



RIVERSIDE RAMBLE



Dear Parents and Guardians:

Thank you for registering for our RREC Summer Programs. We are super excited for another six weeks of slithering fun this summer! All the programs offered will incorporate a wide variety of live animals. Children will learn about amphibians, reptiles, and invertebrates through various games, crafts, and hands-on activities. Each program will be split into two groups for age-appropriate activities: ages 6 thru 9, and ages 10 through 12. The two groups will come together to meet an animal as the final activity each day. Schedules for each program will be sent out in June.

Please fill out the following attached forms and return by June 1st. Forms can be saved as a PDF and emailed to education@riversidereptileseducationcenter.com. Forms can also be printed out and dropped off at RREC or mailed to Riverside Reptiles Education Center, Attn: Summer Programs, 132 South Road, Enfield, CT 06082.

We look forward to seeing all of your smiling faces this summer! If you have any questions or concerns, please contact our Education Department at the email address above or call (860) 207- 9335 x13.

Brian Kleinman / Owner
Riverside Reptiles Education Center
132 South Road
Enfield, CT 06082
(860) 655-7464 / brian@riversidereptileseducationcenter.com
www.riversidereptileseducationcenter.com



RIVERSIDE REPTILES EDUCATION CENTER HEALTH FORM

Name of Child: _____ DOB: _____

Address: _____ Age: _____

Check Week(s) of Program Registered for:

7/10 – 7/14 7/17 – 7/21 7/24 – 7/28 7/31 – 8/4 8/7 – 8/11 8/14 – 8/18

Parent/Guardian Name(s): _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Family Physician: _____ Phone #: _____

Allergies (food/environmental): _____

EPIPEN Required: YES NO Instructions: _____

Special Needs/Conditions: _____

Helpful Information: You know your child best! Is there anything else we should know so our educators can better serve your child while they are in our care.

If RREC staff determine that a medical emergency exists, our policy is to call 911 and then we will call the emergency contacts listed.

To the best of my knowledge, my child is in good physical health and is able to participate in all RREC activities. I understand and give my consent to the medical procedures as described above.

Parent/Guardian Signature: _____ Date: _____



RIVERSIDE REPTILES EDUCATION CENTER PICK-UP AUTHORIZATION FORM & EMERGENCY CONTACTS

READ FIRST - Persons not mentioned on this form will not be permitted to pick up your child – ***include yourself***
 Camp staff may require a photo ID at pick-up to confirm authorization.
 Persons listed on this form will be contacted in the order listed in case of any emergency.

I, _____, (Parent/Guardian) give permission
 to the following people to pick up _____ (Child's Name) from RREC.

Check Week(s) of Program Registered for:

- 7/10 – 7/14
 7/17 – 7/21
 7/24 – 7/28
 7/31 – 8/4
 8/7 – 8/11
 8/14 – 8/18

<u>YOUR</u> Full Name	Phone Number	Relationship to Child
Full Name	Phone Number	Relationship to Child
Full Name	Phone Number	Relationship to Child
Full Name	Phone Number	Relationship to Child

Photo Permission: I give permission for my child to appear in any media coverage approved by RREC: YES NO

For Office Use Only

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY

RREC ANIMAL HANDLING/TOUCHING PROTOCOLS
& RELEASE OF LIABILITY

RREC ANIMAL HANDLING/TOUCHING PROTOCOLS FOR SUMMER PROGRAMS:

Live amphibians, reptiles, and invertebrates used for RREC Summer Programs have been vetted by our Lead Animal Keeper and approved for touching/handling by the public. All animal touching/handling is supervised by trained staff.

RELEASE OF LIABILITY:

I, _____, understand that handling live amphibians, reptiles, and invertebrates has risks which may result in injury.

I understand and agree that Riverside Reptiles Education Center, LLC may not be held liable or responsible in any way for any injury, as a result of my child's participation in touching and/or handling amphibians, reptiles, and invertebrates.

Parent/Guardian Signature (on behalf of applicant)

Date