

Joplin Humane Society
Shelter Pals



Dates:

Let's Be Friends – Grades K-4

Monday, July 15-18, 2019 from 1:00 – 4:00 PM

Helping Hands & Happy Tails – Grades 5-8

Monday, July 22-26, 2019 from 1:00 – 4:00 PM

Family Fun Night and BBQ will be Friday, July 26, 2019 from 6:00 – 8:00 PM.

Cost: \$75/camper

One snack and Camp T-shirt will be provided.

Campers are asked to bring a water bottle.

For more information, please read our [Camp Handbook](http://www.joplinhumane.org) found at www.joplinhumane.org

Camp Themes

Let's Be Friends – Grades K-4

What does it mean to be compassionate, caring and kind? How can we show compassion to animals and neighbors in our community? Learn more about our JHS Reading Pals motto " Big or small, be kind to all" while you interact with our furry friends.

Helping Hands & Happy Tails – Grades 5-8

Can kids make a difference? Can they volunteer, give, advocate and change the world? Absolutely! This week, join us for an exploration into the world of animal welfare as we learn the different ways that kids in middle school can make a difference right here in Joplin for pets in need.

Camper Information

Please complete one (1) form per camper

(First Name) (Last Name) (Nickname)
Rising Grade (the grade your child will be entering this fall) _____

T-Shirt Size _____

JHS Shelter Pals Summer Camp is for campers in grades K-8. Please use 0 to represent Kindergarten.

Allergies:

Camp is not recommended for children with allergies to pets, pet dander or nuts. Camp is held on a campus that houses more than 200 dogs and cats. Dogs are given peanut butter daily and many treats contain nut allergens. For this reason, we do not recommend that children with these allergies attend camps at JHS. Please email tianna@joplinhumane.org for more information.

Does your child have any allergies? Yes _____ No _____

If, Yes, please explain:

Does your child have any special needs that our staff needs to know about? Yes ____ No ____

If, Yes, please explain:

Please share any medical or behavior information that would help staff provide the best care for your child.

What session will your child be attending?

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Parent or Guardian Information

Name: _____
(First Name) (Last Name)

Address _____
(Street Address)

(City) (State) (Zip)

Phone: _____ Email: _____

Emergency Contact:

Name: _____
(First Name) (Last Name)

Emergency Contact Phone:

The following adults are authorized for pick up, including yourself. All adults must present ID at time of pick-up.

RELEASE FORM

As legal parent or guardian, I give permission for _____ to attend Camp. I hereby release the Joplin Humane Society, its agents, employees, directors and all liability insurance carriers from all action, damages or judgments which may occur now or in the future, for all injuries arising out of the activities while attending Camp. I acknowledge and am aware that this program involves certain inherent risks. These risks may include, but are not limited to, walking on uneven ground, opening and closing gates and kennels, walking, playing and grooming cats and dogs as approved by staff, weather and other people's actions.

_____ While the Joplin Humane Society will make every attempt to provide reasonable accommodations for mentally and physically challenged children, the Joplin Humane Society will not accept children who are (1) a danger to themselves, (2) a danger to others, (3) a danger to the animals, or (4) a disruption to the normal activities making it unreasonably difficult for other children to enjoy Camp. Any of the above reasons will be grounds for dismissal. We strongly recommend that you discuss with staff any special conditions or circumstances involving your child. We request that you do this PRIOR to registration so that we can advise you as to whether we can make a reasonable accommodation for your child.

_____ In the event of an emergency and my emergency contact person cannot be reached, I hereby give permission to the physician selected by the Joplin Humane Society to hospitalize, secure proper treatment for, and to order injections, anesthesia or surgery for the individual named on this application. I understand that no accident or medical insurance is provided with this activity.

_____ I give my permission to the Joplin Humane Society to use, without limitation or obligation, photographs, film footage, or audio recordings that include my child's image or voice for purpose of promoting or interpreting Joplin Humane Society programs.

_____ Cancellations must be made at least two weeks prior to the camp start date and must be received in writing via email or fax to qualify for a 50% refund. A processing fee may occur for refunds. A charge may occur to change dates after registration is complete.

_____ The Joplin Humane Society will not issue refunds if registered students miss camp dates. The Joplin Humane Society reserves the right to cancel the Shelter Pals Summer Camp due to insufficient enrollment. In that case, refunds will be issued.

Parent or Guardian _____

Please sign or type your name below to indicate that the information provided is true and that you have read and understand the release form above in its entirety.