

"We have planned an exciting camp that will keep young children active and captivate their minds during their summer break. At our Environmental Center, the classrooms extend outside of the building—onto our trails, woods, and river—so we can provide exciting, hands-on activities for children to learn about nature and the environment. I invite children to enroll in our camp for a summer adventure."



Joseph N. DiVincenzo, Jr.

Joseph N. DiVincenzo, Jr., *Essex County Executive*And the Essex County Board of County Commissioners

Invite Children Ages 4 to 9 Years Old to Participate in

NATURE EXPLORERS SUMMER CAMP 2025















Campers Ages 4 & 5

Monday to Friday; 9:30am to 12:30pm; \$250 per child per week

Summertime Safari July 7th through July 11th

We'll journey all over the park and use binoculars and magnifiers to meet frogs, salamanders, turtles, insects and birds in this super-fun adventure. Your imagination will be your guide! Animal Senses July 14th through July 18th

Butterflies taste with their feet, salamanders smell to find their food and a fox can track down an earthworm by listening to it underground. Discover how your senses stack up to the very best of the animal world.

Campers Ages 6 & 7

Monday to Friday; 9:30am to 1:30pm; \$270 per child per week

Native American Living July 21st through July 25th

Ever wonder what it would be like to be a Native American? Want to know how they hunted, fished, foraged and farmed using sticks, stones and bones? Have fun with games, art, clothing, music and tales. Enjoy exploring our longhouse and Native American learning area.

Wild Art July 28th through August 1st

Do you love nature? Do you like to draw, color, paint, sketch and create with natural materials? Then Wild Art is for you. Using our five senses and our backyard habitat, let's see how creative we can be. Campers will craft an amazing art portfolio!

Campers Ages 8 & 9

Monday to Friday; 9:30am to 1:30pm; \$290 per child per week

Lenape Living August 4th through August 8th

Campers will be challenged to scavenger hunts, shelter building, fire building and much more while learning to work together as a team. There will be one on-site canoe trip and one off-site field trip to Pyramid Mountain to hike up to Tripod Rock.

Junior Naturalist August 11th through August 15th

Play games that explore the life of owls and eagles and head out to 'Bird Lane' with binoculars and field guides to find New Jersey bird species. There will be one on-site canoe trip and one off-site field trip to The Raptor Trust and Great Swamp!

Registration is accepted in-person, by mail or can be completed online at

www.essexcountyparks.org/calendar

For information, please call the Essex County Environmental Center at 973-228-8776.



Department of Parks, Recreation and Cultural Affairs ESSEX COUNTY ENVIRONMENTAL CENTER 621-B EAGLE ROCK AVENUE, ROSELAND, NEW JERSEY 07068 Phone: 973.228.8776 Fax: 973.228.3793

www.essexcountyparks.org

~PUTTING ESSEX COUNTY FIRST~



Camp Details

Fees: Campers ages 4 & 5 (must be minimum age 4): \$250 per child per week. Campers ages 6 & 7: \$270 per child per week. Campers ages 8 & 9: \$290 per child per week. Children may attend 1 or 2 weeks in their age group.

Scholarships are available for families in need through acquired grant funding as long as seats remain open for registration. For more information, please contact David Alexander at 973.228.8776 or dalexander@parks.essexcountynj.org.

Pre-registration and advance payment are required. Registration is accepted in-person, by mail or can be completed online at www.essexcountyparks.org/calendar. Please make checks payable to "Essex County Parks." Cash and money orders accepted. Minimum number of participants are needed. Maximum 15 children per session. All forms including "immunization record form" must be submitted for registration and participation by July 2, 2025.

Refund Policy: All cancellations include a \$50 non-refundable administrative fee. If you cancel 3 weeks prior to the first day of your child's scheduled week, a refund will be issued to you. If you cancel less than 3 weeks, you will **not** be eligible for a refund. **All cancellations must be put in writing.** This policy will prevent any chance of an error being made. Cancellations requesting a credit (less than 3 weeks' notice) due to a family emergency or illness, or other extenuating circumstances will be handled on a case-by-case basis and require documentation to substantiate the request.

Length and Setting: All camps run Monday through Friday and begin promptly at 9:30am. Sessions for children ages 4 & 5 end at 12:30pm; sessions for children ages 6 to 9 years old end at 1:30pm. Activities are held inside and outside the Environmental Center. Weather permitting, all children are expected to explore the outdoors; prepare for wet/muddy conditions. Please, for children's safety, dress for the weather, open-toe shoes and flip-flops are not allowed.

Due to an increase in allergy concerns, we are kindly asking campers to bring their own nut-free snack from home.

Campers are required to be signed in and out at the front deck each camp day by a parent/guardian. If someone other than yourself will be dropping off or picking up your child(ren), please let us know in writing prior to the day of drop-off or pick-up. Please note, a late fee of \$10.00 for every 15 minutes after a quarter past camp end time will be due at pick up. Prior to camp, each child will receive information detailing how to prepare.

The Essex County Environmental Center is a facility of the Essex County Parks System and is located in Essex County West Essex Park.

Registration Application

I would like to register for the following age-appropriate session(s) Children may sign up for one or two weeks of camp in their age range. Cost: Ages 4 & 5; \$250 per week per child. 9:30am to 12:30pm M-F Ages 6 & 7; \$270 per week per child. 9:30am to 1:30pm M-F Ages 8 & 9; \$290 per week per child. 9:30am to 1:30pm M-F	Amount enclosed: \$ Cash Check Money Order Scholarship				
☐ July 7-11 "Summertime Safari" (Ages 4 &5) ☐ July 21-25 "Native American Living" (Ages 6 & 7) ☐ August 4-8 "Lenape Living" (Ages 8 & 9)	☐ July 14-18 "Animal Senses" (Ages 4 & 5) ☐ July 28 – August 1 "Wild Art!" (Ages 6 & 7) ☐ August 11-15 "Junior Naturalist" (Ages 8 & 9)				
Participant's Name:	Birth Date:				
Parent/Guardian Name:					
Cell/Alt. Phone:					
Address:					
Medical Information: Does the participant have any limitations or Essex County Environmental Center? Please Explain and list medica	• • • • • • • • • • • • • • • • • • • •				
If your child requires medication and cannot administer it on his/her ov case of an Epi-Pen, if necessary, the Environmental Center lead camp i					
Emergency Contacts: Please provide a name and phone number for e Contact #1:	· · · · · · · · · · · · · · · · · · ·				
Contact #2:					
In case of emergency, I allow the Staff of the Essex County Environme 911 or appropriate authorities (where applicable). Parent/Guardian Signature:					
Please Print Parent/Guardian Name:					



Essex County Environmental Center

621B Eagle Rock Avenue Roseland, NJ 07068 Phone: 973.228.8776 Fax: 973.228.3793 www.essexcountynj.org



Photo Release and Consent Form

I hereby give my permission to the County of Essex, the Essex County Environmental Center, its agents or employees, and to the photographer, my free and unlimited consent and permission to use photographs of the child named below in all forms, media and manners, without restriction as to changes or alterations, for advertising, trade, promotion, exhibition, or any other lawful purposes that have been obtained from his/her participation in programs sponsored by the Essex County Environmental Center or the County of Essex.

I waive any right to inspect or approve the photographs or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising from or related to the use of the photographs. I understand that the name and contact information of the child will be withheld from public disclosure.

Name of Child:		
Name of Parent or Guardian:		
Address:		
I hereby agree to release, defend, and hold harmless the County Center, its agents, or employees, including any firm publishing and or in part, from and against any claims, damages or liability arising or program participation.	d/or distributing the finish	ned product in whole
I am signing this Release of my own free will and I have not been or employee of the County of Essex, or the Essex County Environment		oy any representative
PARENT/GUARDIAN SIGNATURE	DATE	
WITNESS (Essex County Environmental Center Staff)	DATE	



County of Essex Environmental Center WARNING, WAIVER, AND RELEASE OF LIABILITY

DATE:				
In consideration of being given permission	to participate in the:			
Nature Explorers Summer Camp 2025	(the "Event")	_on (date[s])		
supervised by <u>Essex County Environment</u>	ntal Center Staff			
I hereby waive, release and discharge any I may have, or which hereafter accrue to result of my participation in the above list accordingly, this release is intended to discontinuous, and any public agencies from participation in the Event. This waiver an	me, against the Count sted Event. I realize t scharge the County, it and against any and a	y of Essex or the Essex that accidents and inju- ts trustees, officers, em- all liability arising out of	x County Environmentaries can arise out of the ployees, commission rof or connected in any	al Center as a ne Event, and nembers, and
I acknowledge that I have been fully information, agree, and fully understand the above that the reasons for my being requested to provision, including any exception, part, prinvalid, the application to other persons of any and all other respects shall not be affective.	ve Warning, Waiver, a sign this Release hav phrase, or term, or the or circumstances shall	and Release of Liability e been fully explained to e application thereof to	y. I further acknowled to me and I understand any person or circums	lge and agree them. If any stance is held
I am signing this instrument of my own employee of the County of Essex or the Es			or coerced by any repr	resentative or
CHILD NAME If signatory is less than 18 years of age, this m	ust also be signed by a p	DATI parent or guardian.	<u>E</u>	
PARENT/GUARDIAN SIGNATURE		DAT	<u>E</u>	
WITNESS (Essex County Environmental Center	Staff)	DATI	<u> </u>	
Please forward signed copies of this waiver form to	:			
Department of Parks, Recreation & Cultural Aft Essex County Environmental Center 621-B Eagle Rock Avenue Roseland, NJ 07068	iairs			

Putting Essex County First

ESSEX COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

ESSEX COUNTY ENVIRONMENTAL HEALTH & SAFETY WAIVER

Camper Illnesses

Essex County Environmental Center reserves the right to refuse entrance to summer camp or to call you for an early pick-up if your child is exhibiting any of the symptoms or illnesses listed below. If a camper becomes ill, camp staff will notify the parent or guardian listed on the Health/Permission form followed by those listed as emergency contacts. You will be asked to pick your child up immediately. If your child is sick, please do not send them to camp until they are feeling well again without the use of fever-reducing medications.

Essex County continues to follow updates from the Centers for Disease Control and Prevention and is guided by the Essex County Department of Health in maintaining a healthy and safe environment for all campers.

- Lice (must be treated and free of lice, nits, and eggs for 24 hours before returning to camp, with a doctor's note)
- Fever of 100° F or more
- Vomiting or diarrhea
- Severe or persistent cough
- Sore throat
- Severe headache
- Pink eye
- Ringworm
- Other contagious illness (e.g. COVID-19, Coxsackie, etc.)

I hereby release and agree to the Essex County Environmental Center, its staff and the Essex County Department of Parks and Recreation harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the facility, or that may otherwise arise in any way in connection with any services received from the Essex County Environmental Center, its staff and the Essex County Department of Parks and Recreation. I understand that this release discharges the Essex County Environmental Center, its staff and the Essex County Department of Parks and Recreation from any liability or claim that I, my heirs, or any personal representatives may have against the salon with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Essex County Environmental Center, its staff and the Essex County Department of Parks and Recreation. This liability waiver and release extends to the Essex County Parks and Recreation Department with all partners and employees.

NAME:	
DATED:	
WITNESS: _	

ECEC Management - March-2024



Essex County Executive

COUNTY OF ESSEX

Department of Parks, Recreation And Cultural Affairs ESSEX COUNTY ENVIRONMENTAL CENTER 621 B EAGLE ROCK AVENUE ROSELAND, NEW JERSEY 07104 Phone 973.228.8776 Fax 973.228.3793



Daniel K. Salvante Director

Immunization History Form

Required for participation in Essex County Environmental Center Camp

- Copies of immunization forms from health-care providers or state or local government are acceptable: Please attach to this form
- Provide the month and year for each immunization. Starred (*) immunizations must be current.

Submit by mail, email or fax to:

Teri Butler, Essex County Environmental Center, 621-B Eagle Rock Avenue, Roseland, NJ 07068

P: 973-228-8776 | F: 973-228-3793 tbutler@parks.essexcountynj.org

CAMPER NAME:

Immunization	Dose 1 Month/Year	Dose 2 Month/Year	Dose 3 Month/Year	Dose 4 Month/Year	Dose 5 Month/Year	Most Recent Dose Month/Year
Diptheria, tetanus, pertussis* (DTAP) or TdaP)						
Tetanus booster* (dT) or (TdaP)						
Mumps, measles, rubella* (MMR)						
Polio* (IPV)						
Haemophilus influenza type B (HIB)						
Pneumoccoccal (PCV)						
Hepatitis B						
Hepatitis A						
Varicella (Chicken Pox) Had chicken Pox?						
Date:						
Meningococcal meningitis (MCV4)						
Tuberculosis (TB) test D	ate:	_ Negative o	or Positive:			
ame of camper's prima	ary doctor	:			_ Phone: _	
rent/Guardian Signat	ure:			Da	ite:	
f participant has not I understand and ac	•	•	, <u>-</u>	•	v	0
r <i>understand and de</i> arent/Guardian Signat	•	•	,			