



We have planned an exciting camp that will keep young children active and captivate their minds during their spring vacation. At our Environmental Center, the classrooms extend outside of the building – onto our trails, woods, and river – so we can provide exciting, hands-on activities for children to learn about nature and the environment. I invite children to enroll in our camp for a spring adventure.

Joseph N. DiVincenzo, Jr.



**Joseph N. DiVincenzo, Jr., Essex County Executive  
And the Board of Chosen Freeholders**

**Invite Children in 1<sup>st</sup> to 5<sup>th</sup> Grades to Participate in**

# **Nature Explorers Spring Camp 2020**



**Dates:** Monday, April 6; Tuesday, April 7 & Wednesday, April 8, 2020  
Or  
Tuesday, April 14; Wednesday, April 15 & Thursday, April 16, 2020

**Time:** 12:30pm to 4:30pm

**Location:** Essex County Environmental Center  
621-B Eagle Rock Avenue, Roseland

**Fees:** \$180 per child for all 3 days OR \$70 per child/per day

*Includes materials and take-home projects.*

Campers are immersed in nature using stories, hikes, crafts, exploration and hands-on discovery.

**SPACE IS LIMITED; ADVANCE REGISTRATION IS REQUIRED**

Minimum number of participants required.

*For information, please call the Essex County Environmental Center at 973-228-8776.*



COUNTY OF ESSEX  
Department Of Parks, Recreation and Cultural Affairs  
ESSEX COUNTY ENVIRONMENTAL CENTER  
621-B EAGLE ROCK AVENUE, ROSELAND, NEW JERSEY 07068  
Phone: 973.228.8776 Fax: 973.228.3793  
[www.essexcountynj.org](http://www.essexcountynj.org)



**~PUTTING ESSEX COUNTY FIRST~**

## Camp Details

**Fees:** Cost is \$180 per child for all 3 days OR \$70 per child per day. Fee includes all materials.

**Dates:** *Register by April 2<sup>nd</sup>* for camp on Monday, April 6; Tuesday, April 7; Wednesday, April 8, 2020.  
*Register by April 9<sup>th</sup>* for camp on Tuesday, April 14; Wednesday, April 15; Thursday, April 16, 2020.

Pre-registration and advance payment are required; see above registration deadlines. Please make checks payable to "Essex County Parks." Please note that there are no refunds or credits for missed or cancelled classes. Minimum number of participants needed. **Max: 15 children per session.**

**Length and Setting:** Camp begins promptly at 12:30pm and ends at 4:30pm. Activities are held inside and outside the Essex County Environmental Center. Weather permitting, all children are expected to explore the outdoors. Please come dressed for the weather, expect wet/muddy conditions.

Campers are required to be signed in and out at the ECEC front desk each camp day by a parent/guardian. If you are unable to pick up your child(ren) at dismissal time, please coordinate with someone and advise the Center of the change. Please note, a late fee of \$10.00 for every 15 minutes after a quarter past camp end time will be due at pick up. Prior to camp, each child will receive information detailing how to prepare.

Due to an increase in allergy concerns, the Essex County Environmental Center is no longer providing snacks to campers. *We ask campers to bring their own nut-free snack from home.*

The Essex County Environmental Center is a facility of the Essex County Parks System and is located in Essex County West Essex Park.

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## Registration Application

**I would like to register for the following session(s):**

First through Fifth Grade Spring Camp 2020, 12:30pm to 4:30pm  
\$180 per child for all 3 days **OR** \$70 per child/per day.

**Week 1:** April 6  April 7  April 8  **OR Week 2:** April 14  April 15  April 16

**Participant's Name:** \_\_\_\_\_

**Birth Date:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Cell/Alt. Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_


**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_

**Medical Information:** Does the participant have any limitations or allergies that would limit participation in any activities at the Essex County Environmental Center? **Please Explain and list medications (if applicable)**

\_\_\_\_\_  
If your child requires medication and cannot administer it on his/her own, a parent or guardian is required to do so; however, in the case of an Epi-Pen, if absolutely necessary, the Environmental Center lead camp instructor is trained and willing to administer.

**Emergency Contacts:** Please provide a name and phone number for each person we may first contact in case of emergency.

 Contact #1: \_\_\_\_\_

 Contact #2: \_\_\_\_\_

In case of emergency, I allow the Staff of the Essex County Environmental Center to contact the above mentioned people as well as 911 or appropriate authorities (where applicable).

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Please Print Parent/Guardian Name: \_\_\_\_\_



## Environmental Center

621 B Eagle Rock Avenue  
Roseland, NJ 07068  
Phone: 973.228.8776  
Fax: 973.228.3793  
www.essexcountynj.org



## Photo Release and Consent Form

I hereby give my permission to the County of Essex and the Essex County Environmental Center, its agents or employees, and to the photographer, my free and unlimited consent and permission to use photographs of the child named below in all forms, media and manners, without restriction as to changes or alterations, for advertising, trade, promotion, exhibition, or any other lawful purposes that have been obtained from his/her participation in programs sponsored by the Essex County Environmental Center and the County of Essex.

I waive any right to inspect or approve the photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the photographs. I understand that the name and contact information of the child will be withheld from public disclosure.

**Name of Child:** \_\_\_\_\_

Name of Parent or Guardian: \_\_\_\_\_

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

\_\_\_\_\_

I hereby agree to release, defend, and hold harmless the County of Essex, the Essex County Environmental Center, its agents or employees, including any firm publishing and/or distributing the finished product in whole or in part, from and against any claims, damages or liability arising from or related to the use of the photographs or program participation.

I am signing this Release of my own free will and I have not been influenced or coerced by any representative or employee of the County of Essex or the Essex County Environmental Center:

\_\_\_\_\_  
**PARENT/GUARDIAN SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**WITNESS (Essex County Environmental Center Staff)**

\_\_\_\_\_  
**DATE**



**County of Essex Environmental Center  
WARNING, WAIVER, AND RELEASE OF LIABILITY**

**DATE:** \_\_\_\_\_

In consideration of being given permission to participate in the:

SPRING CAMP 2020 \_\_\_\_\_ (the "Event") on (date[s]) \_\_\_\_\_  
supervised by Essex County Environmental Center Staff

I hereby waive, release and discharge any and all claims for damages for death, personal injury or property damage which I may have, or which hereafter accrue to me, against the County of Essex or the Essex County Environmental Center as a result of my participation in the above listed Event. I realize that accidents and injuries can arise out of the Event, and accordingly, this release is intended to discharge the County, its trustees, officers, employees, commission members, and volunteers, and any public agencies from and against any and all liability arising out of or connected in any way with my participation in the Event. This waiver and release is binding upon my heirs and assigns.

I acknowledge that I have been fully informed of the risks and dangers involved in this activity. I acknowledge that I have read, agree, and fully understand the above Warning, Waiver, and Release of Liability. I further acknowledge and agree that the reasons for my being requested to sign this Release have been fully explained to me and I understand them. If any provision, including any exception, part, phrase, or term, or the application thereof to any person or circumstance is held invalid, the application to other persons or circumstances shall not be affected thereby and the validity of this waiver in any and all other respects shall not be affected thereby.

I am signing this instrument of my own free will and I have not been influenced or coerced by any representative or employee of the County of Essex or the Essex County Environmental Center:

\_\_\_\_\_  
**CHILD NAME** **DATE**

If signatory is less than 18 years of age, this must also be signed by a parent or guardian.

\_\_\_\_\_  
**PARENT/GUARDIAN SIGNATURE** **DATE**

\_\_\_\_\_  
**WITNESS** (Essex County Environmental Center Staff) **DATE**

Please forward signed copies of this waiver form to:

**Department of Parks, Recreation & Cultural Affairs  
Essex County Environmental Center  
621-B Eagle Rock Avenue  
Roseland, NJ 07068**

*Putting Essex County First*

ESSEX COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER