



**HUNTERDON COUNTY**  
**DIVISION OF PARKS AND RECREATION**

PO Box 2900, Flemington, NJ 08822-2900  
 (Office Location: 1020 Route 31, Clinton Township, NJ)  
 Telephone (908) 782-1158 • Fax (908) 806-4057



**REGISTRATION FORM FOR SUMMER NATURE PROGRAM**

To be accompanied by a Health Form & Behavior Agreement

<http://www.co.hunterdon.nj.us/depts/parks/ProgramRegistrationForms.html>

PARTICIPANT: \_\_\_\_\_ Primary phone \_\_\_\_\_

**Please circle the group and the grade this child is entering this fall:**

Nature Bugs (Kindergarten)	Nature Discovery (1 <sup>st</sup> or 2 <sup>nd</sup> )	Pioneers (3 <sup>rd</sup> or 4 <sup>th</sup> )	Junior Explorers (5 <sup>th</sup> or 6 <sup>th</sup> )	Senior Explorers (7 <sup>th</sup> or 8 <sup>th</sup> )	Environmental Camp (9 <sup>th</sup> or 10 <sup>th</sup> )
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\*\*\* Each participant will receive a camp T-shirt to tie-dye. Please circle appropriate size.\*\*\*

**Youth:** XS S M L XL or **Adult:** S M L XL 2XL

**List the name(s) of siblings who you would like to see enrolled in the same week(s) of camp:**

\_\_\_\_\_. Separate registrations are required for each child.

**If we cannot register all your children in the same week(s) of the program should we:** (circle all that apply)

**A:** Only register them if they all can get into camp in the same week(s); **B:** Register them in separate week(s);  
**C:** Only register them if they all can get into camp sometime; **D:** Register only children there is room for;

**E: OTHER:** \_\_\_\_\_

**FEE ENCLOSED:** \$ \_\_\_\_\_ Make checks payable to the Hunterdon County Division of Parks & Recreation.

**Please list session choices in order of preference:**

Choice	Session Letter	Session Dates	Circle Location
1.			Teetertown Echo Hill
2.			Teetertown Echo Hill
3.			Teetertown Echo Hill
4.			Teetertown Echo Hill
5.			Teetertown Echo Hill

**IMPORTANT POLICIES:** \_\_\_\_\_ (Parent or Guardian, Please read and provide authorized signature, below.)

1. Cancellation requests must be in writing. In the event of cancellation after a child is enrolled in the program, **refunds will be subject to a 30% service charge. NO REFUNDS WILL BE ISSUED FOR CANCELLATIONS MADE LESS THAN ONE WEEK PRIOR TO THE START OF CAMP SESSIONS.**
2. For the safety of ALL campers, the County may restrict certain food items at camp when individuals with severe allergies or medical issues are present. **Failure to comply with this policy may result in removal from camp, without a refund.**
3. Return this form, with the Health Record Form, Behavior Agreement, and check or cash to the Hunterdon County Division of Parks & Recreation, at PO Box 2900, Flemington, NJ 08822, by deadline date.
4. Registration is determined by a random lottery drawing. Full refunds will be issued if requested sessions are full.

**5. I have read and understand these policies** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_  
 (Signature of Parent or Guardians)