

ATTENTION MIDDLE BASS KIDS!!!
Middle Bass Island Nature Camp
Sponsored by the Middle Bass Island School
Board

President Arthur Wolf, Vice President Robin Glauser, Members Kathryn Schneider,
Eddie Sheller, Shanny O'Rourke, Clerk John Schneider
Instructors from the Lake Erie Islands Chapter of the Black Swamp Conservancy

A Camp For Children to Develop Knowledge and Appreciation of Nature on Middle Bass Island through Hands on Activities and Nature Crafts. Open to Middle Bass Residents and Family. Advance Registration is Required.

Dates-August 9, 10, 11, 2004

Ages-6-11. Open to Middle Bass Residents and Family. Limit 20 children.

Monday August 9, 2004 10:00-2:00PM

Meet at Middle Bass Airstrip

Swamp Stomp-Kuehnle State Wildlife Area

Sack Lunch

Snake Search

Tuesday August 10, 2004 10:00-2:00PM

Meet at the Middle Bass Town Hall

Creepy Crawlers

Sack Lunch

Wild Edibles

Wednesday August 11, 2004 10:00-2:00PM

Meet at the Middle Bass Yacht Club

Take a Kid Fishing!

Fire Safety and Cookout

Photo Journal to Take Home

Please send your child with the following items each day at camp

- Hat
- Sun Block
- Change of clothes or jacket if necessary
- Insect Repellant
- Comfortable shoes (that can get wet)

To Register Your Child, Please fill out the attached Registration Form and Permission Form and mail it to:

Lake Erie Islands Chapter of the Black Swamp Conservancy
Camp Registrar-Carol Richardson
P. O. Box 59
Middle Bass, Ohio 43446

Registration Deadline is August 1, 2004. Any questions, please call 285-5811. You will receive a confirmation letter and final schedule for camp upon receipt of registration.

Registration Form for Middle Bass Nature Camp

Child's Name _____ Age _____

Address _____

Phone _____

Emergency Contact _____

Family Doctor _____

Does your child have any allergies or require any special medication?

Permission Form

My son/daughter _____ has my permission to participate fully in the Middle Bass Nature Camp sponsored by the Middle Bass Island School Board to be held August 9, 10, and 11, 2004. I understand that all reasonable care will be taken for me child's safety but in the event of an accident I assume responsibility for all medical expenses. I authorize emergency medical treatment if none of the above named emergency contact persons can be reached at the time of an emergency.

Signature of Parent/Guardian

Date _____