

2022 KENNEBEC EXPLORERS CAMP REGISTRATION PACKET



Dear Parents and Guardians,

We are delighted your child is participating in Maine Maritime Museum's Kennebec Explorers Day Camp! We can't wait to explore Maine's natural and maritime heritage through educational activities, games, science experiments, hikes, art projects, and more.

Enclosed in this packet you will find:

- Camp basics and staff contact information
- A *Medical/Release Form*
- A *Release/Indemnification and Acknowledgement of Risk Form*
- A *Pick-Up Permission & Photo Release Form*

Please sign and return the three forms (mail to or drop-off at the museum) as soon as possible before the start of camp. Forms arriving prior to the start of camp will ensure the greatest amount of preparation to better serve your child.

Children may not participate in camp until these completed forms are received.

Send completed forms to: *Maine Maritime Museum, Attn. SUMMER CAMP, 243 Washington Street, Bath, ME 04530*

Camp Hours / Drop-off & Pick-Up Procedure:

- ❖ **Parents / guardians must initial-in and initial-out their child each day.**
- ❖ **Camp runs from 9:00am to 4:00pm.**
 - In the morning bring your camper to the museum's front main entrance. Drop-off and pick-up in the lobby if raining.
- ❖ **Early drop off at 8:00am and late pick-up at 5:30pm can be arranged for an additional \$25.**
 - If you would like either of these options, please call Guest Services at (207) 443-1316, ext. 331.

Required Supplies Children Need to Bring to Camp Every Day:

- **Lunch**
- **Refillable Water Bottle**
- **Backpack**
- **Sunscreen** (Applied before arrival at camp, please!)
- **Hat**
- **Bug Repellent**
- **Bathing suit**
- **Towel or blanket**

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(Please don't hesitate to reach out to us before the first day of camp if any of these items pose a challenge.)

Dress Requirements / Recommendations / Prohibited Items:

- Children should wear comfortable play clothes and shoes they can run and walk a distance in. Crocs, open-toe sandals, and flip-flops might become uncomfortable as campers spend most of the day on their feet. We recommend athletic sneakers with socks for the majority of camp, but closed-toed and heel-strapped sandals are also acceptable.
- Overly distracting toys and **ALL ELECTRONICS** are prohibited. Phones must remain off and stored in a safe, dry, place all day while at camp. No exceptions!
- A spare set of clothes is recommended, especially on hot days when we'll have water balloons and sprinklers.

Food & Water:

- **Every camper must bring a healthy and adequate lunch with them.** Since refrigeration is unavailable, please pack perishable lunches with an ice pack.
- The museum will provide a snack in the late morning, so please notify staff prior to camp of any dietary requirements.
- Be certain to list food allergies or any other such concerns on the medical form.
- Please bring a water bottle. Water will be supplied at all times during camp.
- If for any reason you are unable to provide lunch and water, please make arrangements with the Camp Directors.

Contact Information:

- ❖ The main phone number for the museum is (207) 443-1316. Guest Services Staff will be able immediately to put you in touch with a counselor or camp leader.
- ❖ Send emails to Guest Services, guestservices@maritimeme.org, or contact directly by phone at 443-1316, ext. 325.
- ❖ For payment concerns contact Guest Services at (207) 443-1316, ext. 331.

Thank you. We look forward to a great camp season!

Medical/Release Form

To be completed by **Parent or Guardian** if participant is under 18 years of age. This must be completed for each individual child.
The below information requested has been identified by local first responders as being helpful in an emergency situation.

Participant's Name _____ Identifies Gender As _____ Age _____ Grade _____

Height _____ Weight _____ Birthday ____/____/____ Phone #: (____) _____ Week(s) Attending Camp: ____/____ to ____/____

Permanent Address _____

EMERGENCY CONTACT

Name _____

Relationship _____ Day Phone # _____ Cell Phone # _____ Email _____

ALTERNATIVE 2nd CONTACT

Name _____

Relationship _____ Day Phone # _____ Cell Phone # _____ Email _____

HEALTH HISTORY FOR RESPONDER CARE: Check those that apply, give dates and description if appropriate:

- | | | | | |
|--|-------------------------------------|---|---|--|
| <input type="checkbox"/> Heart Trouble | <input type="checkbox"/> Fainting | <input type="checkbox"/> Stomach Upsets | <input type="checkbox"/> Serious Poison Ivy Reactions | <input type="checkbox"/> Wears Glasses |
| <input type="checkbox"/> Low Blood Pressure | <input type="checkbox"/> Asthma | <input type="checkbox"/> Constipation | <input type="checkbox"/> Wears Contact Lenses | <input type="checkbox"/> Hearing Impairment |
| <input type="checkbox"/> High blood Pressure | <input type="checkbox"/> Hay Fever | <input type="checkbox"/> Kidney Trouble | <input type="checkbox"/> Sunstroke | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Tuberculosis | <input type="checkbox"/> Bronchitis | <input type="checkbox"/> Hyperventilation | <input type="checkbox"/> Frequent Sore Throat | <input type="checkbox"/> Headaches Sinusitis |
| <input type="checkbox"/> Earaches | <input type="checkbox"/> Sinusitis | <input type="checkbox"/> Other Histories or Conditions (list below) | | <input type="checkbox"/> Convulsions |

Any checked items that need more information: _____

Operations or serious injuries: _____

Physical limitations or medical equipment required for physical activities: _____

Can the camper swim? _____ Date of most recent tetanus shot: _____

Any emotional or behavioral challenges or situations camp staff should be aware of to better serve the camper:

ALLERGIES & MEDICATIONS

Medications will be kept and distributed by camp staff only. Please make sure staff understands your child's medication procedures. **Any daily "school year" medications should be continued during this program.** Parents and Guardians who wish to have their children self-administer medication must have written permission by their primary care physician and submit it with this form.

<i>Allergy</i>	<i>Reaction</i>	<i>Medication Required</i>	<i>Sent with the Participant?</i>	
_____	_____	_____	yes	no
_____	_____	_____	yes	no

<i>Current Medications</i>	<i>Directions</i>	<i>Reason for Medication</i>	<i>Sent with the Participant?</i>	
_____	_____	_____	yes	no
_____	_____	_____	yes	no

Medical Insurance Company: _____ Policy Number: _____

Consent: To the best of my knowledge the above information is correct. Permission is given for any emergency medical care which might be deemed necessary by medical personnel. I recognize my responsibility, through appropriate insurance or otherwise, to cover all medical and transportation expenses resulting from illness or injury during this program. I also give permission for Camp Staff to transport or arrange transportation for me/my child to the hospital or medical/dental office. Every reasonable effort will be made to contact the parent/guardian in the event of an emergency.

Parent/Guardian Signature _____ Date _____

(Must be a legal guardian of child)

**In this packet is also a Release, Indemnification and Acknowledgment of Risk form.
Please read and sign. Your signatures are necessary for your child's participation.**



DESCRIPTION OF THE PROGRAM

Maine Maritime Museum’s summer youth program offers a unique opportunity to learn in an outdoor environment. The program works to provide fun, educational experiences with the goal of helping participants understand and appreciate their natural environment. Please make a copy of these forms for your own records and submit the original signed copy to the museum.

Maine Maritime Museum’s youth program components may include, but are not limited to (most programs include only some of these activities):

Table with 4 columns of activities: Day Hiking, Food Preparation, Team Activities, Off-Trail Navigation, Cruises/Watercraft Usage, Animal Tracking, Community Building, Ecosystems Study, Vehicle/Bus Travel, Ocean Beach Trips, Active Games, Wading in Moving Water, Historic Tool Use, Science Experiments, Arts and Crafts, Maritime Heritage Study, Watershed Studies, Use of Museum Exhibits, Leave No Trace Practices, Playground Equipment Use.

Programming is varied. It includes half-day programs, with some indoor segments, to full-day outdoor experiences with the group covering sometimes long distances of varied, unpaved terrain. If you are unsure about a particular activity, please do not hesitate to ask for further explanation. On most Tuesdays and Thursdays (sometimes other days), campers will travel via bus off campus for full-day fieldtrips. All of our programming involves outdoor experiences where inherent risk and unpredictability are present. Campers are expected to be informed by parents/guardians prior to camp about the types of activities they will be participating in. Campers must apply sunscreen during camp, so please inform us in advance of any sunscreen related allergies. Kennebec Explorers conducts camp using a group cooperative model. Campers are expected to participate in most activities and if they choose not to participate are expected to encourage and cheer on other campers during activities. Campers may be asked to leave camp without a refund if their behavior is repeatedly deemed unsafe, unkind, or overly disruptive, and/or if they breach the “Camper Contract.” Behavioral management conclusions are at the discretion of camp leaders.

It is the policy of Maine Maritime Museum to send a child home in case of illness or serious injury as we do not have nursing staff or facilities available for treatment/convalescence. We request that you keep your child home when sick to avoid contagion among other participants and staff. Allow an extra day at home beyond fever or other serious symptoms for full rest and return to good health. Camp Staff will remain vigilant for Covid-19 symptoms. Any student exhibiting or complaining of Covid-19 symptoms will be sent home. Maine Maritime Museum abides by current CDC recommendations.

INDEMNIFICATION AND RELEASE

I acknowledge that my/my child’s participation in Maine Maritime Museum’s youth program entails known and unanticipated risks, which could result in physical or emotional injury, including death, to participants. I understand that the program includes wilderness experiences and will be continued in inclement weather and that each participant must provide proper clothing for their warmth and comfort. I accept the fact that program facilitators cannot guarantee my/my child’s total safety and that some risks associated with outdoor activities are beyond their control. I also understand that I/my child may be outside of immediate ambulance response and evacuation may be a longer process than a street emergency. I realize in the course of the program, I/my child may experience snow or ice covered trails, snow, rain, sleet, hail, freezing rain, high winds, intense sun, lightning, insects or other conditions that cannot be predicted. In consideration of my/my child being permitted by Maine Maritime Museum to participate in the education program, I agree to indemnify and hold harmless Maine Maritime Museum from any and all claims which arise out of my/my child’s participation in this program.

I hereby represent that I am/my dependent _____ (dependent’s name) is in good health and that I have adequately informed Maine Maritime Museum personnel of any special needs that I/my child may have. I expressly agree and promise, on behalf of myself/my dependent, to assume all risks existing in Maine Maritime Museum’s education program and in borrowing Maine Maritime Museum equipment. My/my dependent’s participation is voluntary in spite of all the risks and I agree to release, defend and hold harmless Maine Maritime Museum and its officers, directors, employees and agents from any liability for any claims, without limitation, which arise out of my/my child’s participation in this program unless caused by Maine Maritime Museum’s gross negligence or willful misconduct.

I have had sufficient opportunity to read and ask any questions I may have of this document. I have read and understood it and agree to be bound by its terms.

Participant (if 18 years or older) or Parent/Guardian Signature _____ Date _____

(Must be a legal guardian of child)

Youth Program

**Pick-up Permission Form
& Photo Permission Form**



Child Name(s) _____

At the end of the program, staff will only release your child to those listed below. Names may be added as carpool opportunities arise. Please print neatly and include all parents' or guardians' names where appropriate. Campers must have separate written permission for days parents/guardians would like for their child to travel home alone or with fellow campers.

I authorize that the following people may pick up the child named above:

	NAME:	RELATION:	P# IF NOT LISTED ELSEWHERE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

The above-named child may participate in all camp activities and programs. I authorize Maine Maritime Museum to have and use photographs, slides, moving pictures, or videotapes of the person named on this form as may be needed for its records or public relations. Kennebec Explorers Day Camp is made possible by generous grant funding.

Signed _____ Date _____
Parent or guardian signature