



Kitsap Forest Adventure Camp

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Welcome Letter

Week 1 – July 10th - 14th – Nature Detectives
Week 2 – July 17th - 21st – Outdoor Adventures

June 1, 2017

Dear Kitsap Forest Adventure Camp Families,

We are so glad you've registered for our Kitsap Forest Adventure Camp presented by The Mountaineers Players. We are looking forward to helping your child's creativity and imagination bloom at this special place. We are excited to play, explore and create with your campers while introducing them to the joys of being outside in the forest and learning new skills. Meagan Castillo, the Camp Coordinator from last summer, is returning this year – and she has a lot of exciting things planned for the campers.

Please visit www.foresttheater.com/kitsap-forest-adventure-camp and scroll to the bottom of the page and click on the **Registered Camper Page** to download the forms that need to be filled out, signed and returned by email (if scanned or filled out online) or mailed to the Camp Director (contact information below). Please return them as soon as possible:

- Camper Info & Medical Form**
- Transportation Arrangements**
- Release, Waiver & Indemnity Agreement**

Please note: If your child will be taking medication during camp there are two **Medication Forms** (available on the **Registered Camper Page**) that need to be filled out and brought on the first day of camp. This includes both non-prescription (including sunscreen) and prescription drugs.

We also want to invite your entire family to sign-up for the optional **Family Dinner or Dinner/Overnight** on **July 14th (Week 1)** or **July 21st (Week 2)** to explore the Kitsap Forest Theater grounds and play with your camper and even watch some *Tarzan* rehearsals on Saturday morning. Pitch a tent or sleep in the dorm, share delicious meals (dinner and breakfast), hike to "Big Tree" and enjoy a sing-a-long around the campfire. Cost is \$15 per person (children under 6 are free) for the overnight with two meals, and \$10 for Friday night's dinner. The sign-up form is on the Registered Camper Page but you can decide during the week of camp (and pay then, also).

We are looking for a few volunteers to help the cook with meal preparation for the Friday night dinner and Saturday breakfast. If you would like to help out please contact the camp director or note it on the Transportation Form.

You will be receiving more details about the camp schedule, what your camper should bring (and not bring) to camp and other pertinent information as we get closer to the date of camp. We're looking forward to getting to know your camper(s), and enjoying a week (or two) of adventures in the out-of-doors at the beautiful Kitsap Forest Theater.

If you have questions about camp, being a volunteer, or if there is anything you would like to discuss, please don't hesitate to call or email me. We're looking forward to a great summer.

Sincerely,

Gala Lindvall, Director | Meagan Castillo, Coordinator
Kitsap Forest Adventure Camp

Gala Lindvall, Camp Director, 19302 22nd Ave. NW, Shoreline, WA 98177
adventure@ForestTheater.com • 206-542-7815





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Camper Info & Medical Form

Camper Information

Camper Name _____ Birth Date _____ Age _____

Grade in fall: _____ M F

Street _____ City _____ State _____ Zip _____

Parent/Guardian 1 _____ Cell Phone _____

Alternate Phone _____ email _____

Parent/Guardian 2 _____ Cell Phone _____

Alternate Phone _____ email _____

Emergency Contact _____ Cell Phone _____

Alternate Phone _____ email _____

Medical Insurance Co _____ ID# _____ Group _____

Please check any existing conditions that apply:

- Allergies (please list) _____
- Diabetes Asthma Seizures ADD/ADHD Developmental Disorders
- Other health concerns _____

Please describe any special medical, behavioral or dietary concerns, allergies or physical conditions that may affect your child's participation in camp that you would like us to be aware of. Use the reverse of this page if necessary. **If your child requires medication during camp, please fill out the Medication Forms.**

Authorization for Treatment

I hereby give permission to the First Aid or medical personnel selected by the camp director to provide treatment according to their assessment of my child's needs. In the event that I cannot be reached in an emergency, I hereby give permission for my child, as named above, to be transported by ambulance or aid car to an emergency center for treatment. I further consent to medical, surgical and hospital care, treatment and procedures to be performed for my child by a licensed physician or hospital when deemed immediately necessary or advisable by a physician to safeguard my child's health. I agree that I will be responsible for any and all charges incurred in obtaining prompt medical attention.

Parent/Guardian Signature: _____ Date: _____



Camper Name: _____ Week 1 Week 2



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Transportation Arrangements

Camper's name: _____ Nickname: _____

Kitsap Forest Adventure Camp, held at the Kitsap Forest Theater, is centrally located on the Kitsap peninsula, just 15 minutes from the Bremerton ferry dock (and 30 minutes from the Kingston ferry dock). Residents from the Greater Seattle/Tacoma area can reach us in several ways: take the ferry from Seattle to Bremerton or from Edmonds to Kingston — or drive around the Puget Sound via the Tacoma/Narrows bridge.

We are offering a Seattle Transportation Package whereby you can drop off/pick up your child at the Seattle ferry terminal to be met by camp staff at 8:00 am and picked up at 4:00 pm. Details will be provided later.

- I choose the Seattle Transportation Package
 - I have paid the \$140 Seattle Transportation Fee on-line (link provided on our web site)
- I would like to carpool – please share my email with other interested drivers
- My child will be dropped off/picked up in Bremerton at the Kitsap Forest Theater

Authorized Pick-Up Procedures

I give my permission for the Kitsap Forest Adventure Camp staff to release my child to any of the people listed below. I also understand that I, or the authorized person, may be requested to present a photo ID. I understand that the camp staff will not release my child to any individual, including relatives, who is not listed on this form, unless written permission signed by the parent/guardian is received.

1. Parent/Guardian _____ Phone: _____
2. Parent/Guardian _____ Phone: _____
3. Pick-up Person #3 _____ Phone: _____
4. Pick-up Person #4 _____ Phone: _____
5. Pick-up Person #5 _____ Phone: _____
6. Pick-up Person #6 _____ Phone: _____

I understand that it is my responsibility as the primary caregiver to ensure that my child is picked up on time every day from camp (or the Seattle ferry dock), and that if I (or a designated pick-up person) am more than 10 minutes late, camp staff will begin calling emergency contacts, beginning with the primary caregiver.

Camper's youth t-shirt size: Extra Small Small Medium Large

- I would like to volunteer to help the cook prepare meals: Friday Dinner Sat Breakfast
- My family is planning on attending the Family Dinner/Overnight on Friday night: July 14th July 21st

Signature of Parent/Guardian: _____ Date: _____

Please direct your questions to our Camp Director. We desire the safety and security of your child.

Gala Lindvall, Camp Director • adventure@ForestTheater.com • 206-542-7815



Camper Name: _____ Week 1 Week 2



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Release, Waiver & Indemnity Agreement

Camper's name: _____ Nickname: _____

The staff at Kitsap Forest Adventure Camp (presented by The Mountaineers Players, part of The Mountaineers) strive to provide a safe and supervised program for your campers while acknowledging that summer camp by nature is not without risk. Recognizing that any outdoor activity may involve certain dangers, including but not limited to the hazards of uneven terrain, exposed roots, natural plant life such as stinging nettles, flying insects such as yellow jackets, wasps and mosquitoes, other animals such as snakes, raccoons and deer and the actions of participants and other persons, I give my child permission to participate in Kitsap Forest Adventure Camp.

I recognize that campers must follow safety instructions, remain in areas designated by staff, and refrain from behavior that is harmful to oneself or others. I acknowledge that Kitsap Forest Adventure Camp staff are not responsible for my camper's personal clothing, items or equipment that may be lost, stolen or damaged as a result of my camper's participation in camp activities. I understand that it is my responsibility to provide for my child's accident and health coverage while participating in camp.

I hereby agree to release, discharge and agree not to sue Kitsap Forest Adventure Camp (including The Mountaineers Players and The Mountaineers) and all directors, officers, employees, agents and volunteers for any and all claims for injury, illness, death, loss or damage that I or my child may suffer while I or my child are at camp participating in camp activities. I agree to indemnify and hold harmless Kitsap Forest Adventure Camp (including The Mountaineers Players and The Mountaineers) from any loss, liability, damage or cost they may incur due to my or my child's participation in camp activities.

Media Release: I, the undersigned, being legal guardian of the camp participant named above, grant to Kitsap Forest Adventure Camp the right to use his/her photograph, likeness, video or voice recording for broadcast or publication in any and all media. I hereby release any claims of copyright, libel, slander, violation of privacy or similar rights.

_____ Please initial if you do **not** agree to the Media Release terms

I have read and understand this Release, Waiver and Indemnity Agreement and voluntarily sign, accept and agree to all terms.

Parent/Guardian printed name: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Please direct any questions to our Camp Director. We desire the safety and security of your child.
Gala Lindvall, Camp Director • adventure@ForestTheater.com • 206-542-7815



Camper Name: _____ Week 1 Week 2