

Medical Release Form

Authorization for Medical Treatment Please Print or Type

Emergency Contact: _____ Emergency Contact # _____

Relationship to Child _____

Doctor's Name: _____ Doctor's Phone # _____

Does your child have allergies including bee stings: _____

If my child should become ill or injured during the session,
I understand and agree that the staff at the James A. McFaul
Environmental Center will:

1. Contact me immediately, or
2. Contact the person I have designated, if I cannot be reached.
3. If the designated person can not be reached, the staff is authorized to contact my child's physician and arrange for immediate emergency treatment at the Valley Hospital Emergency Room. Transportation will be provided by police or Rescue Squad personnel.

Parents Signature: _____ Date: _____

**Please make sure anyone picking up your child
knows their code word or your child will not be
released to them..**

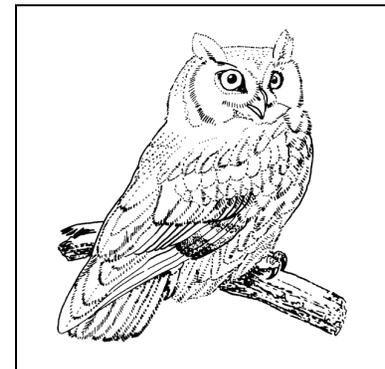
Thank you for your cooperation.

BERGEN NEW JERSEY *County*

*Bergen County Executive
James J. Tedesco III
and the
Board of Chosen Freeholders
Present*

SUMMER WORKSHOPS 2020

*at the
James A. McFaul
Environmental Center
150 Crescent Avenue
Wyckoff, NJ 07481
(201)891-5571*



SUMMER WORKSHOPS

Children taking part in our Summer Workshops will participate in fun filled classes that will concentrate on our environment. Topics will focus on our native flora, fauna and environment. There will be fun, interactive activities that will help show how the plants, animals and the atmosphere interact. They will also go on a tour of the facility, play games, meet live animals and do some fun crafts!

All Summer Workshops are divided into age groups. The groups are Kindergarten, 1st and 2nd Grade, 3rd and 4th Grade and 5th and 6th Grade. Your child **MUST** be **ENTERING INTO** the grade to participate in that group, i.e. if your child finished 2nd grade then he/she would enroll in the 3rd and 4th Grade group.

All Programs will be held on Tuesday, Wednesday and Thursday

Sign-ups will begin
April 7, 2020 @ 8:30 AM

SUMMER WORKSHOP SESSIONS

GRADE	DATES	TIME
Kindergarten	July 7, 8, 9	9:00 am to 11:00 am
Kindergarten	July 7, 8, 9	1:00 pm to 3:00 pm
1st & 2nd	July 14, 15, 16	9:00 am to 11:30 am
1st & 2nd	July 14, 15, 16	1:00 pm—3:30 pm
3rd & 4th	July 21, 22, 23	9:00 am—11:30 am
5th & 6th	July 21, 22, 23	1:00 pm to 3:30 pm

Groups are limited to 16 per session and the cost is \$30.00 per child

NO REFUNDS **Reservations**

All reservations are to be done in person only and payment is due at the time of sign up. You must fill out a reservation form, a medical release form and a code word sheet for each child. You can only sign up your own children. Please do not sign up your friends children.

SUMMER WORKSHOP RESERVATION FORM

One child per form, please. Form may be photocopied for additional children

Child's Name: _____

Address: _____

Cell Phone # _____

email _____

Parent's Name: _____

Does your child have allergies? Yes _____ No _____

If, yes, to what? _____

This year's session choice:

Grade Entering: _____

Date: _____

Time: _____

*****CODE WORD: _____*****

The point of the code word system is to be able to give it to someone that you need to call to pick up your child in the event you can't.

We have implemented a "code word" system for pick-up of your child. Children will not be released unless the person knows the code word.. NO EXCEPTIONS

Wear comfortable weather appropriated clothing and sturdy footwear.
(NO FLIP-FLOPS OR SANDALS, PLEASE!)

Please fill our Medical Release Form on the back page.