

(Keep this letter for your records)

Erie Zoo Summer 2010

Dear Parents/Guardians:

Thank you for registering your child in the Summer Weeklong ZooVentures at the Erie Zoo. We want to make your child's week at ZooVentures as fun and educational as possible. To help the week run smoothly, we have instituted some policies and need some support from you, the parents. Please read the information in this letter carefully and feel free to call Kim Bowes, 864-4091 ext. 247 with any questions or comments. You can leave a voice-mail message if I am not available.

Drop-off and Pick-up: Drop-off and pick-up will take place at the **West 38th Street entrance to the Activity Center**. This is the brown door next to the foot of the stairs to the office. Children must be brought to the classroom by a responsible adult who will sign the child in and update any needed information on the Child's Emergency Form. The adult dropping the child off will be given a code word for that child. Each day the code word will change. This code word must be told to the staff person manning the door when the child is picked up. The person who will be picking the child up must be indicated on the Child's Emergency Form and must sign the child out. Additionally, our staff reserves the right to request photo identification for anyone picking up a child. Please do not enter the classroom before the end of the session unless you have made prior arrangements for early pick-up. **Late pick-ups will be charged \$5.00 fee per child for each 15-minute period past the camp ending time.**

Snacks: Water is available throughout the session and about midway through each ZooVenture day we will provide a snack and beverage. Any food restrictions or allergies should be indicated on the child's Emergency Form on the very first day of ZooVentures. If you have a child with food restrictions of major importance (life threatening allergies, diabetes, religious restrictions or behavior-affecting food sensitivities, etc.), we appreciate advanced notice so that we can have alternative snacks available from day one. Those attending full-day sessions should bring a lunch (a refrigerator is available) or money for lunch (Wildlife Action Team only).

Dress: ZooVentures are fun and fun can be messy. Please send your child in older clothes so we can have a great time without worry. Please do not allow your child to wear open-toed shoes, flip-flops or clogs. This type of footwear is not safe for the activities we have planned. The ZooVentures T-shirt your child receives on the first day should be worn daily. This helps us to keep our children together. Dress for the weather and outdoor fun each day. Use sunscreen before coming to the zoo.

Special Concerns: If your child needs special attention due to a behavioral, emotional, physical or educational need, we will do our best to accommodate your child. Your advice and suggestions are most welcome and we suggest a call to Kim Bowes prior to the camp week. We welcome Therapeutic Support Staff or Aides if your child has one.

Camp Staffing: Each camp group will be lead by a minimum of two adult paid staff. Our staff is supplemented by teen volunteers from our EdZooCrew program, who attend a12-hour training in preparation to volunteer. The teens act as extra hands, eyes, ears and helpers for the kids. If you have a question or concern, we ask that you direct it to the adult staff person working with your child. If you need further assistance you may contact Kim Bowes.

Please call us with any questions or concerns. **Please complete and return the Emergency Form for each child attending as soon as possible.**

Thank you and we hope your child enjoys their week at ZooVentures!

See You at the Zoo!
Kim Bowes, Education Specialist
864-4091 ext. 247
P.O. Box 3268
Erie, PA 16508

Erie ZooVentures Emergency Information

To be completed by parent/ guardian and returned to Erie Zoo by June 1, 2010.

Name of ZooVenturer _____ T-Shirt Size _____

Session(s): Your child will attend: _____

Address: _____

City _____ State: _____ Zip Code: _____

Home Phone _____ Birth Date: _____

Parent/Guardian Name(s) _____

(Please circle the phone number you can best be reached at from 9:00 a.m. to 4:00 p.m.)

Work Phone _____ Cell Phone _____

Work Phone _____ Cell Phone _____

If I cannot be reached in the event of an emergency, the following person/people are authorized to act on my behalf: _____

Phone _____ Relationship to ZooVenturer: _____

Allergies and usual reaction: _____

Other medical, educational, social or behavioral information program staff should be aware of:

The following people have permission to pick up my child from program:

_____ Phone Number: _____

_____ Phone number: _____

Signature of Parent/Guardian

Date _____

Please complete and return to the Erie Zoo Education Department as soon as possible:

Erie Zoo
Education Department
P.O. Box 3268
Erie, PA 16508