



REGISTRATION FORM

OR REGISTER ONLINE AT BREVARDZOO.ORG

Print form and mail to: Education Department, Brevard Zoo, 8225 North Wickham Road, Melbourne, FL 32940
 Registration is complete when both a signed registration form and payment have been received. Once enrolled, a confirmation will be sent. (Receipt of completed forms & payment does not guarantee enrollment. Enrollment based upon remaining camp space.)
 Sorry, no phone registrations accepted. Questions? Call: 321.254.9453 x219.

Camper's Name _____ Nickname _____
 Male or Female _____ Date of Birth _____ Age _____ 2016/17 Grade _____ 2017/18 Grade _____
 Street Address _____ City _____ State _____ Zip _____

In the event of an emergency, a parent/guardian will be contacted first. Please list a second emergency contact person in the event the parent/guardian cannot be reached. These individuals will be included on your child's pick up list.

Parent/Guardian Name _____ Email _____
 Phone # _____ Cell # _____
 Second Emergency Contact Name _____ Cell # _____ Alternative # _____

Please list additional authorized persons to pick up your child. These will be the **ONLY** people permitted to pick up your child:

Name _____ Name _____ Name _____

ARE YOU A BREVARD ZOO MEMBER? Membership ID# _____ (Required to receive member price)

WANT TO BECOME A MEMBER? Call 321.254.9453 x231 or email MembershipSupport@BrevardZoo.org

CAMP TIMES & PRICES

• Half-Day Camp: AM session (8 AM to noon) or PM session (noon to 4 PM)	Members \$130	Non-Members \$150
• Full-Day Camp: (8 AM to 4 PM)	Members \$260	Non-Members \$300
• 2-Day Camp: (8 AM to noon) Family	Members \$50	Non-Members \$60
• 4-Day Camp: (8 AM to noon) Kindergarten	Members \$130	Non-Members \$150
• 4-Day Camp: (8 AM to 4 PM) 1 st to 6 th Grade	Members \$210	Non-Members \$240
• Earth Explorers: 5-Day Camp (8 AM to 4 PM)	Members \$310	Non-Members \$350

WHICH CAMPS ARE YOU REGISTERING FOR?

Camp Name ANIMAL ADVENTURES • JULY 10-14 Circle one: AM PM Both \$ _____
 Camp Name _____ Date _____ \$ _____
 Camp Name _____ Date _____ \$ _____
 Camp Name _____ Date _____ \$ _____
 Camp Name _____ Date _____ \$ _____
 Camp Name _____ Date _____ \$ _____
 Camp Name _____ Date _____ \$ _____

TOTAL \$ _____

SPECIAL DISCOUNTS WHEN YOU REGISTER BETWEEN FEB 8 - APRIL 8, 2017

MEMBERS*	NON-MEMBERS	DISCOUNTS
\$30 OFF PER FULL-DAY CAMPS	\$10 OFF PER FULL-DAY CAMPS	FULL-DAY CAMP Qty. ____ x \$ ____ = \$ _____
\$15 OFF PER HALF-DAY CAMPS	\$5 OFF PER HALF-DAY CAMPS	HALF-DAY CAMP Qty. ____ x \$ ____ = \$ _____

*not applicable for Art, Family and Conservation in Action camps

GRAND TOTAL \$ _____

LUNCH OPTIONS Water is provided during all camps; please bring a refillable water bottle. Children attending 1ST to 6TH grade Full-Day camps need to bring own lunch except Friday (pizza will be provided). Earth Explorers need to bring own lunch except on Monday (pizza will be provided).

T-SHIRTS: All campers receive a t-shirt. Please circle t-shirt size below:
 CHILD SMALL (6-8) CHILD MEDIUM (10-12) CHILD LARGE (14-16) ADULT SMALL ADULT MEDIUM ADULT LARGE

PAYMENT INFORMATION: Check (Enclosed) # _____ / Credit Cards accepted online or in person only 9 AM to 3 PM Mon.-Fri.



REGISTRATION WAIVER FORM

Camper's Name _____

Please initial number one or two:

1) _____ I authorize and grant permission to a representative of Brevard Zoo to treat minor injuries including scrapes, small cuts, splinters, and insect bites.

Check those allowed: _____ All Listed

- _____ Isopropyl alcohol _____ Hydrogen peroxide _____ Antibiotic ointment
- _____ Insect sting relief _____ Aloe vera _____ Band-aids/bandages

2) _____ I DO NOT authorize and grant permission to a representative of Brevard Zoo to treat minor injuries including scrapes, small cuts, splinters, and insect bites.

Please list any medical/physical limitations (allergies, etc.) or other concerns pertaining to your child:

PHOTOGRAPH AND VIDEO RELEASE WAIVER

Please initial one:

_____ I grant permission to Brevard Zoo to use, reuse, and/or publish, and republish photographic pictures and or video reproductions of me and my family, or in which we may be distorted in character, or form, in conjunction with our own or fictitious names, on reproductions thereof in color, or black and white made through any media by Brevard Zoo or Treetop Trek Aerial Adventures, for any purpose whatsoever; including the use of any printed materials, advertising and online to include social media (Facebook, Twitter, Pinterest, etc.).

_____ I DO NOT grant permission for photos/video to be taken of me and my family.

ACCIDENT RELEASE AND FINANCIAL RESPONSIBILITY WAIVER

Please Read All Three Paragraphs and Sign Below

Registration forms cannot be accepted without a signature.

I understand the educational programs provided by the East Coast Zoological Society of Florida, Inc. d.b.a. Brevard Zoo, and understand the inherent dangers involved with my child's participation in these programs, including the risk of personal injury and/or damage to my child and/or my property while participating in these programs. I further understand and acknowledge that participants in such programs are not covered under insurance of Brevard Zoo and that Brevard Zoo would not allow my child's participation in these programs absent my signing this release. I authorize and grant permission to representatives of Brevard Zoo to obtain emergency medical care from any licensed physician or hospital and/or medical clinic should my child become ill or injured while participating in educational activities away from home or at other times when neither parent nor guardian is available to grant authorization for emergency treatment. I therefore freely and voluntarily execute this release and with such knowledge, assume the risk of personal injury and/or property loss arising from or in any way connected with my child's participation in any educational programs offered by Brevard Zoo.

I hereby release and forever discharge Brevard Zoo and any and all agents of Brevard Zoo from any liability, claim, cause of action, demand or damages from injury or damages of any kind to my child or my property as a result of my child's participation in the educational programs of Brevard Zoo. I further waive, release, absolve and agree to indemnify and hold Brevard Zoo harmless as a result of my child's participation in any educational program sponsored by Brevard Zoo. I understand that should my child become a disruptive force during the educational program that the instructor may choose to release him/her from the program.

Refunds and/or transfers will not be issued two (2) weeks before camp. A \$25 administration fee will be assessed on all cancellations and transfers.

Parent/ Guardian Signature _____ Date _____