

# Mines of Spain Adventure Camps

## Mines of Spain Recreation Area

July 11,12, and 13, 2016 : 9:00 AM—12:00 PM

For youth ages 7—12 in the 2015 year. Youth will enjoy a fun filled day with crafts, activities, snacks and games all centered around our natural world.

- \* Registration is due Monday before camp starts. No late registrations will be taken.
- Maximum number is 25 kids per camp. First come, first served.
- Camp will be cancelled in event of severe weather, a decision will be made 1 hour prior start of camp.
- Youth should bring water bottle, hat, sunscreen, bug spray, a complete change of clothes, shoes, socks in a backpack. LEAVE ALL ELECTRONICS AT HOME.
- Youth should wear clothing and shoes appropriate for the weather outdoors. We will be outside the entire time. No flip flops or other shoes/sandals that will fall off easily.
- Any medications needed during the time of the event should be placed in a clear plastic bag with the name of the child, administration time, and name of the medication. EpiPens and inhalers should be carried with the child at all times.
- Park Office 563-556-0620 for any other informational needs

### Registration Form

Youth Name \_\_\_\_\_

Youth Age \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Parent Contact Number \_\_\_\_\_

2nd Contact Name \_\_\_\_\_

2nd Contact Phone Number \_\_\_\_\_

Special Health Considerations (allergies, current meds, ect....)  
\_\_\_\_\_  
\_\_\_\_\_

I give Permission for my Child to attend Day camp with Mines of Spain State Recreation Area. I agree to pick up my child/children if the staff does not feel my child is abiding by the guidelines. I also understand in case of a serious injury or illness, I will be notified to make arrangements for transportation and proper medical treatment for my child. The park staff will not be responsible for transporting children in the case of a serious emergency, local medical associates will be called. I give permission for my child to have his/her picture taken, used for news releases and reports.

Please Circle one      YES      NO

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Return registration and payment to:**

**Mines of Spain State Recreation Area**

**8991 Bellevue Heights Rd Dubuque, IA 52003**

**Make Checks Payable to: Friends of**

**Mines of Spain**