

Dubuque Regional Humane Society

2022 Summer Camp Enrollment Form

For enrollment, visit DBQhumane.org OR complete this form and return with payment to:
 Dubuque Regional Humane Society, Attn: 2022 Summer Camp, 4242 Chavenelle Rd, Dubuque, IA 52002

Confirmation emails with important camp information will be sent following registration. Please contact accounting@dbqhumane.org with any further questions or concerns.

Entering Grades:			
<u>1st-3rd</u>	<u>4th-6th</u>	<u>6th-8th</u>	<u>6th-12th</u>
<p><u>Day Camps</u></p> <p>Cats:</p> <p>June 28 1:00 pm-4:00 pm</p>	<p><u>Day Camps</u></p> <p>Cats:</p> <p>June 30 1:00 pm-4:00pm</p>	<p><u>Day Camps</u></p> <p>Cats:</p> <p>June 29 1:00 pm-4:00pm</p>	<p><u>Vet Shadow Day</u></p> <p>*Not for the faint of heart, this session dives deep into the career of veterinary medicine. Campers learn about animal ailments, assist during exams and laboratory diagnostics and will observe surgeries performed by our on-staff veterinarian.</p> <p>June 14 9:00 am-1:00 pm July 5 9:00 am-1:00 pm August 9 9:00 am-1:00 pm</p>
<p>Dogs:</p> <p>June 22 1:00 pm-4:00 pm</p>	<p>Dogs:</p> <p>June 21 1:00 pm-4:00 pm</p>	<p>Dogs:</p> <p>June 23 1:00 pm-4:00 pm</p>	
<p>Critters:</p> <p>July 6 1:00 pm-4:00 pm</p>	<p>Critters:</p> <p>July 7 1:00 pm-4:00 pm</p>	<p>Critters:</p> <p>July 8 1:00 pm- 4:00 pm</p>	<p>\$ 50 Day Camp \$ 80 Vet Shadow \$ 200 Week Camp</p>
<p><u>Week Camp</u></p> <p>July 11-15 9:00 am-12:00 pm</p> <p>August 1-5 9:00 am-12:00 pm</p>	<p><u>Week Camp</u></p> <p>July 11-15 1:00 pm-4:00 pm</p> <p>August 1-5 1:00-4:00 pm</p>		
<p>*PLEASE CIRCLE ALL YOU WISH TO REGISTER FOR</p> <p>The Kick-off Day Camp provides campers with an exclusive tour of Kinsey's Campus, discovering how the DRHS tackles daily animal and veterinary care! At only \$50, Campers with interests in all animals are encouraged to register for multiple day camps as the activities, campers, and animals are always changing!</p>			

Camper Information

Name (one camper per form): _____ Age: _____ Grade (Fall 2022): _____

Please list all allergies or dietary restrictions / requirements.

List any medical or behavioral concerns that require special attention or considerations; please provide any information which may be helpful to camp staff.

Parent/Guardian Information

Name(s): _____ Email: _____

Primary Phone: _____ Additional Phone: _____ City: _____

Home Address: _____ Zip: _____ State: _____

Emergency Contact

(In the event that a parent/guardian cannot be reached)

Name: _____ Primary Phone: _____ Additional Phone: _____

Payment Information

Payment Method (Please check one):

Enclosed is my check: (Check Number) _____

Please charge my credit card:

Visa

MasterCard

Discover

American Express

Card Number: _____ Expiration Date: _____ Security Code: _____

Name on card: _____ Signature: _____

Scholarship Information

Scholarships are awarded to campers who, without this option, would be unable to attend camp. All applications considered; campers are chosen based on financial need, number of requested scholarships, and available funding.

Camp Date _____ **Partial/Full** **Camp Date** _____ **Partial/Full** **Camp Date** _____ **Partial/Full**

PARENT: Please briefly explain why a scholarship should be awarded to your camper.

CAMPER: Please write a paragraph explaining what attending this camp would mean to you?

Dubuque Regional Humane Society 2022 LIABILITY RELEASE

As a precedent to my child participating in the Kids & Critters Camp and in partial consideration for the Dubuque Regional Humane Society agreeing to allow to have my child participate in the Kids & Critters Camp, I knowingly and voluntarily assume any and all risks inherent in my child's participation. I waive any right to claim against the Dubuque Regional Humane Society, its directors, officers, officials, volunteers, agents or employees for loss of life, bodily injury, property damage, and/or loss or personal loss that may be sustained as a result of my child's participation in the Kids & Critters Camp. In addition, I am waiving my right to claim against the Dubuque Regional Humane Society, its directors, officers, officials, volunteers, agents or employees and I am absolving them from any and all liability which may be based on the acts, omissions, or negligence of the Dubuque Regional Humane Society, its directors, officers, officials, volunteers, agents or employees. Further, I agree to pay, defend, indemnify, and hold the Dubuque Regional Humane Society harmless from any and all claims that may be brought against the Dubuque Regional Humane Society as a results of any injuries sustained by my child during the course of my child's participation in the Kids & Critters Camp.

During these activities, photographs and/or videos may be taken to be used in marketing materials, advancing the mission of the Dubuque Regional Humane Society; I hereby authorize the DRHS to use any photographs or video of my child in its possession for public relation purposes.

Parent/Guardian Signature: _____ Date: _____