providing a fun camp experience. In order to provide the best care possible, we require you to fill out a medical report and waiver form for each child that will be attending camp. **This report/waiver must be presented to RDCO Parks Services staff on or before the first day of camp.** Please ensure all information is detailed and accurate.

Please make sure that sunscreen and bug spray are applied BEFORE camp begins.

Your camp registration fee includes:

- A nutritious snack each day
- A t-shirt and
- A certificate upon completion

Please make sure your child brings:

- Runners or rubber soled shoes with closed toes please!
- Clothing according to the weather and a warm and/or waterproof jacket (**we will be outside every day regardless of weather!**) Also, please ensure that all clothing is ok to get messy.
- Water bottle
- Sun hat
- Necessary medications
- Backpack (with name on it) to put finished crafts and personal belongings in
- Optional: sunglasses

Please ensure that the following items are left at home:

- Toys or games, water toys
- Any electronics such as iPods/mp3's, game boys, PSP's.
- No gum or food containing peanuts or nuts of any kind; snacks will be provided.

If you have questions or concerns, please contact the EECO at 250-469-6140 or email eeco@cord.bc.ca.

Nature Camp Medical Report & Waiver

For the health, safety and comfort of the participant, this form must be completed and submitted before the first class. Please answer all questions.

Participant Information

Name: _____ Date of Birth: _____

Age: _____ Height: _____ Weight: _____

Emergency Contact Information

Name: _____ Telephone: _____

Relationship to participant: _____

Medical Information

Physician's Name: _____ Phone #: _____

Medical #: _____ Tetanus Immunization: Y N

Medication: (If the participant is under medication, please list below)

Generic Name	Dosage	Time Given

Medical Alert Information:

Condition	Y/N	Type/Frequency/Triggers	Treatment
Allergies			
Epileptic			
Diabetic			
Other			

Special Diet: Y N If yes, please specify: _____

Please list any limitations that may affect the participant's enjoyment and participation (i.e. injuries, medical/mental health issues,, etc) Please list any other information that may be of assistance to the instructor(s). _____



Nature Camp Waiver Information

Participant name: _____

Date of camp: _____

Please initial each of the following statements to indicate you have read and understand the terms of this agreement.

1. **Photographs** _____

There may be times when television, newspapers, or other photographers will want to take individual or group pictures of our camp participants taking part in activities. This would most often be done to promote the Regional Parks Services programs. Should you not want your child to be involved in such coverage, please address this in writing.

2. **Pick Ups** _____

I am aware that my child must be picked up by the end time of the program. Anytime beyond this, I will be billed overtime. I understand that if I have made no alternate arrangements and the staff is unable to contact myself or the emergency contacts within 45 minutes after the program ending, the Ministry for Children and Families will be called. I will provide a note to staff if I choose to allow my child to go home at the end of the program unassisted by the following authorized person.

Name: _____ Telephone: _____

Relationship to participant: _____

3. **Absenteeism** _____

In the event of absenteeism due to illness, vacation etc., I understand I am still responsible for full payment of the program unless otherwise arranged in advance.

4. **Medical Emergency** _____

In the case of accident or illness, I give consent for my child to be taken to the nearest emergency when I cannot be contacted. I consent for my child to receive medical treatment. I consent that in the event of a severe illness/injury or when a staff person cannot leave the facility, the means of transportation may be by ambulance at a cost to myself.

5. **Medication** _____

I authorize staff to administer to my child only medication as prescribed by my physician provided in the original container and/or over the counter medications authorized in writing by myself.

6. **Impairment** _____

Should it appear to staff that a parent/guardian is impaired when coming to pick up any child, the staff will offer to call a relative or friend to pick up both the parent/guardian and the child. If this is not acceptable, they will offer to call a cab. Should the parent/guardian insist on driving, the staff would call the RCMP giving them pertinent information such as type of car, home address, etc.

7. **Emergency Procedures** _____

In the case of fire, extended power or heat failure, extreme weather conditions or an evacuation due to the safety of the facility, the facility may have to close. The staff will care for the children until families/emergency contact(s) have picked them up.

8. **Parent/Guardian Consent** _____

I hereby acknowledge that I am aware of the risks involved in and arising out of participation in activities offered. In consideration of enrollment in aforementioned program, I waive and release any and all rights of claim for damages I may have or acquire against the Regional District of Central Okanagan and its officers, agents, servants, volunteers, employees, and any person(s) participating or assisting in the carrying out of the activities of the organization. I hereby agree to hold and save harmless the Regional District of Central Okanagan from any claims, demands, suits, actions and/or causes of actions resulting from, or resulting out of, or occasioned by my child's participation in any or all activities of the RDCO Parks Services Naturalists' Camps. I acknowledge the rules laid down by this program governing its operation and that it remains the sole responsibility of the participant to act and govern himself/herself in such a manner as to be responsible for his/her own safety.

I, _____, do hereby declare that I am the parent or legal guardian of the above participant, and hereby consent that he/she may be a participant in the above program. The participant/guardian accepts and will use the premises at their own risk and agrees that neither the Regional District nor their respective officers, employees, or assigns have made any warranties or representations respecting the suitability or condition of the Premises or Park.

Parent's/guardian's signature: _____ Print name: _____ Date: _____

Staff Signature: _____ Print name: _____ Date: _____

Notice of Collection of Personal Information

The information collected on this form is managed, used and disclosed in accordance with the *Freedom of Information and Privacy Act*. If you have any questions or concerns please call 250-763-4918 and ask for Corporate Services.