SCIENCE-BASED ADVENTURE CAMP

Learn about our wetlands with us! Campers will take field trips to exciting wetlands venues and then return to the Bayou Terrebonne Waterlife Museum to discuss their experiences and participate in other fun activities.

June 8-12, June 15-19 and June 22-26, 2020 from 8 a.m. to 4 p.m.

Ages: 9 – 12

Activities: USDA Sugarcane Research Station Tour, Chauvin Sculpture Garden Tour, Crabbing, T. Baker Smith Tour, A Cajun Man’s Swamp Tour, Greenwood Alligator Farm tour and MORE!

Drop Off: Students should be dropped off between 7:45 and 8:00 a.m. at the Bayou Terrebonne Waterlife Museum located at 7910 W. Park Ave.

Pick Up: Students should be picked up at 4:00 p.m.

Things to Bring:
1. Bag lunch and drink each day
2. Sunglasses
3. Please wear tennis shoes or other closed toe shoes – NO CROCS or FLIP-FLOPS

Sunscreen and bug repellant should be applied at home. We will let you know when these are recommended.

Electronic devices are NOT allowed at camp.

Fees: $135 per week. NO REGISTRATION FEE!!
Camp fees include ALL field trip costs. No refunds on fees.
Registration is on a first come, first served basis. Only 25 students per week will be accepted.

For more information, call 985-580-7289 or email shicks@slwdc.org.

Swamp Camp is a program of the Wetlands Discovery Center, a non-profit organization that is revolutionizing how we think, teach and learn about Louisiana’s disappearing coast.
Check all that apply:

☐ June 8-12 from 8 a.m. to 4 p.m.
☐ June 15-19 from 8 a.m. to 4 p.m.
☐ June 22-26 from 8 a.m. to 4 p.m.

If you would like to buy a summer camp T-shirt for your camper, please circle the size and send an additional $10 with your camp registration fees. Camp shirts are optional.

Child Small        Child Medium        Child Large        Adult Small        Adult Medium        Adult Large

Student’s Name_________________________________________ Age_________ 2020-2021 Grade_________

Parent/Guardian Name_____________________________________________________________

Street Address_________________________ City_____________ Zip Code_____________________

Email Address _________________________________________________________________

Cell Phone_________________________ Home Phone _______________________________

Emergency Contact name and relationship to student ________________________________

Emergency Contact number of person above______________________________

Please list any allergies, medical or physical conditions your child may have:

____________________________________________________________________________

By signing this registration form, you give your permission for our staff to seek medical attention for your child in the case of an emergency.

Parent/Guardian Signature_______________________________________________________

How did you hear about swamp camp?:  ☐ Family or Friends  ☐ Flyer from school
              ☐ Facebook  ☐ Newspaper/TV/Media

Make payments to SLWDC and mail completed registration form and payment to:
SLWDC, 7910 Park Ave., Houma, LA 70364

Please call 985-580-7289 or email shicks@slwdc.org for more information!
South Louisiana Wetlands Discovery Center

HOLD HARMLESS AND MEDIA RELEASE WAIVER

I hereby agree to release the South Louisiana Wetlands Discovery Center, its staff and instructors or any supervisors/assistants appointed by them, and the Bayou Terrebonne Waterlife Museum from the responsibility for any injuries or accidents which my child may incur while participating in any of the programs offered by the Wetlands Discovery Center. I also understand that if my child has any special medical needs (physical or mental): I will inform the camp staff in writing to be kept on file in case of an emergency.

I further agree to allow the South Louisiana Wetlands Discovery Center and any news media to use any photos or videos of my child that were taken during my child’s participation in any of the programs offered by the Wetlands Discovery Center.

Child’s Name ____________________________________________________________

Parent/Guardian’s Name ______________________________________________________________

Parent/Guardian’s Signature ___________________________ Date ______________________________