



Summer Day Camp Registration

Camper Name: _____ Date of Birth: _____ Grade Entering: _____

Parent/Guardian Name: _____ Daytime Phone: (____) _____

Address: _____ City: _____ State: _____ Zip: _____

Email address: _____ Cell Phone: (____) _____

**We will send all camp communications to the email provided; this includes enrollment confirmations, reminders, and updates or alerts during camp*

How did you hear about Summer Day Camps at Binder Park Zoo? _____

Enrollment Policy:

- Parents/Guardians must register their own children to participate in Summer Day Camp.
- Registrations are only accepted by mail or online.
- Registrations are processed first come - first served. Upon receiving your registration for a full camp, we will contact you about a refund or available weeks.
- Registration closes 7 days before a camp starts. All fees, release forms, and immunization records are due at that time. Paperwork will not be accepted at the camp, *if all paperwork is not received on time your registration will be cancelled without refund.*
- Once the registration is processed, you will receive a confirmation email containing information about the selected camp week(s). Please give us your best email address so you don't miss important updates.

Cancellation Policy:

- Cancellations received at least 5 business days prior will be refunded or transferred ONLY if the cancelled space has been filled before the camp starts, a \$25 processing fee will apply.
- Cancellations received 0-4 business days prior will not be refunded or transferred.
- Full refunds or transfers will only be issued if the Binder Park Zoo cancels a camp due to extenuating circumstances or low enrollment.
- We reserve the right to dismiss campers at any time, without refund, from one or more scheduled camp weeks for any violation of stated policies.
- There are no refunds for incomplete registrations or missed days due to illness, appointments, family emergencies, dismissals, or other reasons.

Animal Close Encounters:

- Each week campers will experience a few close encounters with the zoo's animal ambassadors.
- All animal lessons and close encounters are offered by trained staff members. Campers will not be permitted to hold animals.

Camper Requirements

- Be predominantly independent; eat, toilet, dress, and carry their belongings.
- Be able to verbally communicate their needs or concerns to the Camp Staff.
- Participate in camp activities peacefully with other children close to their age.
- Follow directions and make good choices pertaining to their surroundings in a group setting.

Accessibility

- Summer Day Camp is inclusive and affirming; our lessons and activities are age-appropriate and designed for multiple learning styles.
- Binder Park Zoo is wheelchair accessible and provides tools and resources to those with environmental sensitivities.
- Please communicate the needs of your child to us prior to camp so we may assist you.

Special Needs and Adult Aides

- Campers of all ability levels are welcome to attend Summer Day Camp. Please let us if your child has any needs that we should be aware of. We will work with you to make reasonable accommodations.
- We are not able to provide one-on-one assistance during camps. You may be asked to secure an adult aide to assist for the week free of charge. Please include the aide's information on the enclosed medical release form.

Lunch and Snacks:

- Please send a cold lunch with your child on Monday – Thursday. We will have a pizza party on Fridays!
- We will offer two daily snacks; granola bars, cookies, s'mores, chips, goldfish, and similar items.
- You may include allergy information on the included Medical Treatment Release form.
- A list of items to send with your child to camp will be included in your confirmation email.

Topics and Dates:

Please check the box next to the camp(s) you'd like to enroll your child in

- | | |
|---|---|
| <input type="checkbox"/> Birds of a Feather \$220
June 12 – 16, 2023
Birds flock and porcupines prickle, while giraffe tower and zebras dazzle! Campers will enjoy exploring nature at the zoo in this camp centered on animal classification and grouping. | <input type="checkbox"/> Creatures of the Night \$220
July 17– 21, 2023
The night comes to life after we turn out our lights! Campers will enjoy meeting and learning about nocturnal animals as we expose the many ways they survive in the dark. |
| <input type="checkbox"/> Feeding Frenzy \$220
June 19 – 23, 2023
Are you going to eat that? Campers will enjoy learning about food chains, predator vs. prey relationships, and how the zoo uses enrichment to keep animals mentally and physically healthy. | <input type="checkbox"/> Made in Michigan \$220
July 24 – 28, 2023
Nothing compares to the simple nature of a Michigan backyard! Campers will enjoy exploring the zoo to find native species while discovering how they compare to animals around the world. |
| <input type="checkbox"/> Kidding Around \$220
June 26 – 30, 2023
Why did the goat tell a baaaaaad joke? They were just kidding around! Campers will enjoy learning about animals and their babies while watching out for silly behavior that we can all laugh about.
No Camp July 3 – 7, 2023 | <input type="checkbox"/> Prehistoric Party \$220
July 31–August 4, 2023
Let's have a prehistoric party for the planet! Campers will enjoy walking with extinct creatures in the park as they learn about understanding the past in order to better the future. |
| <input type="checkbox"/> Ready Set Recycle! \$220
July 10 – 14, 2023
Going green for the planet has never been this fun! Campers will enjoy learning ways to reduce their environmental footprints and how to repurpose everyday items into reusable treasures. | <input type="checkbox"/> Zookeeper Boot Camp \$220
August 7–11, 2023
Do you have what it takes to be a Zookeeper? Campers will enjoy learning about all the different jobs our animal care teams do to keep the zoo residents safe and cared for every day of the year. |

**Each week of camp has 48 spaces for preregistered campers entering grades 1st – 7th. We will separate campers into two age appropriate learning environments during each week of camp. All ages will report to the same location for drop off and pick up.

Camp Merchandise:

- Gear Package + T-shirt: \$35 each
**includes drawstring bag, T-shirt, collapsible water bottle, bug repellent wipes, and select animal plush*
- T-shirt only: \$15 each

Select Size: **when ordering Gear Packages or T-shirts; all items are available first come-first served*

- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Youth Small (6/8) | <input type="checkbox"/> Youth Large (14/16) | <input type="checkbox"/> Adult Medium |
| <input type="checkbox"/> Youth Medium (10/12) | <input type="checkbox"/> Adult Small | <input type="checkbox"/> Adult Large |

Total Amount Due: \$ _____

Mail, Fax, Email or Drop off registration packet with payment and immunizations records to:

Binder Park Zoo
Attn: Summer Day Camps
7400 Division Drive
Battle Creek, MI 49014

summerdaycamps@binderparkzoo.org
Phone: (269) 979-1351
Fax: (269) 979 – 8834
Make checks payable to: Binder Park Zoo

Cash Check # _____ VISA MasterCard Discover Am Ex

Acct. Number _____ Exp. Date _____

Name on Card _____ CVV # _____

Cardholder Signature _____ Date _____



Medical Treatment Release Form

This form must be completed and received along with immunization records before your child can attend camp.

Thank you for registering your child for Summer Day Camp. To ensure your child's safety, Binder Park Zoo requires parents and legal guardians of campers to grant authority to secure emergency medical treatment. Please know that Binder Park Zoo views this permission with circumspection; our procedures will always include notification and consultation with parents and guardians.

Camper Name: _____ **Birthdate:** _____

Emergency Contacts:

Mother's name: _____ Work Phone: (_____) _____

Father's name: _____ Work Phone: (_____) _____

Other Contact Name: _____

Relation: _____ Phone: (_____) _____

Doctor's name: _____ Phone: (_____) _____

Other adults approved to pick up your child: _____

If sending an adult aide to assist your child at camp: Name: _____
Phone: (_____) _____

Insurance Information:

Company Name: _____

Name of policyholder: _____

Relationship to Patient: _____

Policy #: _____ Group #: _____

Allergies:

Foods: _____

Medicines: _____

Animals: _____

Other: _____

Pre-existing Conditions:

Medical diagnoses (including psychiatric, psychological and/or mental health): _____

Medications being sent to camp (Epi-pen, OTC, etc.): _____

Instructions for use: _____

Limitation of camper activities: _____

Vaccines required for participation in Summer Day Camps:

- Hepatitis B; Measles, Mumps, Rubella (MMR); Polio; Tetanus, Diphtheria, Pertussis (Td/Tdap)
- If you do not have proof of vaccination for personal reasons, please provide a letter from the State of Michigan verifying your decision.
- We reserve the right to decline registration to unvaccinated campers in order to provide a safe environment for all.

By signing, I authorize the staff of Binder Park Zoo to secure emergency medical and surgical treatment, and to provide routine, non-surgical medical, psychological or psychiatric care, for my child while participating in youth camp. Except as set forth above under 'Allergies and Pre-Existing Conditions', I certify that my child is in good health and can participate in all normal activities of the group. I agree to be solely responsible for all expenses incurred for any medical services rendered. I consent to the HIPAA Disclosure Statement on the reverse side of this form for the participant who is also referred as Patient.

Signature of parent or legal guardian

Date

Please provide a copy of immunization records at least 7 days prior to the first day of camp.

7400 Division Drive – Battle Creek, MI 49014 – Fax: 269-979-8834 – or email to summerdaycamps@binderparkzoo.org

Authorization for Disclosure and Use of Protected Health Information

- I. I give this Authorization for Disclosure and Use of Protected Health Information pursuant to the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), 42 USC 1320d, and regulations promulgated under HIPAA. It is the Patient’s intent that this document is a valid authorization under 45 CFR Part 164, Subpart E (the “HIPAA Privacy Regulations”).
- II. The Patient authorizes any Covered Entity to disclose any and all of the Patient’s Protected Health Information to any Authorized Recipient at the request of such Authorized Recipient, for any purpose or use designated by any Authorized Recipient, including, without limitation, for any purpose. The Patient authorizes any Authorized Recipient to use and disclose any of the Patient’s Protected Health Information for any purpose.
- III. The Patient has the right to revoke this Authorization at any time. The Patient revokes this Authorization by executing a written revocation of this Authorization. If this Authorization is revoked, then any person acting in good faith reliance on this Authorization, without actual knowledge of the revocation, is held harmless.
- IV. The Patient acknowledges that information disclosed pursuant to this Authorization may be subject to re-disclosure by the recipient, and no longer be protected by the HIPAA Privacy Rule. The Patient acknowledges that, unless provided otherwise in a notice complying with the HIPAA Privacy Regulations under conditions described in the HIPAA Privacy Regulations, a Covered Entity may not condition treatment, payment, enrollment, or eligibility for benefits on whether the Patient signs this Authorization. The Patient acknowledges that the Patient has received a copy of this Authorization.
- V. This Authorization expires on the earlier of (i) the date that the Patient designates as the expiration date in any written revocation of this Authorization; and (ii) the date which is twenty years after the date of the Patient’s death.
- VI. All persons may rely on reproduced executed copies of this document. Persons to whom a copy of this document has been provided, including, without limitation, medical care providers, advisors, legal counsel, and family members, may provide a copy of this document to such other persons as any of them, in their discretion, deem appropriate, and I hold such providers harmless and indemnify them from any liability for providing copies of this document.

Binder Park Zoological Society, Inc.
Participant Release of Liability and Assumption of Risk, and Grant of Right to Use Image or Voice Recording
*** THIS IS A CONTRACT — READ BEFORE SIGNING ***

In consideration of being permitted by BINDER PARK ZOOLOGICAL SOCIETY, INC. to participate in its activities and to use its equipment and facilities, now and in the future, I hereby agree to release, indemnify and discharge BINDER PARK ZOOLOGICAL SOCIETY, INC., its agents, owners, shareholders, directors, partners, employees, volunteers, manufacturers, participants, lessors, affiliates, its subsidiaries, related and affiliated entities, successors and assigns (the "RELEASED PARTIES"), on behalf of myself, my spouse, my children, my parents, my heirs, assigns, personal representative and estate as follows:

1. I acknowledge that my participation in events and activities will involve known and unknown risks that could result in physical or emotional injury, paralysis, death, or damage to myself, to property or to third parties. I understand that such risks simply cannot be eliminated without jeopardizing the essential activities of the activity.
2. The risks include, among other things: The risk of cuts and bruises, falling, sprains, broken bones, or other serious injuries. Traveling to and from the activity raises the possibility of any manner of transportation mishaps. Risks can include tripping, falling, cuts from the use of equipment, and exposure to domesticated or wild animals, birds and reptiles which can cause serious injury or kill me and all of the activities may involve medical care, assistance and even funeral expenses.
3. I understand that BINDER PARK ZOOLOGICAL SOCIETY, INC. employees and volunteers have difficult jobs to perform. They seek safety, but they are not infallible. They might be unaware of a participant's fitness or abilities. They may give incomplete warnings or instructions, and/or the equipment being used might become loose, out of adjustment, malfunction, or otherwise fail. There is also a risk that BINDER PARK ZOOLOGICAL SOCIETY, INC. employees and volunteers may be negligent in, among other things, monitoring and supervising use of its activities and facilities and in the maintenance and repair of its equipment and facilities or in the supervision of exhibits, animals, participants, visitors and others.
4. I expressly agree and promise to accept and assume all of the risks existing in this activity, known or unknown. My participation in this activity is purely voluntary, and I elect to participate in spite of the known and unknown risks.
5. I hereby voluntarily release, forever discharge, and agree to defend, indemnify and hold harmless RELEASED PARTIES from any and all claims, demands, or causes of action, which are in any way connected with my participation in this activity or my use of BINDER PARK ZOOLOGICAL SOCIETY'S equipment or facilities, including any such claims which allege negligent acts or omissions of RELEASED PARTIES.
6. Should BINDER PARK ZOOLOGICAL SOCIETY, INC. or anyone acting on their behalf, be required to incur attorney's fees and/or costs to enforce this agreement, I agree to indemnify and hold them harmless for all such fees and costs. This means that I will pay all of those attorney's fees and costs myself.
7. I certify that I have adequate insurance to cover any injury or damage that I may cause or suffer while participating, or else I agree to bear the costs of such injury or damage myself. I further certify that I am willing to assume the risk of any medical or physical condition that I may have which may be exacerbated or caused or evidences itself during the activity or as a result of the activity.
8. I agree in the event that I file a lawsuit or administrative claim against BINDER PARK ZOOLOGICAL SOCIETY, INC., I agree to do so solely in the state of Michigan and I further agree that the substantive law of Michigan shall apply in that action without regard to the conflict of the law rules of that state. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.
9. I agree as an adult participant, or the Parent/Legal Guardian of a minor participant, in consideration of being permitted to participate at BINDER PARK ZOOLOGICAL SOCIETY, INC., hereby grant BINDER PARK ZOOLOGICAL SOCIETY, INC., and all RELEASED PARTIES, the irrevocable right and permission to photograph and/or record me or my child(ren)/ward(s) in connection with BINDER PARK ZOOLOGICAL SOCIETY, INC. activities, to use the photograph and/or recording for all purposes, including advertising and promotional purposes, in any manner in any and all media now or hereafter known, in perpetuity throughout the world, without restriction as to alteration. I waive any right to inspect or approve the use of the photograph and/or recording, and acknowledge and agree that the rights granted to this release are without compensation of any kind. All photographs and/or recordings are exclusive to BINDER PARK ZOOLOGICAL SOCIETY, INC..
10. If the participant is a minor, I agree that this Release of Liability and Assumption of Risk agreement ("RELEASE") is made on behalf of that minor participant and that all of the releases, waivers and promises herein are binding on that minor participant. I represent that I have full authority as Parent or Legal Guardian of the minor participant to bind the minor participant to this agreement.
11. If the participant is a minor, I further agree to defend, indemnify and hold harmless BINDER PARK ZOOLOGICAL SOCIETY, INC. from any and all claims or suits for personal injury, property damage or otherwise which are brought by, or on behalf of the minor, and which are in any way connected with such use or participation by the minor, including injuries or damages caused by the negligence of RELEASED PARTIES, except injuries or damages caused by the sole negligence or willful misconduct of the party seeking indemnity.
12. In consideration of not being required to sign a fresh copy of this RELEASE before each visit to the premise, I further agree that this RELEASE shall apply to all future visits by me and by the minor participant until he/she is 18 years old in full, including Paragraphs 10 and 11.

By signing this document, I acknowledge that if anyone is hurt or property damaged during my participation in this activity, I may be found by a court of law to have waived my or the minor participant's right to maintain a lawsuit against BINDER PARK ZOOLOGICAL SOCIETY, INC. or any RELEASED PARTIES on the basis of any claim from which I have released them herein. I have had sufficient opportunity to read this entire document. I have read and understood it, and I agree to be bound by its terms. Signature (Participant or Parent/Legal Guardian if under age of 18)

Signature (Participant or Parent/Legal Guardian) _____ Today's Date _____

Print Name of Participant _____ Birth Date _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone _____

Emergency Contact _____ Phone _____ Relation _____

IF THE PARTICIPANT IS A MINOR:

Print Name of Parent or Legal Guardian of Minor _____

Address _____ City _____ State _____ Zip _____