



iWalk the Eno

Science & Nature Day Camp

www.iwalktheeno.org

For students ages 8-12 years old

June 19–23 or June 26-30, 2017

To apply, fill out and return the following **by April 15**. You will receive a letter or email confirming your child's acceptance into iWalk the Eno. **Keep this page for your records!** A packing list & transportation information will be sent to enrolled campers in May.

Checklist:

- Application – signed by parent/guardians
- Application fee - \$20, please send with the application (total payment for camp due by May 31)
- Camper Code of Conduct – signed by student & parent/guardians
- Frog Hollow Outdoors Canoe Waiver – signed by parent/guardians
- Student Survey- to be completed by camper
- Scholarship Form - Optional

Thank you for applying to the **iWalk the Eno Science & Nature Day Camp**. We are looking forward to another great week on the Eno River in June! We are confident that your child will receive high quality, professional instruction and supervision by experienced teaching staff, and have a great time making new friends and enjoying the Eno River each day.

June 19-23 & June 26-30

Each week of iWalk camp includes lots of time outdoors, exploring nature, doing science, and becoming an Eno River State Park Junior Ranger.

Activities include: hands-on, feet-wet science investigations, free flow time to explore and discover the Eno River, learning with Eno River State Park rangers, and doing citizen science & stewardship project for the park

Thanks to major funding provided by the Burroughs Wellcome Fund Student Science Enrichment Program each camper will be provided a back pack, art supplies, snacks, an Eno bandana, water bottle, a notebook & pencils, an iWalk the Eno t-shirt, and daily lunch and healthy snack. Camp fees include all supplies, equipment, and canoe rentals.

Mail to: Eno River Association
iWalk the Eno
4404 Guess Road
Durham, NC 27712

Email: dave@enoriver.org

Phone: (919) 620-9099, ext. 204

Important Information

- The camp is based at Few's Ford in the Eno River State Park located at 6101 Cole Mill Rd, Durham.
- Student drop off is between 8:30-9:00 at the picnic area in Eno River State Park at the dead end of Cole Mill Road.
- Student pick up is between 3:30-4:00 pm each day, except on Friday, when we will have a late pickup following our camp closing celebration.

On **Thursday June 22 and June 29**, students will travel by bus from Eno River State Park to West Point on the Eno. While there, we will meet our canoe guides from Frog Hollow Outdoors and spend the day in the historic West Point on the Eno City Park in Durham learning basic canoe skills, playing games, doing volunteer work, and touring the historic buildings.

On **Friday June 23 and June 30** we will have our **Camp Closing Celebration**. We invite all campers' families to join us for this celebration! We will begin at 3:30 and end at approximately 4:15, returning to our pick up locations by 4:45. Additional information about the celebration, including driving directions, will be sent out closer to the date.

Daily Schedule

8:30-9	Drop off at Eno River State Park
9:00	Opening Circle
9:15	Morning Activities
11:45	Lunch & Games
1:00	Afternoon Activities
3:15	Closing Circle
3:30-4	Pick up at Eno River State Park

Dates to Remember

Tuesday, May 31

- All Camp Fees due

Monday, June 19 or June 26

- 1st Day of iWalk the Eno Camp

Thursday, June 22 or June 29

- Canoeing at West Point on the Eno

Friday, June 23 or June 30

- Closing Celebration at Few's Ford at Eno River State Park (**late pick up day**)

* **Late Pick Up Charge:** \$5.00 for every ten minutes after 4:00 for campers picked up at Eno River State Park.

Remember- keep this page for your records!



**iWalk the Eno Science & Nature Camp
2017 Application**

Applying for: June 19-23

June 26-30

Camper's name

(Nickname)

Last

First

Middle

Parents' names: _____

Email addresses: _____

Mailing address(es): _____

Parent/Guardian Contact information:

Primary phone (____) _____ - _____ Contact person _____

Secondary phone (____) _____ - _____ Contact person _____

Alternate phone (____) _____ - _____ Contact person _____

Child's date of birth ____/____/____ Age in June 2017 ____ Grade in 2016/2017 ____

Gender _____

School _____ T-Shirt Size (circle one) Youth S, Youth M, Youth L, Adult S,

Adult M, Adult L

Should our staff be aware of any learning modifications or other issues concerning this child?

Yes No

Please provide the following proof of health insurance coverage.

Company _____ Policyholder's name _____

Policy no. _____ Phone Number _____

In case of emergency, please identify an additional contact person who is authorized to pick up your child:

Name _____ Relationship _____

Primary phone (____) _____ - _____ Secondary phone (____) _____ - _____

Email address: _____

Who is your child's physician? _____ Phone (____) _____ - _____

Does your child have any medical conditions? ___ Yes ___ No If yes, what are they?

Is your child taking any medications? ___ Yes ___ No If yes, what are they? When are they taken? _____

Does your child have any allergies to food or medicine? ___ Yes ___ If yes, what are they?

Does your child have any dietary restrictions? ___ Yes ___ No If yes, what are they?

Camp buddies: if your child prefers to be in a group with a friend (or two), please list them:
_____ (camp groups are formed by
age/grade)

The foundations that fund iWalk want to know that we are including a diverse community. It is not required but would help us if you indicated your child's race/ethnicity here _____.

Waivers and Authorizations

We, the undersigned parents (or guardians) of the child named on the registration form, acknowledge that we are aware of the types of activities in which the child will be participating during his or her attendance at iWalk the Eno. We further acknowledge that we have provided full disclosure of any physical or mental conditions, challenges or problems of the child. We authorize iWalk the Eno staff members to transport our child for event activities. We acknowledge that our child's participation in the iWalk the Eno program entails both known and unanticipated risks that could result in injury due to the nature of outdoor activity and play. Because of the inherent potential dangers of participating in the activities of any children's camp, we recognize the importance of the child's abiding by all camp rules and regulations. We have instructed the child to respect staff members and abide by the rules and regulations. We agree to indemnify and hold harmless the Eno River Association and all camp staff from any claims, demands, or causes of action connected with the participation of our child. If outside medical services (doctor visits, x-rays, lab tests, etc.) should be needed, we understand that we are financially responsible. We hereby give permission to the physician selected by iWalk the Eno staff to hospitalize and/or secure proper treatment for our child. We grant permission to: (1) Use photographs and video that include our child for camp and Eno River Association advertising; (2) Use our name and phone number as a reference for prospective campers (please mark out items 1 or 2 if not granted.)

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

- **Application fee: All families must pay a \$20 registration fee with their camp application. This is non-refundable.**
- **Total amount of \$220 due by May 31, 2017**

Camp Fee	Application fee *	Total Due	Amount Paid (20 or 220)
\$200	20	220	

Scholarships are available! Please complete the Scholarship Application form and return it with the complete application. You will be notified if you qualify. You must pay the application fee after your child is given a scholarship. See Scholarship Application for details.

Credit Card Payments:

Name on card: _____ Total: \$_____

Card # _____ (Visa or Mastercard only)

Exp. Date: _____ ZIP code _____

Signature: _____

Checks or money orders should be made payable to the **Eno River Association**.

Mail or email the completed form & payment (include required application fee or total amount due) to:

iWalk the Eno, Eno River Association, 4404 Guess Rd., Durham, NC 27712
 Dave Cook, Education Coordinator ~ (919) 620-9099 x204 ~ iwalk@enoriver.org ~ www.iwalktheeno.org

iWalk the Eno Camp Scholarship Application

Solicitud para reducción de tarifa de iWalk the Eno

Fee Reduction Policies

The Eno River Association is committed to making its programs, activities, and special events available to as many children as possible. It is our intent that no child be prevented from participating because of the inability to pay a full fee. This policy has been established and adopted to meet the needs of individuals or families determined to have limited financial resources. iWalk the Eno staff will keep all information strictly confidential.

Program Fees:

Families who qualify for a fee reduction will be required to pay either the \$20 Application fee only or 50% of the total program fee (\$100) based on their household size and income, relative to the Financial Assistance Eligibility Scale below. Application fee (\$20) is due at time of registration. Household income is defined as the sum, on an annual basis, of all pay, allowances, maintenance, financial aid, child support, social services allowances and other income for the household.

Financial Assistance Eligibility Scale

Number of household members	Max. Amt. Family Earns, Pay 50% of Fee (\$100)	Max. Amt. Family Earns, Pay \$20 Application Fee	Check here if you receive benefits from the Department of Social Services: <input type="checkbox"/> SNAP (food stamps) <input type="checkbox"/> Medicaid
1	\$21,775	\$15,301	
2	\$29,471	\$20,709	
3	\$37,167	\$26,117	
4	\$31,525	\$44,863	
5	\$52,559	\$36,933	
6	\$60,255	\$42,341	
7	\$67,951	\$47,749	
8+	\$75,647	\$53,157	

Financial Circumstances:

Families who have circumstances that affect their ability to pay the percentage of program fees for which they qualify would be able to discuss their situation with the Camp Director. Additional documentation may be required.

Approval by Director:

The Camp Director will review each fee reduction request. Any questions regarding this policy should be forwarded to the Eno River Association at (919) 620-9099, x 204 or iwalk@enoriver.org.

Names of household members	Amount Family Member Earns (Yearly)
1	\$
2	\$
3	\$
4	\$
5	\$

Total income: _____

Signature of head of household: _____ Date _____

Return with Camp Application to: Eno River Association, 4404 Guess Rd., Durham, NC 27712

iWalk the Eno

Camper Code of Conduct



I understand that my attitude and behavior are critical to my success, and to the success of camp this summer. Therefore, for the good of all, I agree to abide by the following:

1. I will try to be sensitive to the needs of each camper by performing my assigned duties, including but not limited to: participating in all camp activities, cleanup, etc.
2. I will respect the places and the people with whom I come in contact.
3. I understand that the use of alcohol, tobacco, profane and/or threatening language, or drugs will not be tolerated, and that usage during camp will result in expulsion from my camp program.
4. I will be responsible for my personal belongings and equipment and will not hold iWalk the Eno or any other outsider responsible for the loss or damage due to my negligence or neglect.
5. I will treat equipment provided by iWalk the Eno or any other person with care.
6. I will use safety equipment furnished by iWalk the Eno for my own safety.
7. I will treat other campers and staff with respect and courtesy.
8. I understand that if I can not abide by the guidelines listed above, the Staff Leaders will notify my parents/guardians, and I will be sent home.

Camper Signature

Date

I have read, understand and agree with the above responsibilities of my child while participating in the iWalk the Eno Summer Camp.

Parent/Guardian Signature

Date

WAIVER AND RELEASE OF LIABILITY
FROG HOLLOW

Participant's Name (Please Print)

Address

IMPORTANT. READ CAREFULLY. This document affects your legal rights. It must be signed by you the "Participant", whether you are an adult or minor, if you are renting or otherwise using equipment or participating in activities offered by Frog Hollow LLC. It must be signed also by your parent or guardian if you are a minor Participant. The parent or guardian agrees to these terms individually and on behalf of the minor. Only a parent or legally appointed guardian may sign for a minor Participant. References to "I" or "we" include all who sign below unless otherwise clearly indicated.

PARTICIPANT AGREEMENT
(Including Acknowledgement and Assumption of Risks,
Agreements of release and Indemnity, and Additional Provisions)

In consideration of the opportunity to rent or otherwise use certain equipment and/or participate in activities offered by Provider, Participant (adult or minor), and the parent or guardian of a minor Participant, understand, acknowledge and agree as follows:

[PART II] Activities, Hazards and Risks

The services of the Provider may include renting equipment and providing trips (including guided trips) by canoe or kayak (referred to, collectively, as watercraft). Activities, scheduled and unscheduled, associated with these services may include, in addition to travel by water, swimming, wading, hiking, climbing on rocks and slopes, camping, portaging (carrying the watercraft between water travel sites) and travel to and from the activities.

The hazards and risks (together referred to as "risks") of the use of watercraft include the following: entering, exiting, and operating watercraft; water which may be fast, deep, cold, and subject to rapid change; objects which may be encountered in and out of the water, and which may not be obvious, including debris, trees, rocks, boulders, dams, bridges, and other hazards; the watercraft may overturn, swamp and sink and occupants may become separated from the craft; feet and other parts of the body may become entrapped in or under rocks and other objects; participants may strike or be struck by objects, other watercraft, and other persons, in and outside of the watercraft. Risks of other activities include those associated with camping, hiking and moving on and over terrain, including the shoreline, the premises of Provider and others, and elsewhere, which may be unstable, steep and slippery and where rocks, trees, and other objects may fall, and man-made and natural structures may fail; animals, including poisonous reptiles, poisonous insects, and poisonous plants may cause harm; swimming in unfamiliar surroundings may cause entrapment, injury from slips and falls and drowning. Other risks include errors in judgment of Provider's staff and other participants, including the improper assessment of capabilities and conditions pertaining to the activities; certain activities may be instructional, and designed to extend the skills of participants; equipment may be misused or may fail because of manufacturing defects or otherwise; collisions may occur while traveling by vehicle to and from the activities; the activities are subject to the unpredictable forces of nature, including exposure to the sun, cold, wind, hail, lightning, flash floods and other such phenomena; activities may take place in remote places, significantly delaying emergency medical care and evacuation.

Participant, and the parent or guardian of a minor participant, acknowledge and understand that the description of activities and risks above is not complete and that all activities, whether or not described, may be dangerous and may include risks which are inherent and cannot be reasonably avoided without changing the nature of the activity. Participation in the activities can cause bites, stings, allergic reactions, overexertion, heat stroke, hypothermia, illness due to contaminated water, burns, cuts, bruises, strains, broken bones, and other injuries and illnesses. Property loss, and serious injury and death, including by falling and drowning, are possible.

Client, and the parent or guardian of a minor Participant, accepts full responsibility for determining Participant's medical, physical or other qualifications or suitability for participating in the activities. Provider is not responsible for water conditions, routes, camp sites, or other activities of renters of its equipment. Alcohol will, and other substances may, impair judgment and reduce a participant's ability to effectively manage the risks of water travel, camping, and land activities; participants should inspect unfamiliar rapids and other hazards before attempting to pass through or over them; participants should always wear a fastened life jacket (personal flotation device); participants should wear footwear which will provide protection from sharp objects, and which will minimize the risk of foot entrapment. Failure to adhere to these and other safety precautions may result in serious injury or death.

[PART III] Acknowledgement and Assumption of Risks

I, the Participant (adult or minor) and the parent or guardian of a minor Participant, understand the nature of the services of Provider and other activities, which may occur, and their risks. I acknowledge and expressly assume all risks of the activities, whether or not described above, known or unknown, and inherent or otherwise. I take full responsibility for any injury or loss, including death, which I, or a minor child for whom I sign, may suffer, arising in whole or part out of such activities.

[PART IV] Agreement of Release and Indemnification, and Additional Provisions

If I am an adult participant, or the parent or guardian of a minor Participant, I agree, for myself and on behalf of the minor Participant for whom I am signing, as follows:

I release Provider, its employees, contractors, volunteers, directors and owners ("Released Parties") from any and all claims of injury or loss which I, or the minor child for whom I sign, may suffer, arising out of or in any way related to my, or the child's, enrollment in or participation in the activities of Provider or the use of its equipment. Neither I, the minor child, nor anyone acting on our behalf, will bring suit or otherwise assert any such claims against a Released Party.

I will indemnify (that is, defend and satisfy by payment or reimbursement, including costs and attorneys' fees) each Released Party from any claim of liability, including one brought by or for a minor child whom I sign, a co-participant in any of the activities of Provider, a rescuer, a member of my, or the minor child's, family, or any one else, asserting a loss arising out of or in any way related to my, or the child's, enrollment in or participation in the activities of Provider or the use of its equipment.

The agreements of this release and indemnification above include claims arising in whole or in part from negligent (but not grossly negligent, reckless or intentionally wrong) acts or omissions of Released Parties or any of them, and all other claims, including for personal injury, wrongful death, property damage, products liability (including strict liability), breach of contract or warranty, or otherwise. The agreements are intended to be enforced to the fullest extent allowed by law, and to be binding on me as Participant and on me as parent or guardian of a minor Participant, individually and on behalf of the minor for whom I sign.

[PART V] Additional Provisions

I authorize Provider to provide or obtain for me, or the minor child for whom I sign, such medical care as it considers necessary and appropriate, and I agree to pay all costs associated with such care and related transportation. Any dispute between Provider and me or the minor child for whom I sign will be governed by the substantive laws of the State of North Carolina (not including laws which might apply the laws of another jurisdiction), and any mediation or suit shall take place only in that State, in the County of Durham. If the dispute cannot be resolved by mutual agreement, I agree to submit it to a mediator recognized by the Courts of that State and County. I agree to pay all costs and attorneys' fees incurred by Provider in defending a claim or suit brought by me or by or on behalf of the minor for whom I sign, if the claim or suit is withdrawn or to the extent a court or mediator determines that Provider is not responsible for the claimed injury or loss.

[PART VI]

This agreement is entered into voluntarily, and after careful consideration. Its terms cannot be amended except in writing. I understand that it is binding, to the fullest extent allowed by law, upon all persons signing below, our respective heirs, executors, administrators, wards, minor children (whether or not they are Clients) and other family members. If any part of this agreement is found by a Court or other appropriate authority to be invalid, the remainder of the agreement nevertheless shall be in full force and effect.

Participant (adult or minor)

Date: _____

Parent or Guardian

Date: _____