

Waivers

Liability

I understand that there are risks involved in participating in an activity or program and I acknowledge that my choice to register my child in the above-named activity or program brings with it the assumption by me of those risks. I also release the Mississippi Valley Conservation Authority and its staff of any claim arising from such risks. Permission is hereby granted to the MVC and its representatives to transport participant(s) to a local doctor or hospital for medical treatment, if necessary.

I also understand that staff will be dealing with a variety of children and that there may be some disciplinary action taken if staff deem it necessary. Such actions will consist of making sure the child realizes that they may be distracting other participants, sitting a child out of activities for a short period of time, and in extreme circumstances, asking the parents to remove the child from the program.

Photo

I give permission to the Mississippi Valley Conservation Authority to take pictures of my child(ren) participating in the Wildlife Watchers Day Camp, and to use these photos for information and promotional purposes.

Signature of Parent/Guardian:

Date: _____

CONFIRMATION

Once you have mailed in your registration form, a confirmation receipt and a parent/camper information letter outlining what to bring, what to wear, and other information will be mailed out or emailed to you.

LUNCH & SNACKS

Please pack your child a lunch and morning and afternoon snacks. Lunches can be kept refrigerated

RAINY DAYS

Camp will run rain or shine. Please be prepared with rubber boots and raincoats. The Education Centre and the Gatehouse are also available to accommodate weather conditions.

SPECIAL NEEDS

Children with special needs are welcome to participate. We ask that they be accompanied by a facilitator in order to accommodate their needs during the day.

STAFF

Campers will be well taken care of during their stay. Well trained and experienced outdoor educators run the summer camps. "Friends of the Mill of Kintail" and other student volunteers will be also be assisting with the camps.

Wildlife Watchers Summer Day Camp

The Mill of Kintail Conservation Area



A fun filled summer camp experience for children ages 6 to 11. Your children will enjoy exploring the Indian River and the surrounding fields and forests.

Learn about Wildlife

Play Outdoor Games

Experience Nature

Make Crafts

Catch Bugs

And More...

All Part of a great Summer
of fun and friendship!



Nature Up Close

July 9 to 13 (Week A)

August 7 to 10 (\$120) (Week D)

Campers will use their senses to experience nature in new ways.

Through a variety of activities the smells, textures, colours and sounds of the forest will be revealed! The week will involve exploring how animals use their senses to survive and doing art in McKenzie's Studio.

Amazing Animals

July 16 to 20 (Week B) (Full)

August 13 to 17 (Week E)

Campers will learn about the different groups of local animals and what makes them special. Mammals, birds, insects, reptiles, and amphibians will be explored, examined and observed.

Who Lives Here?

July 23 to 27 (Week C) (Full)

August 20 to 24 (Week F)

Many animals call the Mill of Kintail Conservation Area their home. Campers will explore the different types of animal homes, create some animal homes and learn about how animals survive in the wild. A day to discover R. Tait McKenzie is included!

Hours

Monday to Friday 9:00 am to 3:30 pm

Fees

- o \$350 for 3 weeks and you save \$100!
(A, B, and C or D, E, and F)
OR
- o \$150 per child for each week long session (except for the 4 day week)
- o \$20 less for each additional sibling

- o \$10 a day per child for **Before and After Care** (7am to 5pm)

Ages

Children 6 to 11 years old are welcome

Contact Us!

Feel free to call Natalie at the Mill of Kintail if you have any questions:

Phone: (613) 256-3610

E-mail: nmills@mvc.on.ca

To Register:

Complete Registration Form and mail to:

Mississippi Valley Conservation
4175 Hwy 511, R.R. 2
Lanark, Ontario K0G 1K0

Please include a cheque payable to:
Mississippi Valley Conservation

Camp Registration 2007

Weeks: JULY A B C

AUGUST D E F

Name(s): _____ Age: _____

_____ Age: _____

Mailing Address: _____

Email Address: _____

Parent/Guardian: _____

Home Phone: _____

Work Phone: _____

Other Parent/Guardian: _____

Home Phone: _____

Work Phone: _____

Health Card Number: _____

Alternate Contact: _____

Phone: _____

Please indicate if there are any Medical Conditions or Allergies the staff should know about:
