



CONSERVATION CAMP

A GROUNDBREAKING YOUTH PROGRAM FOR SCIENCE, CONSERVATION, AND WILDLIFE

POLICIES AND PROCEDURES

The Rattlesnake Conservancy is excited to welcome you to Conservation Camp – a groundbreaking youth program for science, conservation, and wildlife! We are planning to have an amazing summer, and hope that you'll find this information helpful.

Hours of Operation: Conservation camp will take place Monday through Friday from 9:00am to 3:00pm during the weeks of May 30th through August 12th.

Location: Conservation Camp is hosted by The Rattlesnake Conservancy at The Tree Hill Nature Center in Jacksonville, Florida. Located at 7152 Lonestar Road, Jacksonville, FL 32211.

Pick up and Drop off Procedures: Drop off begins each morning at the Rattlesnake Conservancy office building next to the main visitor center parking lot from **9am-9:15am**. **DO NOT DROP CHILDREN OFF PRIOR TO 8:45am UNLESS YOU HAVE MADE PRIOR ARRANGEMENTS WITH A COUNSELOR!** Parents must walk their child to camp staff located in front of the main pyramid building and sign their child into our care. Pickup is from **3:00pm to 3:15pm**. If drop off/pick up time outside of the given time frame is needed, parents must contact a counselor at least 24-48 hours prior to the day the time adjustment is needed and pay an additional \$50/day fee for childcare. Parents will be required to sign their child out of our care. *Note - any authorized individuals who are not the parent or guardian will be required to show identification before the child is released to them and MUST be listed on your child's registration form.

Medical care and first aid: In the event of an emergency, TRC staff will conduct appropriate rescue efforts in the best interest of the child including administering first aid, CPR, and calling 911. Parents will always be contacted in the event of an injury or emergency. Our staff will also document any first aid treatments in written incident reports which will be given to the parent. First aid treatment may include the use of iodine, topical cortisone or Benadryl creams, and proper wound care from certified individuals. If your child has any allergies or medical concerns, please list them on the medical release.

Dress Code: Children should wear close-toed shoes unless told otherwise by a counselor. We recommend light weight clothing and a hat that they can wear to block the sun.

Behavior Policy: Our staff are patient and trained educators and parents who understand that sometimes children have bad days just like anyone! When necessary, we will engage our campers in

positive redirection techniques and kind understanding. We ask that children respect themselves, each other, the animals, and the property.

Sunscreen / Insect Repellant: We recommend applying sunscreen and insect repellent with your child each morning prior to drop off. Children should bring sunscreen and insect repellent with them which they can reapply throughout the day under staff supervision. These items should be labeled with your child's name and should not be shared with other campers. TRC staff will have additional sunscreen and insect repellent available in the event that your child runs out of theirs, or has forgotten to bring it. Please indicate whether you authorize us to offer these to your child on the camper registration form.

Personal Belongings: Your child is responsible for all their belongings, and while they're welcome to bring items which will help them enjoy their time at camp – such as cameras, binoculars, compasses, field guides, etc – we recommend that any valuables be left at home.

Daily Supplies: Each day your child should bring a snack, lunch, insect repellent, and sunscreen.

Kayak Excursion: For 2022, we will NOT be having a kayak day like previous years. Counselors will post updates on the "Camp Information" page on our website as replacement activity details are finalized. You will receive an email with updates on this as well.

Important Contact Information: Please feel free to check in on your child throughout the day. In the event that you need to check in or speak with a staff member, we suggest first calling the Tree Hill office so that their receptionist can contact us in real time through our radios. You can reach the front desk at Tree Hill during their business hours at (904) 724-4646.

If needed, you can reach our counselors directly between the hours of 8:00am – 8:00pm Monday through Friday on their personal cell phones, or via text message or email outside of those hours.

Tiffany Bright

904-233-7787

tbright@savethebuzztails.org

Megan Grams

419-346-2941

mgrams@savethebuzztails.org



CONSERVATION CAMP

A GROUNDBREAKING YOUTH PROGRAM FOR **SCIENCE, CONSERVATION, AND WILDLIFE**

CAMPER REGISTRATION FORM

Child's Full Name: _____ Preferred Name: _____

Age: ____ Grade (as of 9/19): ____ Gender: _____ Birthdate: ____/____/____

Home Address: _____

Child's residence: Both Parents Mother Father Guardian Other _____

GUARDIAN #1 First and Last Name: _____

Phone: Cell _____ Work _____ Other _____

Place of Employment: _____ Email: _____

Home Address: _____

GUARDIAN #2 First and Last Name: _____

Phone: Cell _____ Work _____ Other _____

Place of Employment: _____ Email: _____

Home Address: _____

AUTHORIZED DROP OFF AND PICKUP LIST

A child will be released only to the custodial parents and/or legal guardians listed above, or to emergency contacts as indicated below with proper identification (valid state issued ID, driver's license, or United States passport). Children must be signed into and out of our care daily by these authorized person(s).

Full Name: _____ Relationship: _____

Full Name: _____ Relationship: _____

Full Name: _____ Relationship: _____

Is there any information (sensitivities, accommodations, preferences, special needs, concerns, etc.) that you feel we should know about your child?

We want every camper to have a wonderful and unforgettable experience! Is there anything specific that your child is hoping to achieve, experience, or gain at conservation camp that will make their summer extra special?

In the event that your child runs out of or forgets their own supplies, please indicate whether you allow TRC staff to offer the following:

Sunscreen Bug spray Snack (please indicate any allergies or food sensitivities on the first aid consent form)

Name

Date

Signature



FIRST AID AND MEDICAL EMERGENCY CARE CONSENT FORM

Child's Name: _____ Date of Birth: _____

I authorize The Rattlesnake Conservancy staff who are certified in CPR and Wilderness First Aid to give my child first aid when appropriate. I understand that every effort will be made to contact me in the event of an emergency requiring medical attention for my child, However, if I cannot be reached, I hereby authorize the program to transport my child to the nearest medical care facility and/or to _____, and to secure necessary medical treatment for my child.

Child's Physician: _____

Address: _____ Telephone: _____

Child's Allergies: _____

Chronic Health Conditions: _____

Current Medications: _____

Primary Emergency Contacts:

Parent or Guardian: _____ Phone (h) _____ Phone (w) _____
(First to be contacted in case of an emergency)

Parent or Guardian: _____ Phone (h) _____ Phone (w) _____
(Second to be contacted in case of an emergency)

Secondary Emergency Contacts:

Name: _____ Relationship to Child: _____

Address: _____ Telephone: _____

Do you give permission for child to be released to this person in an emergency? Yes ___ No ___

Name: _____ Relationship to Child: _____

Address: _____ Telephone: _____

Do you give permission for child to be released to this person in an emergency? Yes ___ No ___

Name

Date

Signature



CONSERVATION CAMP

A GROUNDBREAKING YOUTH PROGRAM FOR SCIENCE, CONSERVATION, AND WILDLIFE

CAMPER RELEASE AND WAIVER

____ 1. **ACTIVITY AND ASSOCIATED RISKS:** I, as the parent/guardian of _____ (child) have chosen to sign up my child to participate in an outdoor recreational program (hereinafter referred to as “Conservation Camp”) with The Rattlesnake Conservancy (hereinafter referred to as “TRC”). I understand that:

- It is solely my responsibility to determine whether I think that Conservation Camp exposes my family or myself to an unreasonable risk of harm or loss;
- Conservation Camp will take place outdoors and include inherently dangerous activities with unpredictable risks such as hiking and kayaking. While participating my child may be exposed to dangers and hazards, including but not limited to: falling rocks, inclement weather, hostile or aggressive wildlife, falls, fractures, concussions, equipment failures, negligence of others, drowning, and/or death;
- I agree to pay for any medical care and/or evacuation that I and/or my family incur.

____ 2. **ASSUMPTION OF RISK:** I voluntarily, knowingly, and expressly assume the above-mentioned risks as well as other risks not listed that are part of Conservation Camp, and any harm, injury or loss that may occur to me or my property as a result of my child’s participation in Conservation Camp or during any transportation to or from its related activities—including any injury or loss caused by the negligence of TRC, its employees, agents, and officers, its contractors, and other participants.

____ 3. **RELEASE OF LIABILITY:** I hereby RELEASE TRC, its owners or members, heirs, agents, attorneys, employees, assigns, other participants, sponsors, advertisers, contractors, equipment providers, landowners, municipal or governmental providers of use permits, and their respective employees, officers, and directors (the released parties) FROM ALL LIABILITIES, CAUSES OF ACTION, CLAIMS AND DEMANDS that arise in any way from any injury, death, loss or harm that occur to my child or to any other person or to any property during Conservation Camp or in any way.

____ 4. **PHOTO RELEASE:** I understand that during Conservation Camp my child may be photographed or videotaped. I consent to these photographs or videos to be shared in promotional materials, on social media, and on the TRC website unless otherwise indicated.

I HAVE FULLY INFORMED MYSELF OF THE CONTENTS OF THIS AGREEMENT BY READING IT BEFORE SIGNING IT. NO ORAL REPRESENTATIONS, STATEMENTS OR OTHER INDUCEMENTS TO SIGN THIS RELEASE HAVE BEEN MADE APART FROM WHAT IS CONTAINED IN THIS DOCUMENT. I UNDERSTAND THIS IS A CONTRACT THAT AFFECTS MY LEGAL RIGHTS AND I SIGN IT OF MY OWN FREE WILL.

Name

Date

Signature