



# **PARENT INFORMATION SHEET**

### **Camp Forms:**

All forms should be completed and submitted as soon as possible and *no later than one week prior to the start of your child's camp week.* They can be handed in at the front desk of the shelter (87 Oliphant Ln. Middletown, RI), mailed to P.O Box 412, Newport, RI 02840, or faxed to 401-367-0122.

### Check-in:

Check-in will take place every day in the Education Center on the second floor at 9:00am. The shelter will be closed, but please head inside the main entrance and upstairs to the Education Center. Campers **must be signed in each day** by a parent or authorized guardian.

### **Pick-up:**

Pick-up takes place at 3:00 pm. **Only authorized individuals** listed on the pick-up authorization form can pick up campers. They **must sign campers out each day and must have photo ID to do so.** Parents who are more than 15 minutes late for pick-up will be charged by the hour for extended day care at \$15 per day.

#### **Dress:**

Campers must wear **closed toed shoes**. A Potter League baseball cap will be given to campers the first day. Campers will wear their caps when they leave the Ed Center. Caps will be taken home on the last day of camp. **All personal belongings (electronics, games, etc.) should be left at home**. We will not be spending extended periods of time outside; however, we suggest you apply sunscreen to your camper's face and arms before coming to camp.

### Food and Water Bottles:

Campers must bring their own labeled water bottle, lunch, drink, and two healthy snacks. There will be time given for a snack in the morning and afternoon. Lunch will be around noon.

### **Cancellations:**

A \$25 administrative fee is charged for all cancellations after forms are submitted. No refunds will be given if requested one week or less before the start of your child's camp week.





## Camper Sign In and Pick Up Release Form

We will not release your child to anyone other than those listed below. If at a later date you need to add a name to the pick up list, you must do so in person or in writing. **Driver's licenses will always be checked upon camper pick up.** 

My child may be released to the following people (including carpool drivers and those who would pick up in an emergency):

1. Parent/Guardian #1:		Cell Phone	Additional Phone
2. Parent/Guardian #2:			
3. Name:			
4. Name:			
5. Name:			
	Signature		License Check
Monday Sign In			
Monday Pick Up			
Tuesday Sign In			
Tuesday Pick Up			
Wednesday Sign In			
Wednesday Pick Up			
Thursday Sign In			
Thursday Pick Up			
Friday Sign In			
Friday Pick Up			





# **Health History Record**

We take every precaution to make each program as safe as possible. Should an accident happen, it is important that we have the appropriate information to help your child.

Child's Name	(Last) (First)	Birth Date	
Cell Phone	Home Phone	Work Phone	
Name of Parent/Guar	dian		
		Work Phone	
Name of Child's MD_		Phone	
		Policy/Group #	
	xam Up to date on immunizations?		
Is your child taking any	v medications? List meds and a	eason being taken:	
Will meds need to be a	dministered during camp?	If yes, when?	
List any allergies (food	l, meds, animals, other)		
situations of which we	should be aware, i.e., recent lo	al accommodations or if there are any ss of a pet, difficulty reading or writing, agement issues or attention deficit.	
Emergency Contact (	other than parents/guardians lis	ted above):	
Name	Relationship		
Cell Phone	Home Phone	Work Phone	
I know of no reason(s) Camp Happy Tails.	why my child should not partic	cipate in the Potter League for Animals'	

Signature of Parent/Guardian I	Date
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# **Physician's Statement**

(A signed and current State School/Camp Physical Form is acceptable in lieu of this form.)

I verify that (print child's name)	has had a
physical examination in the last 24 months and is up to date on immunizations.	The date of the
last exam was	

You should be aware that this child is receiving treatment for the following:

Current medications/dosage: \_\_\_\_\_

I believe he/she is capable of participating in camp activities offered by the Potter League for Animals.

(Physician's signature)

(Date)

(Phone)

Mail: Potter League for Animals P.O. Box 412 Newport, RI 02840 **Fax:** 401-367-0122



# **Release Forms**



## **Photo Release:**

I agree that the Potter League may use any photographs, videos, or other images taken at Camp for use in public relations efforts with the full understanding that no compensation or other payment of any kind will be paid to participant or to any other person for any of the agreements contained herein.

(Parent's Signature)

### Acknowledgement and Assumption of Risks and Liability Waiver:

In consideration of the services of the Potter League for Animals, its agents, owners, employees, representatives, and all other entities associated with it (hereafter collectively referred to as PLA), I agree as follows:

I, the undersigned, have enrolled my child in Camp offered by PLA. I understand that participation in PLA Camp involves activities that include interactions with animals. I understand that PLA does not know the complete history of all the animals at PLA and I further understand that the animals' behavior may be unpredictable. I release and discharge PLA from any and all responsibility for any injuries that my child may receive as a result of being at PLA, including, but not limited to, bites and scratches. On behalf of my child, I hereby release, discharge, indemnify and hold harmless PLA from any and all claims present and future and rights to compensation that may arise from or relate to (1) any act or omission of PLA parties (other than intentional misconduct) and (2) any damage, loss, illness, injury or death (including animal bites and scratches) sustained by my child during, in connection with or arising from, my child's participation in the PLA Camp. I intentionally and knowingly waive any and all such claims that I may have against such persons and I reserve only and do not waive or release claims for intentional misconduct. This release will be binding and enforceable against me, my child and our personal representatives, successors and assigns with respect to my child's participation in the PLA Camp. I am the parent or legal guardian of the participant named above. I am of legal age and am freely signing this agreement of behalf of the participant. I hereby certify that I have read, consent and agree to the foregoing waiver of liability authorization and consent and sign it voluntarily.

(Print Name)

(Date)



# **Camper Contract**



Dear Camper,

We are looking forward to seeing you at camp this summer. At our camp, you will learn a lot about animals and have fun doing it! We have lots of activities planned including meeting some of our shelter animals. It is important for you to understand and agree to the following:

#### **Animal Interactions**:

We know that you are coming to Camp Happy Talls because you love animals. You will have an opportunity to meet and touch selected animals every day at camp. However, these interactions will be for a limited time as this is only one of many camp activities.

I understand that if I want to spend a lot of time with shelter animals, I should consider becoming a junior volunteer.

(Camper's Signature)

#### Adopting a New Pet:

You are going to meet many cute, friendly animals in the shelter during camp and might meet some that you would like to adopt.

I understand that my family may have all the pets we can care for right now, and I know that the Potter League will find good homes for these animals. When my family is ready for a new pet, I know there will be other animals just as cute!

(Camper's Signature)

### Safety First:

On the first day of camp, you will learn our rules on safely interacting with animals.

I agree to follow the instructions given about meeting and touching the animals.

(Camper's Signature)

I have read and discussed this agreement with my child.

(Parent's Signature)