

# *Boyd Hill Nature Preserve Scholarship Nomination Information*

Dear Teacher/Nominator,

The Friends of Boyd Hill Nature Preserve are pleased to offer summer camp scholarships for students of low income families. We would like you to recommend children who have a special interest in and would like to experience hands-on activities with nature.

Scholarships are available for the following camps:

Young Naturalist Camp – Ages 5 - 6

Nature Adventure Camp – Ages 7 - 13

Raptor Camp – Ages 8 - 12

In order to be eligible for a scholarship, the nominee must meet the following criteria:

- Entering grades K - 8
- Qualify for the free or reduced lunch program
- **Be a permanent resident of St. Petersburg**
- **Have a current ADVANTAGE membership (FREE)**

To nominate a child, please complete the following steps:

- Nominator and the student complete the nomination form.
- Parent or guardian completes the camp application form. Please choose a camp according to the child's age.
- The nominator should return the nomination form, camp application form, and waiver to:  
Camp Scholarship Committee  
c/o Boyd Hill Nature Preserve  
1101 Country Club Way South  
St Petersburg, FL 33705

***Nomination forms and camp applications are due by Saturday, March 30, 2019.***

The parent or guardian will be notified of acceptance and the date your scholarship is awarded by April 15, 2019.

These scholarships are made possible by the Friends of Boyd Hill Nature Preserve, Inc. through generous contributions from local businesses, organizations, and private donors. Donations for the camp scholarships are still being accepted and can be mailed to the same address listed above. Checks should be made payable to The Friends of Boyd Hill Nature Preserve.

Thank you for your time and interest. Should you need additional information, feel free to contact Boyd Hill Nature Preserve at (727) 893-7326 or [bhpreserve@stpete.org](mailto:bhpreserve@stpete.org).



# *Boyd Hill Nature Preserve's Summer Camp Scholarship Nomination Form*

To be eligible, the nominee must meet all qualifying criteria (see nomination letter). In addition, all forms must be filled out completely and returned to the scholarship committee no later than **Saturday, March 30, 2019.**

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Entering Grade \_\_\_\_\_ School \_\_\_\_\_

Parent or Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Nominator's Name \_\_\_\_\_

Relationship \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**Nominator's comments** on why this student should be awarded a scholarship to  
Boyd Hill Nature Preserve's Summer Camp.

Feel free to attach additional pages.

**I hereby certify that this child qualifies for the free or reduced lunch program.**

Nominator's Signature \_\_\_\_\_.

*Boyd Hill Nature Preserve's Summer Camp  
Scholarship Nomination Form - page 2*

**Student's comments** - Tell us why you would like to attend  
Boyd Hill Nature Preserve's Summer Camp

# *Summer Camp Registration 2019*

## *Boyd Hill Nature Preserve*

**Please print one application per child/per camp. You may duplicate as needed.**

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Work Phone \_\_\_\_\_

Email address \_\_\_\_\_ **ADVANTAGE card #** \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Second Contact (do not list parent, guardian or emergency contact in this area - relation can be friend, aunt, uncle, etc.)

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone Number \_\_\_\_\_

Allergies or any medication taken by child \_\_\_\_\_

(Be sure to complete the medication form if any type of medication needs to be dispensed.)

Who will be dropping off/picking up your child? \_\_\_\_\_

**Please designate your first and second choice for camp. One camp per form.**

Camp times are 9:00 a.m. – 4:00 p.m. Monday-Friday. Extended care (8:00 a.m. - 5:00 p.m.) is available for \$25.

**(Place #1 or #2 next to the appropriate date)**

**Young Naturalist Camp (Age 5-6)**

**Nature Adventure Camp (Age 7-13)**

**Raptor Camp (Age 8-12)**

- June 3-7
- June 10-14
- June 17-21
- June 24-28
- July 1-5 (no camp on July 4)
- July 8-12
- July 15-19
- July 22-26

- June 3-7
- June 10-14
- June 17-21
- June 24-28
- July 1-5 (no camp on July 4)
- July 8-12
- July 15-19
- July 22-26
- July 29-August 2
- August 5-9

- July 29-Aug 2
- Aug 5-9

The child and the parent and/or guardian hereby acknowledge that the above named child may not attend this program unless the child and the parent and/or guardian agree to and sign the City of St. Petersburg's Release, Waiver of Claims, Hold Harmless and Indemnity Agreement, and that upon its execution, such document shall be incorporated with and shall become a part of this registration application.

Parent/Guardian  
Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

**Staff Use Only**

Date Processed \_\_\_\_\_ Staff initials \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_ Charge \_\_\_\_\_

**MINOR**

Female  Male



Resident  Non-Resident

Official Use Only  
Card# \_\_\_\_\_

Aquatics - Official Use Only  
AFDC# \_\_\_\_\_

**CITY OF ST. PETERSBURG  
RESIDENT/NON-RESIDENT PROGRAM REGISTRATION APPLICATION**

LAST NAME (PROGRAM PARTICIPANT) FIRST NAME MIDDLE INITIAL PRIMARY PHONE

ADDRESS CITY ZIP CODE

SCHOOL CURRENT GRADE BIRTH DATE



MEDICAL ALERT (IF APPLICABLE)

SPECIAL NEEDS (I.E. SIGN LANGUAGE, INTERPRETERS, TAPE/BRAILLE MATERIALS, READERS, ACCESSIBLE TRANSPORTATION, ETC.)

PERSON TO NOTIFY IN CASE OF EMERGENCY PRIMARY PHONE SECONDARY PHONE

**PRIMARY NATURAL GUARDIAN OR LEGAL GUARDIAN**

LAST NAME FIRST NAME MIDDLE INITIAL PRIMARY PHONE

ADDRESS CITY ZIP CODE

SECONDARY PHONE OTHER PHONE E-MAIL ADDRESS BIRTHDATE

**SECONDARY NATURAL GUARDIAN OR LEGAL GUARDIAN**

LAST NAME FIRST NAME MIDDLE INITIAL PRIMARY PHONE

ADDRESS CITY ZIP CODE

SECONDARY PHONE OTHER PHONE E-MAIL ADDRESS BIRTHDATE

**RELEASE, WAIVER OF CLAIMS, HOLD HARMLESS, AND INDEMNITY AGREEMENT  
FOR MINOR TO ATTEND CITY OF ST. PETERSBURG PROGRAM**

In consideration of the attendance of \_\_\_\_\_ (hereinafter referred to as the "Minor") in any and all programs offered by the City of St. Petersburg (hereinafter referred to as the "Program"), I/We, \_\_\_\_\_, natural guardian(s) (as defined in F.S. § 744.301) or legal guardian(s) of the Minor and the Minor hereby agree as follows:

1. The Minor will be at all times required to comply with all rules and regulations of the Program and of the City of St. Petersburg (hereinafter referred to as the "City") and I accept on my behalf and on behalf of the Minor full responsibility for informing myself and the Minor of any changes to those rules and regulations.
2. The consideration for this Release, Waiver of Claims, Hold Harmless and Indemnity Agreement (hereinafter referred to as the "Agreement") is the attendance of the Minor in the Program, which I agree is a commonplace child-oriented community supported activity, and the City's waiver of any requirement that I or the Minor carry self-funded liability insurance prior to the Minor being allowed to attend the Program. I acknowledge that, absent the execution of this Agreement, the City would not have offered me or the Minor the ability for the Minor to attend the Program because of unacceptable exposure to liability claims.
3. I hereby agree, personally and on behalf of the Minor, that the Minor's attendance in the Program is only granted by the City because of its understanding that in the event of injury to myself or the Minor, or damage or loss of property, that any insurance policy held by myself or for the Minor which covers such injury or loss shall be the primary source of any recovery.
4. **I, personally and on behalf of my heirs, personal representatives, executors and assigns, and on behalf of the Minor and the Minor's heirs, personal representatives, executors and assigns, hereby release, waive, discharge and covenant not to sue the City, its City Council, Mayor, any City department or subdivision, its employees, servants, representatives, officers, agents, volunteers, or successors and assigns, (hereinafter collectively referred to as "Releasees"), for any claims, demands, actions, causes of action, judgments, costs, expenses, court costs, attorneys' fees or other damages or liability, of any nature whatsoever, including but not limited to personal injury, property damage or wrongful death, whether caused by the sole, contributory or gross negligence of Releasees, or otherwise, or whether arising out of any defect, or presence or absence of any condition in or on any City property, premises, or right of way or in any City vehicle, which against Releasees I or the Minor ever had, now have, or can, shall, or may ever have, upon or by reason of, directly or indirectly, relating to or arising from, the Minor's attendance in the Program.**
5. I hereby personally, and on behalf of the Minor, voluntarily and expressly assume full responsibility for any risk of bodily injury, death, and property damage due to the negligence, whether sole, contributory or gross negligence, of any or all Releasees while the Minor attends the Program.
6. I hereby personally, and on behalf of the Minor, agree to defend at my expense, pay on behalf of, indemnify and save and hold harmless Releasees from and against any and all claims, demands, liens, liabilities, judgments, losses and damages (whether or not a lawsuit is filed) including but not limited to costs, expenses and attorneys' fees at trial and on appeal for damage to property or bodily or personal injuries, including death at any

time resulting therefrom, sustained by any person or persons, which damage or injuries are alleged or claimed to have arisen out of or in connection with, in whole or in part, directly or indirectly, the Minor's attendance in the Program, including, without limitation, damage or injuries alleged or claimed to have arisen out of or in connection with the Minor's negligence, whether sole, contributory or gross, whether or not the damage or injuries are alleged or claimed to have arisen in part due to any negligence of the Releasees or other third party, the Minor's or my intentional wrongful acts or omissions, or my failure or the Minor's failure to comply with applicable laws, rules, regulations, standards and ordinances or failure to use any City-provided equipment in accordance with its use guidelines.

7. I am responsible for any and all damages that I or the Minor willfully, accidentally, or negligently inflict upon Releasees or third parties as a result of the Minor attending the Program.

8. I expressly agree, personally and on behalf of the Minor, that this Agreement is intended to be as broad and inclusive as is permitted by the laws of the State of Florida, and if any portion of this Agreement is held to be invalid or unenforceable for any reason, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

9. I have read and voluntarily sign this Agreement, and further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made regarding the subject matter herein.

10. I understand that I am encouraged to seek the advice of an attorney prior to signing this Agreement, and that I have been given the opportunity to seek such counsel.

11. I hereby give the City permission to take and use interviews, photographs, or videos of myself and/or the Minor for promotional and educational reasons. This publicity may include publication or dissemination of the interviews, photographs, or videos in publications, posters, brochures, newsletters, on the City website, social media, radio stations, television channels, or other special district events or forms of publicity for the City. I understand there is no monetary compensation for use of such interviews, photographs, or videos.

12. I am the parent(s) or legal guardian(s) of the Minor, and I am fully competent and legally able to execute this Agreement on behalf of the Minor with the intent to bind both myself and the Minor by the terms hereof.

13. **INDEMNITY AGREEMENT.** I hereby personally agree to **indemnify**, defend at my own expense and pay on behalf of, the Releasees from and against any and all claims, demands, liens, liabilities, judgments, losses and damages (whether or not a lawsuit is filed) including but not limited to costs, expenses and attorneys' fees at trial and on appeal brought for, by or on behalf of the Minor against the Releasees, arising out of or in connection with, in whole or in part, directly or indirectly, the Minor's attendance in the Program.

14. **NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN(S).** READ THIS AGREEMENT COMPLETELY AND CAREFULLY. I AM AGREEING TO LET MY MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. I AM AGREEING THAT, EVEN IF THE CITY USES REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE MY CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS AGREEMENT, I AM GIVING UP MY CHILD'S RIGHT AND MY RIGHT TO RECOVER FROM RELEASEES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO MY CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. I HAVE THE RIGHT TO REFUSE TO SIGN THIS AGREEMENT, AND THE CITY HAS THE RIGHT TO REFUSE TO LET MY CHILD PARTICIPATE IF I DO NOT SIGN THIS AGREEMENT.

**THIS RELEASE, WAIVER, HOLD HARMLESS AND INDEMNITY FORM MUST BE SIGNED BEFORE THE MINOR MAY ATTEND THE PROGRAM.**

**BY SIGNING THIS AGREEMENT YOU ARE WAIVING OR RELEASING VALUABLE LEGAL RIGHTS. YOU MUST READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT.**

IN WITNESS WHEREOF, the undersigned has caused this Agreement to be executed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

BY: PARENT OR LEGAL GUARDIAN OF MINOR (with legal authority to execute this Agreement on behalf of the Minor if the participant is under 18.)

(Sign) \_\_\_\_\_

(Print) \_\_\_\_\_

(Date) \_\_\_\_\_

AND

BY: MINOR (any participant under 18 years of age).

(Sign) \_\_\_\_\_

(Print) \_\_\_\_\_

(Date) \_\_\_\_\_

**THIS RELEASE, WAIVER OF CLAIMS, HOLD HARMLESS, AND INDEMNITY AGREEMENT SHALL NOT BE MODIFIED, MARKED THROUGH OR CONDITIONED BY ANY ATTACHMENT OR WRITTEN COMMENTS. ANY MODIFICATIONS, MARKINGS, ATTACHMENTS, OR WRITTEN COMMENTS SHALL BE VOID AND OF NO EFFECT.**