



Nature Day Camp

313 Hudson Avenue, Tenaflly, NJ 07670 * 201-568-6093
www.tenafllynaturecenter.org

Complete both sides and return this form **before the first day of camp.**

Date: _____

Sunscreen Permission (Participant must provide their own sunscreen)

Name of camper (print full name): _____

- I give TNC's staff permission to apply sunscreen as needed.
- I do **not** give TNC's staff permission to apply sunscreen as needed.

Comments: _____

Name of Parent/Guardian: _____

Parent/Guardian's Signature: _____

Relation to subject (if subject is a minor) _____

Photo Release

I hereby grant Tenaflly Nature Center Association permission to use my child's likeness in photograph(s)/video in any and all of its publications and in any and all other media, whether now known or hereafter existing, controlled by Tenaflly Nature Center Association, in perpetuity, and for other use by the Nature Center. I will make no monetary or other claim (whether for breach of privacy or otherwise) against Tenaflly Nature Center Association for the use of the photograph(s)/video for educational or marketing purposes.

Child's Name (print full name) _____

Parent/Guardian's (print full name) _____

Parent/Guardian's Signature _____

Relation to camper _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Alternate Pickup form

Name of camper (print full name): _____

I hereby notify Tenafly Nature Center Association that on the following dates the following authorized people will be picking up my child from camp at the appropriate time.

Please print

Name: _____ Date(s): _____

Name: _____ Date(s): _____

Name: _____ Date(s): _____

Name: _____ Date(s): _____

Name: _____ Date(s): _____

Comments: _____

Name of Parent/Guardian's: _____

Parent/Guardian's Signature: _____

Carpool Information Release

I do **not** wish to receive, or be included in, the Carpooling Database that will be sent to other camp participants.

I wish to receive, and be included in, the Carpooling Database that will be sent to other camp participants.

I _____ (please print)
give permission to the staff of the Tenafly Nature Center to release my name, address and phone number to other Nature Day Camp Registrants for the purpose of Carpooling to Camp.

Signature _____

Campfire-Cookout Volunteer Request Form (1st-8th grade campers only)

On one of the days your child is here at camp we will hold a campfire cookout. If you would like to volunteer your time to help us please check the appropriate box below:

I am available to assist with the barbeque.

I would like to donate a food/beverage item for the cookout.

Thank you for your consideration we will contact you if we require your assistance