



**Nature Camp:                   Monday-Friday  
  9:00 am – 1:30 pm**

Nature camp provides children with up close, hands on nature education in the beautiful environment of the Cibolo Nature Center. Campers will explore the whole park while they participate in a nature education curriculum designed by certified science teachers. Campers will leave only their footprints on the ground and their smiles in the hearts of their counselors. They will take with them summer camp memories that will last forever.

**Art Camp:                       Monday-Friday  
  1:30 - 4:30 pm**

Art Camp represents one of the best investments you can make in your child’s summer! Campers will spend time outside learning to see the beauty of nature and develop artworks based on their discoveries. Each session will provide a comfortable, creative and fun environment for students to develop new techniques and skills while learning to express themselves through art. Class size is limited to 12 for individual attention. On Fridays, family and friends are invited to view an exhibition of the artworks that were created throughout the week.

**Registration**

Please complete and sign the 4-page Camper Registration form (attached).

Complete one registration form per child.

**Payment**

Full payment is due upon registration. Please return payment with completed Camp Payment Information form (attached).

Fees are **nonrefundable** unless camp session is full and your child’s space can be filled; or if medical illness, with doctor confirmation, prevents camper from attending.

Return registration and payment to:

Cibolo Nature Center  
140 City Park Rd.  
Boerne, TX 78006  
830.249.4616

**Confirmation**

Confirmation will be emailed or mailed to parent/guardian along with details about attending camp.



## Camper Registration

Camper Name: \_\_\_\_\_

Camper Girl \_\_\_\_\_ Camper Boy \_\_\_\_\_

Age of camper as of June 1: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

*\*Camper needs to have completed full day kindergarten or be 6 years old.*

School: \_\_\_\_\_

Name of Parents/Guardian: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell or Pager: \_\_\_\_\_

Email address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone number(s): \_\_\_\_\_

Name of another camper your child would like to be grouped with (*we will attempt to do so, but cannot guarantee*):

\_\_\_\_\_

**Please mark an "X" beside each session your child will attend.**

Camp Session Dates	Nature Camp	Art Camp
Week 1: June 7-11		
Week 2: June 14-18		
Week 3: June 21-25		
Week 4: June 28-July 2		
Week 5: July 12-16		
Week 6: July 19-23		
Week 7: July 26-30		



## Medical & Health Information

\_\_\_\_\_ (**Camper Name**) has been examined by a licensed physician within the past year or has been examined in a clinic or is enrolled in an on-going health program. My child is physically able to take part in the day camp programs provided by the Cibolo Nature Center.

I understand that in the event of a severe emergency, 911 will be called to provide medical care and transport to an emergency medical facility. The Cibolo Nature Center, its staff and volunteers, are not authorized to transport victims of emergency or illness to any medical facility while attending any day camp programs.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

### Allergies

No known allergies     Food     Outdoor Environment     Other

Describe allergy and reaction:

\_\_\_\_\_  
\_\_\_\_\_

### Restrictions or adaptation

Without restrictions     With the following restrictions or adaptation

\_\_\_\_\_

### Medications

This camper does not take any medication

This camper takes the following medications

Name of Medication(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Include with medications the prescription and directions to administer.

How often to administer? (circle one)    As needed                      As prescribed

I hereby authorize the staff of the Cibolo Nature Center summer camp programs to administer the above medications to my child as instructed on the prescription label.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**



Tell us about your child! Information will be used to help your camper have a great camp experience. All information will remain confidential. Are there any special considerations necessary to help your camper have a safe and successful experience at camp (health/emotions/behaviors)?

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Camper's T-shirt size: \_\_\_\_\_ child small    \_\_\_\_\_ child med    \_\_\_\_\_ child large  
                                 \_\_\_\_\_ adult small    \_\_\_\_\_ adult medium    \_\_\_\_\_ adult large

How did you hear about CNC Camp? (circle one)

Print Advertising    Word of Mouth    Website    Other: \_\_\_\_\_



**Pick-Up Authorization Release**

I hereby authorize the following person(s) to pick up \_\_\_\_\_ (camper name).  
Camper will only be released to person(s) listed below and emergency contact listed on page 1.  
Please bring photo identification when picking up campers.

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

**Liability Release**

I release the City of Boerne, its agents and employees, and the Friends of the Cibolo Wilderness volunteers, staff, and agents from all liability for personal injury, death, or any other loss, or damage incurred by myself or \_\_\_\_\_ (camper name) during, or as a result of participation in the Cibolo Nature Center's summer day camp programs.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

**Photo Release**

I hereby consent to and authorize Cibolo Nature Center to use and reproduce photographs or film footage taken of \_\_\_\_\_ (camper name) for editorial, trade or advertising purposes.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**

## Camp Payment Information

The Cibolo Nature Center accepts cash, checks, money orders, and Visa or MasterCard.

Nature Camp	Before June 1	After June 1
One Session	\$125	\$150
Two Sessions	\$240	\$300
Three Sessions	\$345	\$450
Four Sessions	\$440	\$600
Five Sessions	\$525	\$750
Six Sessions	\$600	\$900
Seven Sessions	\$665	\$1050

Art Camp	Before June 1	After June 1
One Session	\$150	\$175
Two Sessions	\$290	\$350
Three Sessions	\$420	\$525
Four Sessions	\$540	\$700
Five Sessions	\$650	\$875
Six Sessions	\$750	\$1050
Seven Sessions	\$840	\$1225

Nature Camp	\$
Optional: Group Photo - \$10.00	\$
Art Camp	\$
Optional: Group Photo - \$10.00	\$
Total Amount Due	\$

### Method of Payment

Cash \_\_\_\_\_ Money Order \_\_\_\_\_ Check \_\_\_\_\_ Visa \_\_\_\_\_ MasterCard \_\_\_\_\_

### Credit Card Information:

Card number \_\_\_\_\_ Expiration date: \_\_\_\_\_

Security Code: \_\_\_\_\_ (3 digit code on the back of card)

Cardholder's name \_\_\_\_\_ Cardholder's Zip Code: \_\_\_\_\_

Cardholder's signature \_\_\_\_\_