



# Night Owl Overnight Camp Registration Form

Please send your completed registration form and payment to:  
9452 Telephone Rd. #280 OR info@zootopia.org  
Ventura, CA 93004

Confirmations are sent out by email. If you do not receive a confirmation within one week of submitting your registration, please contact the Program Director at 805-479-2729.

Camp Date \_\_\_\_\_

Name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Children attending:

Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_  
Name \_\_\_\_\_ Age \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

### Adults attending (please list everyone in your party)

\_\_\_\_\_  
\_\_\_\_\_

### Emergency Contact Information

 Please list an individual that will not be attending the overnight camp to contact in case of an emergency

Name \_\_\_\_\_ Relation \_\_\_\_\_  
Day Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### Medical Information

 Does anyone in your party have severe allergies, medical or behavioral conditions? (for example: ADHD, Autism, diabetes, hypertension, etc, etc)

\_\_\_\_\_  
\_\_\_\_\_

### Payment Information

 (Program fees must be paid in full to complete your registration)

# of attending \_\_\_\_\_ X \$45 = \$ \_\_\_\_\_ Total \$ \_\_\_\_\_

I have enclosed a check! Please make checks payable to: Zootopia

Please charge my card!

Name on card \_\_\_\_\_ Number \_\_\_\_\_

Billing address for card \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

CCV (3 numbers on the back) \_\_\_\_\_ Expiration \_\_\_\_\_

### Cancellation Policy

1. For private Night Owl programs, a \$100 non-refundable deposit is required to secure your booking. The remaining balance is due 14 days prior to the camp date.

2. No refunds will be given if a group/party withdraws from camp for any reason once the program has started.



3. No refunds will be given if a group/party is dismissed from camp.
4. Schedule changes, moving your group/party from one program to another, will only be granted on a program availability basis.

### **Agreement**

I recognize and acknowledge that during the Overnight Camp program I am responsible for the safety and medical care of all members in my group. This includes but is not limited to administration of any medication required by any member of my group and basic first aid needs. In case of medical emergency, and in my absence, I hereby grant permission to Zootopia and its staff to seek medical attention for any member of my group from either our stated physician OR a physician selected by the camp director or their representative to order xray, routine tests, and treatment. In the event that I cannot be reached in an emergency, I give permission to the physician selected to hospitalize, secure treatment for, and to order injections or any member of my group or for me.

Zootopia and related organizations may use pictures of my children, my group, and me in their promotional materials, including both printed and electronic media.

In consideration of the named camper's being permitted to participate in Zootopia camp activities, we, the parents or legal guardians of the camper, on our own behalf and on behalf of the camper (hereinafter "Releasers"), hereby acknowledge and agree that we understand and fully appreciate the risk of injury involved to the camper and myself in participating in camp activities. The Releasers nevertheless hereby release, waive, and discharge Zootopia, its officers, employees, agents, counselors, representatives, and premises owners and operators where camp activities take place (hereinafter "Releasees") from all liability to the Releasers for any loss or damage, and any claims or demands on account of injury to myself and the campers in my group caused in any way by the negligence of the Releasees or otherwise while myself and the campers' are participating in any way in any of Zootopia's camp activities. The Releasers hereby agree to indemnify and hold harmless the Releasees, and each of them, for any loss, liability, damage, or costs and expenses including attorneys' fees they incur due to my group's participation and mine. It is the express intention of the Releasers to exempt and relieve the Releasees from any liability for personal injury, property damage, or wrongful death caused by the Releasee's own negligence related in any way to the participation in Zootopia camp activities. The undersigned acknowledges that he or she is fully aware of the legal consequences of signing this application containing the express waiver and release of liability.

### **Camp Standards**

We are committed to providing a fun, exciting and educational program. However, we are also committed to safety. To assist us in delivering a safe program for the animals and public, please read and sign that you have gone over this with your group/party members and understand the following:

1. No violent or dangerous behavior will be tolerated. We reserve the right to suspend or expel any camper who violates this rule without refund of program fees.
2. Following instructions during our program is imperative given the hands-on nature of our animal presentations. Non-compliance to these instructions may be deemed a safety hazard to you, our animals and/or our staff. If the non-compliance is found to be a safety hazard you will be dismissed from the program with no refund of program fees.
3. Campers are responsible for and expected to clean up after themselves in all eating areas and their campsite during our programs.
4. Abusive or foul language, threats of violence or bodily harm towards anyone, is cause for immediate dismissal from any Zootopia program without refund of program fees.

*I have read and agree to the Cancellation Policy, Agreement and Camp Standards listed above.*

Signature \_\_\_\_\_ Date \_\_\_\_\_