Delaware-Otsego Audubon Society

2017 Summer Camp



at the
Franklin
Mountain
Sanctuary
Oneonta, NY

The 2017 John G. New Audubon Day Camp is Now Accepting Registrations.

The program provides fun, hands-on experiences in natural science and environmental education through field investigations, crafts and games. Campers will explore a variety of habitats and learn about creatures that live there. **There is limited space in this program, so registrations will be accepted on a first come, first served basis.** The summer day camp programs are conducted at the DOAS Franklin Mountain Sanctuary in Oneonta, NY. This year, we have two sessions available, one for younger students, one for older. Space is limited and spots will be filled in the order of receipt of registration. If all spots are filled, we will maintain a waiting list in case there are changes in registrations. Refunds for cancellation will not be issued after 6/16/17. For additional information, please contact Susan O'Handley, Education Chair at 607-643-5680.

This daily program runs Monday through Thursday from 9:30am to 3pm during each of the following:

Session 1: July 10, 11, 12, 13: For children entering grades 3 and 4. Session 2: July 31, August 1, 2, 3: For children entering grades 5 and 6.

Fees: \$120/DOAS member \$130/other (Family membership: \$20/yr; \$30/2 yrs) Full & partial scholarships *may be* available. Contact Susan for information.

Complete the form below and mail with full payment by check to: DOAS, PO Box 544, Oneonta, NY 13820. Please note 2017 Camp Session #___ in the memo along with child name(s).

Online registration is also available at http://doas.us/2017-doas-summer-camp-registration/. Confirmations and complete packets will be

emailed in June.



John G. New Audubon Day Camp 2017: Please complete the form below (one form/child).

Child's Full Name (first and last):		Child's Age:
Session 1: July 10 - 13 (grades 3&4)	Session 2:	Jul 31, Aug 1 - 3 (grades 5&6)
Parents Names (first names only if same last nam	e):	
Best Phone Number:	Parent Email:	
Street Address:	City:	Zip:
Other Phone (Mom):	Other Phone (Dad):
Emergency Contact (Name and Phone):		
Relationship:Special Considerations: Please indicate any illne	sses, allergies, condition	ons, etc. on the back of this form.