



Summer is the time for kids to be outside. And there is no better place for your child to spend time in the great outdoors this summer than at Trailside Museums and Zoo!

The *Trailside Discovery* day camp will be your child's up-close and personal introduction to local wildlife and ecology. They will get their hands dirty! They will have fun! Through hands-on activities and exciting games, children will be immersed in the natural world in engaging, and age appropriate ways they are bound to enjoy.

One day during the first 3 sessions, we hike to Fort Montgomery State Historic Site to learn about local history and what life was like long ago.

So, let's take a break from the video games, television, the internet, and the air conditioning! Help your child experience summer the way it is meant to be!

**COVID-19 Note:**

We will be following COVID-19 guidelines from the NYS and local Departments of Health at the time of the program. This may require social distancing and mask wearing for staff and children.



New York State  
Parks, Recreation and  
Historic Preservation



**Trailside Museums and Zoo**  
Bear Mountain State Park  
P.O. Box 427  
Bear Mountain, NY 10911-0427

# Trailside Discovery 2022

## Environmental Education Summer Day Camp



## Trailside Museums and Zoo

Bear Mountain State Park  
P.O. Box 427  
Bear Mountain, NY 10911  
(845) 942-3861

[www.trailsidemuseumsandzoo.org](http://www.trailsidemuseumsandzoo.org)

Please call or e-mail Environmental Educator  
Chris O'Sullivan for more information.  
[chris.osullivan@parks.ny.gov](mailto:chris.osullivan@parks.ny.gov)

# Registration Information

Sessions are Monday through Thursday  
from 10:00 a.m. to 2:00 p.m.

Fee: \$100 per session

Maximum 15 children per session.

Registration closes when session fills. If  
minimum enrollment is not met for any  
session, then that session may be  
canceled.

## Session One

July 11<sup>th</sup> through 14<sup>th</sup>

Children entering first and second grades.  
(Registration deadline is June 23<sup>rd</sup>.)

## Session Two

July 18<sup>th</sup> through 21<sup>st</sup>

Children entering third and fourth grades.  
(Registration deadline is June 30<sup>th</sup>.)

## Session Three

July 25<sup>th</sup> through 28<sup>th</sup>

Children entering fifth and sixth grades.  
(Registration deadline is July 7<sup>th</sup>.)

## Session Four

August 1<sup>st</sup> through August 4<sup>th</sup>

Children entering seventh and eighth grades.  
(Registration deadline is July 14<sup>th</sup>.)

Please make checks payable / mail to:

Trailside Discovery Program

Trailside Museums & Zoo

P.O. Box 427

Bear Mountain, NY 10911



## Trailside Discovery Registration Form

(Please detach form and submit with payment.)

Session Requested: \_\_\_\_\_

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_ / \_\_\_ / \_\_\_ Grade next fall: \_\_\_\_\_

### Parent/Guardian Information

Parent/Guardian Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Workplace Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Workplace Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Brief Overview of Medical Information (separate Camp Health Form must also be completed)

Allergies?  No or  Yes. If yes, please explain \_\_\_\_\_

Does your child have an epi-pen? \_\_\_\_\_ Will it be sent with your child? \_\_\_\_\_

Please be advised that we cannot administer medication of any type to your child.

Other medical conditions that we need to be advised of? \_\_\_\_\_

Special Needs? \_\_\_\_\_

### Emergency Contact Information

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

### Releases

If parent(s) or legal guardian(s) cannot be reached in the event of an emergency, I hereby appoint the staff of Bear Mountain State Park to act in my/our behalf to administer first aid treatment and/or to authorize unexpected medical, dental or surgical care and hospitalization for my child. I give permission for my child to participate in all Trailside Discovery activities.

I give Bear Mountain State Park staff permission to release my child to the emergency contacts listed above. These people have my permission to make decisions as to the welfare and health of my child.

I give Bear Mountain State Park permission to take, publish, and reproduce photographs, slides or video of my child for publicity purposes.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_ / \_\_\_ / \_\_\_

Please Print Name of Parent/Guardian: \_\_\_\_\_