



2300 BENTON CENTER ROAD • BENTON HARBOR, MI 49022 • (269) 927-4832  
DIRECTOR-NATURALIST, NATE FULLER

# PARENTAL WAIVER AND CONSENT FORM

As the parent or legal guardian of the child named below, I hereby give my full consent and approval for my child to participate as a member in the camp(s) designated below.

I understand that there are certain risks of injury inherent in the participation of this camp, as well as in traveling and other related activities incidental to my child's participation, and I am willing to assume these risks on behalf of my child. I hereby certify that my child is fully capable of participating in the designated camp(s) and that my child is healthy and has no physical or mental disabilities or conditions that would restrict full participation in these activities, except as listed below.

In addition to giving my full consent for my child's participation, I do hereby waive, release, and hold harmless Sarett Nature Center, its naturalists, sponsors, supervisors, and representatives for any injury that may be suffered by my child in the normal course of participation in the designated camp(s) and the activities during them.

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address/City/State: \_\_\_\_\_

List of any physical limitations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

Designated Camp(s): Check all that apply.

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Feathered Friends  | <input type="checkbox"/> Muckin' in the Marsh<br>8 & Younger<br>9 or Older | <input type="checkbox"/> Orienteering          |
| <input type="checkbox"/> Is It Fur or Hair? | <input type="checkbox"/> Beginning Geocaching                              | <input type="checkbox"/> Wild Story Adventure  |
| <input type="checkbox"/> Night Time Animals | <input type="checkbox"/> Sarett Stewards                                   | <input type="checkbox"/> Drawing 2- Wildlife   |
| <input type="checkbox"/> Slithering Snakes  | <input type="checkbox"/> Animal Appreciation 1                             | <input type="checkbox"/> Brilliant Butterflies |
| <input type="checkbox"/> Turtle Time        | <input type="checkbox"/> Advanced Geocaching                               | <input type="checkbox"/> Beach Day             |
| <input type="checkbox"/> Milkweed Village   | <input type="checkbox"/> Drawing 1-Scenery                                 | <input type="checkbox"/> Beginning Kayaking    |
| <input type="checkbox"/> Insect Discovery   | <input type="checkbox"/> Nuts for Knots                                    | <input type="checkbox"/> Kayak Pipestone Lake  |
| <input type="checkbox"/> Flower Power       | <input type="checkbox"/> Animal Appreciation 2                             | <input type="checkbox"/> Kayak Paw Paw River   |



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## MEDIA RELEASE

Youth Name: \_\_\_\_\_

I hereby consent / do NOT consent (circle one) to the participation in interviews, the use of quotes, and the taking of photographs and videos of the Youth named above by Sarett Nature Center. I also grant to Sarett Nature Center the right to edit, use, and reuse said products for non- profit purposes including use in print, on the internet, and all other forms of media. I also hereby release Sarett Nature Center and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

Signature of Parent/Guardian:

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

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

Address of Parent/Guardian:

\_\_\_\_\_



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## Parent/Guardian Acknowledgement Form for COVID-19

Please read carefully the following information and sign as to your agreement and acknowledgment.

Coronavirus disease (COVID-19) is an infectious disease, which is extremely contagious and believed to be spread very quickly by person-to-person contact, and/or by contact with contaminated surfaces and objects, and possibly in air. To prevent the spread, health agencies highly recommend social distancing.

Sarett Nature Center recognizes and identifies their summer camps as a medium risk: Small-sized camp groups and activities. Groups of campers of 10-12, will be interacting with the instructor and each other.

The nature center administration is taking the necessary precautions to prevent spreading COVID-19 by putting into action procedures, protocols, and policies and purchased required protective safety equipment for the campers and instructors. However, the nature center administration cannot guarantee that the campers will not be exposed to COVID-19. Moreover, attending our summer camps increase the risk of contracting COVID-19 for the campers. The nature center will adapt precaution measures as new information and guidelines become available.

By signing this agreement and acknowledgment form, I, as a parent/guardian of the camper, acknowledge the contagious nature of COVID-19 and voluntarily accept the risk that the camper may be exposed to or infected by COVID-19 throughout the activities, which may result in personal injury, illness, disability, or even death.

I understand that the student may be in contact with the instructors, offices, and/or the other students who are also at the risk of community exposure. I fully understand that any precaution is not 100% effective to prevent COVID-19 infection.

I understand that I am responsible for the student to be free from any kind of COVID-19 symptom before participating in any summer camps. These symptoms are as following:

- Fever of 100.4 degrees Fahrenheit or higher
- Dry cough
- Shortness of breath
- Chills
- Loss of taste or smell
- Sore throat
- Muscle aches
- Any other symptom identified by World Health Organization

I understand that I will immediately notify the nature center if I become aware of any person, whom the student or anyone in the family has had contact, demonstrate any of the symptoms mentioned above, or is advised to self-isolate, or has tested positive, or is assumed to be COVID-19 positive.

I understand that I will wait with my camper in my vehicle until 10 minutes prior to camp. Once camp instructors are available, the temperature of my camper(s) will be taken and COVID-19 questions will be asked of me. I will not leave until my camper has been accepted into the group. I also accept that masks are to be worn by myself and camper before, during, and after camp.

By signing this form, I certify that I have read and understood the risk of COVID-19 infection that the camper will be exposed to throughout the summer camps.

Parent/ Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Please print name \_\_\_\_\_