Registered Charity #179

"BZS Rangers" Camp 2023 – Application

Week 1 - March 27 to March 31st, 2023 - 5-day Camp

For Children P5 - M1

 BZS Rangers Camp is a 5-day camp – cost \$325.00. This Camp will be an out-in-nature experience with anticipated extended time outdoors and learning Survivor Skills. This Camp would benefit a child that enjoys the outdoors and nature.

Camp runs 9:00 AM -3:00 PM (Early drop-off 8:30 AM, pick-up by 3:15PM) with one Overnight Camping on Trunk Island — Sleeping in a shelter that was built or option to sleep indoors.

- This Camp is available only to active members of the Bermuda Zoological Society (BZS) or the Atlantic Conservation Partnership (ACP). Membership may be purchased at the time of application (see page 3). The parents of the child(ren) (re)applying must have a minimum of a Killifish (Family) membership. Your membership must be current (i.e., valid until December 31, 2023). If you are not a member, please complete the Membership Application form on Page 3. It would be giving you a membership until December 2023.
- Rangers Camp fee and membership fee may be included in the same payment.
- BZS reserves the right to use photos taken during the Rangers Camp in not-for-profit marketing promotions.
- For information on the Rangers Camp programming, contact Alex Amat at <u>activities@bzs.bm</u>.
 Applications (and any registration related questions) should be submitted via email to Hollyanne Shirley at <u>edadmin@bzs.bm</u> or call 293-2727 ext. 2181 no later than 12:00 Noon Tuesday, March 21st, 2023.
- APPLICATIONS WILL BE PROCESSED ON A "FIRST COME FIRST SERVED" BASIS.
- Late applications will be considered if space is available.

When sending in your application(s), please take note of the following:

- COMPLETE A SEPARATE FORM FOR EACH CHILD.
- We will be following the guidelines regarding Covid precautions recommended by the Government for spring-break camps. At this time, campers are not required to wear masks, but this may change. Parents will be notified of any new restrictions.
- We will be based on Trunk Island. We will also have sessions off site. Children will board the bus and the boat as needed with a safe distance.
- The Disclaimer must be signed by a parent or guardian, or the application will not be accepted.

APPLICATION DEADLINE: Tuesday, March 21st, 2023

Refund Policy:

No refund for cancellations received after March 22nd, 2023.

Our refund policy is in place for us to meet the budgetary requirements of staffing and running our Rangers Camp.

"BZS Rangers Camp" Camp 2023 - Application

Applications are processed on a first come first served basis.

Please complete a separate form for each child

Rangers P5 - M1 □ Overnight Sleep-in shelter □ Overnight Sleep inside □ No overnight

□ Му	BZS Membership #	is valid to December 31,	2023. 🗖 I am paying for membership with this application.
Last Na	ime (child):		First Name:
	f Birth (Day/Month/Year):		Gender: ☐ Male ☐ Female
	:		Current School Year
	· /Guardian Name(s):		Current School feat
Mailing	g address:		Post Code:
			
Home '	Геl:	Mother's Work:	Father's Work:
		Mother's Cell:	Father's Cell:
Darent	's Email (to be used for camp	correspondence):	
		correspondence).	
Child's	Email (if Applicable):		
-	us provide your child with a s . Use an extra sheet of paper		ience, please complete the following information as accurately as ired.
ls your c	hild on any medication? YES [□ NO □	
-	ease list medications with rea		
, , -			
-	ur child have any special healtease specify:	th needs? YES NO	
Does yo	ur child have any allergies? (e	.g., bee stings, food, nuts, i	medications) YES NO
If yes, pl	ease specify:		
Is your c	hild diagnosed with any beha	vioral, emotional, or learni	ng challenges? (e.g., ADD, Autism) YES □ NO □
-	ease specify:	,	
Disclaim			
> I und	lerstand that there are inherent risk vernment protocols related to reduc		Camp related to the Covid-19 Pandemic. I understand that the BZS will comply with but that these protocols do not eliminate the risk to my child and by extension my
> I und	derstand that the camp Programme i	ncludes field trips that require my	y child to be transported off the BAMZ facility. Transportation will be arranged in
			us, taxis, minibus services or private cars (buses and older cars without seat belts are
		· .	l by these means I agree that I will arrange other transportation to the field trip site or
	ange alternate care for my child for the stand that the camp Programme n	•	sed activities each day at safe swimming / wading locations. Camps for older children
	y take them snorkeling in deep water	,	see detrices each day at sure swimming / wading locations, earnys for older children
	= -		on the BZS vessel Endurance, Callista, or another appropriate vessel.
	•	, , ,	propriate videos, either as an educational activity that enhances the camp Programme
	as an alternative activity in the case of		
	· ·	-	ing to manage within the camp group, I may be called to collect him/her.
	erstand the BZS reserves the right to consent for First Aid trained staff to		n not-for-profit marketing promotions.
_	e consent for First Aid trained staff to see to sign out my child with his/her t		
_	lerstand that the Bermuda Zoologica	σ,	·

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Refund Policy:

Date: _

I understand all of the above and that the Bermuda Zoological Society & Bermuda Aquarium, Museum & Zoo will Endeavor to provide a safe environment for my child. I will not hold the Bermuda Zoological Society & the Bermuda Aquarium, Museum & Zoo liable for any loss of possessions, personal injury, or

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illness of my child because of attending Aqua Camp.

Parent / Guardian signature: _

"BZS Rangers Camp" Camp 2023 - Application

Rangers Camp Fee: \$325 per child

Your child's place will be confirmed once payment is received, and space is available (you will not be charged if there is no space).

Rangers Camp fee and membership fee may be included together.

Child's Name:				BZS Member No.:	
leans of payment:	Note: If paying with ca	ash at the Aquarium fron	nt entrance you must have the e	xact change. No Cheques please.	
Credit/Debit Card	d (Visa, Master)				
Card Information:					
Credit Card No:				piry Date: CVV:	
<u> </u>					
•	•		L. Date of transfer:		
•	our membership # and .	BZS Rangers Camp' in th Membership Fee \$	ie note.	Total Payment \$	
Camp Fee \$		Membership ree \$		Total Payment 3	
	•	embership fee must be	not have a BZS membership va included with your Rangers Ca pership Application Form		
BZS Membership	Application: This is a				
				Mr. Mrs. Ms. Other	
				Mr. Mrs. Ms. Other	
	s (condon 21)				
Children's Name:	s (under 21)		Mr		
Please complete	the information below	if it is different from you			
Please complete Mailing Address:	the information below House Name/Unit #/Po	if it is different from you O Box	ur Rangers Camp application.		
Please complete Mailing Address: Street #	the information below House Name/Unit #/Po	if it is different from you O Box	ur Rangers Camp application.		
Please complete Mailing Address: Street # Parish/Tow	the information below House Name/Unit #/Po Street Name n	if it is different from you O BoxState	ur Rangers Camp application.		
Please complete Mailing Address: Street # Parish/Tow Home Tel:	the information below House Name/Unit #/Po	if it is different from you O BoxState	ur Rangers Camp application. Postal Code		
Please complete Mailing Address: Street # Parish/Tow Home Tel: Work Tel: adult 1	the information below House Name/Unit #/Po Street Name rn	if it is different from you O Box State	ur Rangers Camp application. Postal Code Work Tel: adult 2	Country	
Please complete Mailing Address: Street # Parish/Tow Home Tel: Work Tel: adult 1 Cell: adult 1	the information below House Name/Unit #/Po Street Name rn	if it is different from you O BoxState	Postal Code Work Tel: adult 2 Cell: adult 2	Country	
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Please complete Mailing Address: Street # Parish/Tow Home Tel: Work Tel: adult 1 Cell: adult 1 Preferred Email Alternate Email Mer	the information below House Name/Unit #/Po Street Name In	if it is different from you O BoxState State Memb. Fee \$75	Postal Code Work Tel: adult 2 Cell: adult 2 The BZS membership year runs	Country Note s from January 1st to December 31st.	
Please complete Mailing Address: Street # Parish/Tow Home Tel: Work Tel: adult 1 Cell: adult 1 Preferred Email _ Alternate Email _ Mer	the information below House Name/Unit #/Po Street Name In	if it is different from you O Box State State Memb. Fee \$75 \$150	Postal Code Work Tel: adult 2 Cell: adult 2 The BZS membership year runs	Country Note s from January 1st to December 31st.	
Please complete Mailing Address: Street # Parish/Tow Home Tel: Work Tel: adult 1 Cell: adult 1 Preferred Email _ Alternate Email _ Mer	the information below House Name/Unit #/Pc Street Name In L mbership Levels Killifish Bermudiana Cahow	State Memb. Fee \$75 \$150 \$250	Postal Code Work Tel: adult 2 Cell: adult 2 The BZS membership year runs	Country Note s from January 1st to December 31st.	

APPLICATION DEADLINE: Tuesday, March 21st, 2023 Email: edadmin@bzs.bm (as an attachment)

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Educating Tomorrow's Environmentalists

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