Medical Release Form

One child per form. Form may be photocopied for additional children. Child's Name: _____ Emergency Contact: _____ Emergency Contact Phone #:_____ Relationship to Child: Doctor's Name: _____ Doctor's Phone #: _____ Does your child have allergies including to bee stings? If my child should become ill or injured during the session, I understand and agree that the staff at the James A. McFaul Environmental Center will: 1. Contact me immediately, or 2. Contact the person I have designated, if I cannot be reached. 3. If the designated person cannot be reached, the staff is authorized to contact my child's physician and arrange for immediate emergency treatment at the Valley Hospital Emergency Room. Transportation will be provided by police or Rescue Squad personnel. Guardian Signature: ____ Date: _____

Please make sure anyone picking up your child knows their code word or your child will not be released to them.



James A. McFaul Environmental Center 150 Crescent Avenue, Wyckoff, NJ (201) 891-5571

Learn about native flora, fauna, and environment with interactive activities, live animals, and fun crafts!

Sign-ups begin

APRIL 5, 2022 at 8:30AM

Workshop Sessions

Kindergarten July 12, 13, 14 | 9am-11am or 1pm-3pm

1st & 2nd July 19, 20, 21 | 9am-11:30am or 1pm-3:30pm

3rd & 4th July 26, 27, 28 | 9am-11:30am 5th & 6th July 26, 27, 28 | 1pm-3:30pm

Reservations are accepted **in-person only**. Payment is due at time of sign-up. Required: Reservation form, medical release form, and a code word for each child.



- Child must be **entering into** the grade to participate in that age group, i.e. if the child finished 2nd grade, then the child would enroll in the 3rd & 4th grade group
- Child must wear comfortable, weather appropriate clothing and sturdy footwear. No flip-flops or sandals permitted.
- All programs are held on Tuesday, Wednesday, and Thursday.
- Children **will not** be released to anyone who does not know their code word.
- Reservations are accepted **in-person only**. Payment is due at time of sign up.



Checks payable to: Bergen County Parks Department

James J. Tedesco, III

County Executive

Board of County Commissioners

Tracy Silna Zur, Chair | Mary J. Amoroso, Vice Chair
Dr. Joan M. Voss, Chair Pro Tempore
Steven A. Tanelli | Ramon M. Hache, Sr. | Germaine M. Ortiz | Thomas J. Sullivan

2022 Summer Workshops Reservation Form

One child per form. Form may be photocopied for additional children.

Child's Name:	
Address:	
Cell Phone:	
Email:	
Guardian's Name: _	
Does your child have	e allergies? Yes No
If yes, to wha	t?
	This year's session choice: Grade Entering: Date:
	Time:

***CODF WORD:____

Children will not be released to any individual who does not know the code word. **NO EXCEPTIONS.**

Groups are limited to 14 children per session. \$50.00 per child.

NO REFUNDS.

Reservations are accepted **in-person only.** Payment is due at time of sign-up. Required: Reservation form, medical release form, and a code word for each child.