

Join us for **Camp Cricket** and learn about reptiles, birds, insects, native wildlife of Georgia, gardening and more! We'll hike, fish, canoe and have loads of fun! Camp Cricket is for children who will be entering Kindergarten in the fall and will be 5 years old by September 1. Campers are accepted on a first come, first served basis as space is limited.

Each camper should come to camp each day with:

- Lunch
- Backpack
- Sunscreen
- Bug repellent
- Hat
- Sneakers
- Clothes that can get dirty
- A smiling face 😊

For more information about camp or becoming a CMNC member call **(770) 306- 0914**.
or visit our website:
cochranmillnaturecenter.org

Ages: Entering Kindergarten

Time: 9:00 AM - 1:00 PM
Week 1, June 16-20
Week 2, July 7-11

	<u>Early*</u>	<u>Late</u>
Members:	\$75	\$85
Non- members:	\$85	\$95

***Early Registration:**
Payment and Registration
received no less than 2 weeks prior
to camp session.

Cancellation / Refund Policy:
All cancellations, refunds, or changes must be requested at least 2 weeks before the first day of each session for which you have registered. No refunds will be given less than 2 weeks prior to the first day of the session.

Yearly Family Membership \$35.00

Contact CMNC for membership information or visit our website

cochranmillnaturecenter.org

Emergency Information

Emergency Contact: (other than parent)

Phone # : _____

Doct or's Name: _____

Doct or's Phone # : _____

Allergies or Medical needs: _____

Special needs or parent comments: _____

Authorization:

As the parent/guardian of the camper, I authorize _____

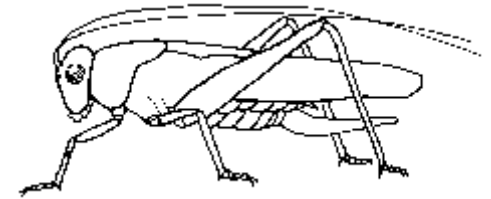
(child's name)

to attend and participate in all prescribed CMNC camp activities. I give permission to any designated camp staff to administer first aid, and, in the event of an emergency, to secure a physician for any medical treatment needed for my child. I understand that a conscientious effort will be made to locate me or my spouse before any action is taken. I understand and accept that this expense will be my responsibility. I give my permission for my child to participate in supervised hikes away from the camp site and for photos to be used on the website or other materials.

Signature of parent/guardian Date

Registration

Kinder gart en Day Camp



Summer 2008



Child's Name _____ Age _____ Grade(Fall 08) _____

Address _____

City _____ State _____ Zip _____

Parent's Name _____

Email* _____

Day Phone: _____

Evening Phone: _____

*Please include your email address to receive reminders and additional camp information.

Sessions: (please check)

_____ Week 1, June 16-20

_____ Week 2, July 7-11

SUB TOTAL _____

AM care _____ 8:00-8:45 M T W TH F
\$5 per day

TOTAL _____

Make check payable to CMNC and mail
to:

**Cochran Mill Nature Center
Nature Day Camp
6300 Cochran Mill Road
Palmetto, GA 30268**

Camp Cricket