



Life's better outside.®



Youth Game Warden Day Camp Registration Form  
4017 FM 563 • Anahuac, TX, 77514 • 409-267-3337

Participant Information (please print)

Participant Full Name: \_\_\_\_\_ nickname: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

High School/Home School Attending: \_\_\_\_\_

Allergies: (food, insects, etc)  NO  YES please list: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

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

Day Time Phone: \_\_ (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

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

Day Camp Sessions

Camp is June 14<sup>th</sup> – 16<sup>th</sup> 2017 from 8:00am-4:00pm

**Application due May 15, 2017, 4:00pm**  
  
**\$100 per youth for all 3 days**  
**Includes: T-shirt, hat, water bottle, Challenge coin, drinks, lunches and completion certificate**

## Day Camp Requirements

Youth between the ages of 14 – 18

A completed application and essay received by May 15<sup>th</sup>, 2017

Transportation to training sites

## Participant Clothing Size Information

Please circle one

T-shirt Size: Adult    S    M    L    XL

Hat Size:

Size	Head Circum.
7	21 7/8
7 1/4	22 5/8
7 1/2	23 1/2
7 3/4	24 3/8

## Participant Application Deadline & Requirements

### **Final Application Deadline: May 15<sup>th</sup>, 2017**

All applications and essays will be reviewed between May 16<sup>th</sup> – 18<sup>th</sup>, 2017. A total of 15 students will be selected for the Youth Game Warden day camp. Selected participants will be notified immediately on May 19<sup>th</sup> 2017. You do not have to be present to be selected. Once selected, payment is due by May 24<sup>th</sup>, 2017, 4:00pm or your child will be disqualified and replaced by another participant.

**Register by turning in this form and an essay (NO MORE THAN 1000 words) written by the participant stating the reason why they want to be a Game Warden, and deliver the completed packet to the below listed address or fax number:**

In person:     Youth Game Warden Camp  
                    Anahuac National Wildlife Refuge (NWR) Visitor Center  
                    4017 FM 563, Anahuac, TX 77514

By mail:        Youth Game Warden Camp  
                    Anahuac NWR, PO Box 278, Anahuac, TX 77514

By Fax:         409-267-4314

**Applications available at the address listed above or online at the following website:**

<http://friendsofanahuacnwr.com/>

**Emergency Contact Information & Medical Awareness (please print)**

Your child's health is of utmost importance to us. In the case of a medical emergency, 9-1-1 will be called first and the emergency contact will be notified immediately. In the event of a minor medical incident (scrapes, cuts, etc), Anahuac NWR staff will perform minor first aid (apply bandage, first aid ointment, etc) with your approval. I (will/will not) allow Anahuac NWR staff to perform minor first aid.  
*circle one*

\_\_\_\_\_

Print name sign date

Please list any and all allergies: \_\_\_\_\_

Please list any medical conditions and/or medications that the child will be on during summer camp:

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

Please state any other medical issues or special instructions for your child:

\_\_\_\_\_

Will you allow us to apply sunscreen? \_\_\_\_\_ Will you allow us to apply insect repellent? \_\_\_\_\_

*Emergency contact #1*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_(\_\_\_\_)\_\_\_\_\_ Cell Phone(s): (\_\_\_\_)\_\_\_\_\_

Work Phone: (\_\_\_\_)\_\_\_\_\_

*Emergency contact #2*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_(\_\_\_\_)\_\_\_\_\_ Cell Phone(s): (\_\_\_\_)\_\_\_\_\_

Work Phone: (\_\_\_\_)\_\_\_\_\_

If you cannot return to pick up your child, please list those people who are authorized to pick him/her up (*they MUST present photo identification*).

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

How did you hear about our Youth Game Warden camp?

Newspaper    school    email    flyer    friend/relative    other \_\_\_\_\_

## Agreements

### Transportation

Initial \_\_\_\_\_

Transportation to camp will be provided by participant or other authorized individuals to primary training site and other training locations.

### Late Pick-up

Initial \_\_\_\_\_

Camp is from 8:00am – 4:00pm. If you arrive later than 4:00pm to pick up your child, there will be an extra \$1.00 fee for every 5 minutes past 4:00pm.

### Medical Release Information

Initial \_\_\_\_\_

In case of an emergency, I authorize Anahuac NWR staff to transport my child to closest Hospital or Bayside Clinic if I cannot be reached. I will be responsible for any charges incurred at the Hospital or Clinic. I hereby grant permission for certified medical personnel and/or physicians to treat my child. I give Anahuac NWR staff permission to sign forms and give permission for emergency medical care in my absence. I will not hold the Anahuac NWR staff or volunteers responsible in the event of injury to my child.

### Vaccinations

My child is current on all his/her state-required vaccinations.

Initial \_\_\_\_\_

### Sickness

Initial \_\_\_\_\_

I will not send my child to camp if he/she is not feeling well and/or has a fever. I will wait until my child has been free of fever for a minimum of 24 hours before allowing him or her to return to camp. In the case of sickness, a doctor's note will result in a refund of the camp days missed.

### Discipline

Initial \_\_\_\_\_

The first time a child misbehaves and/or disrupts the class, a warning will be given. The second time a child misbehaves/disrupts the class, another warning. Upon the third infraction, the child will be asked to leave the class and the parent will be called to pick up the child. Please remind your child to follow the rules and listen to directions, our goal is to learn about being a Game Warden while staying safe and having fun!

I give my child, \_\_\_\_\_, permission to participate in the Youth Game Warden day camp at Anahuac National Wildlife Refuge and the chosen training locations. My child, to the best of my knowledge, is in good physical condition and is capable of hiking, carrying 20 lbs. and engaging in minor physical activities inside and outside. I understand that hiking and other activities associated with an outdoor camp have an inherent risk factor, and that all appropriate precautions will be taken for the safety of my child. I have read all the above information and by initialing and signing this form, I understand and agree to that which is written.

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Printed name of parent/guardian

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Signed name of parent/guardian

date