



Seasons in the Sun Farm  
13006 Jenkins Pit RD Spanish Fort, AL 36527  
251.423.4391  
[seasonsinthesunfarms@gmail.com](mailto:seasonsinthesunfarms@gmail.com)  
[www.seasonsinthesun.biz](http://www.seasonsinthesun.biz)

## Seasons in the Sun's Children's Summer Day Camp

*Thank you for your interest in registering for our unique educational farm program!*

### SUMMER CAMP DETAILS

Seasons in the Sun Summer Camp sessions are enjoyed from 9:00 am until 3:30 pm, Monday through Friday, include a lunch and a snack. The camp is open to 6-17 year olds. Session 1 will be June 9-13. Session 2 will be June 16-20.

Throughout the week your child will experience modern homestead farming. Our goal is to bring back old farming traditions and connect with what our world provides for us today. Seasons in the Sun Farm incorporate sustainability practices into everyday life on the farm: hydroponic farming, organic farming, and raising livestock. We believe these practices directly influence our impact on the environment, both on the farm and off. Your child will get "hands on" experience by planting, interacting with the growing cycle, and taking care of animals. How cool is that?! Seasons in the Sun Farm also has many farm animals we use to educate children about each animal: needs, care, and respect. These animals teach valuable lessons that can be applied to many facets of life.

Creating awareness of sustainable and responsible practices through homestead farming is a step towards our children changing the future of our society. Our goal isn't to encourage your kids to be future farmers, but to share with them the joy and fulfillment of working hard, respecting the environment around them, and reaping the benefits. Your child will learn teamwork, patience, and responsibility through Seasons in the Sun Farm's homestead farm life: all skills that can be applied to life off the farm. Enrich your child and give an experience like no other!

#### Activities:

- Planting and Tending Crops
  - Field farming, container gardening, hydroponics, aquaponics
- Nature Hikes
- Care for Farm Animals
  - Egg Collecting
  - Grooming
  - Learning about a Variety of Farm Animals (pigs, chickens, bunnies, turkeys, ducks, peacocks, guineas, birds
- (various) )
- Farm Crafts
- Learning Farm Life
- Learning about Insects
- Making Homemade Ice Cream
- Making Jam
- Making All Natural Soaps and Bath & Body Products
- Farm Games

Tuition is \$265 per child for a full day. Half-day positions are from 9 am until 12:30 pm, and tuition is \$145 per child. Any family with more than one child attending the summer camp the cost will be \$205 for a full day position and \$115 for a half day position for each additional child. Upon review and acceptance of your child's application, we will email you to confirm your child's registration. Spots are filled on a first come first served basis. Payment can be done with a credit card or a check. Please mail checks to the address listed on the top of this application. **There will be a \$1 per minute late pick up fee.**

Children attending the Seasons in the Sun Farm summer camp are expected and required to follow our farm rules. They will be introduced to these rules on the first day of camp. Rules include (but are not limited to) not chasing our animals, not picking up our animals, being kind to other, following directions, etc. Children who do not follow the farm rules will not be allowed to return to the camp for the week. Refunds will not be issued.

The last day of camp will include a family cook out beginning at 3:00 pm.

# Summer Camp Application

## GENERAL INFORMATION

Name: \_\_\_\_\_  
(Last) (First) (Middle) (Preferred)

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

E-mail: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_ Alt.Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Alt.Phone: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Physician Phone: \_\_\_\_\_

Age: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

Boy  Girl

## HEALTH QUESTIONARE

For our benefit, and your child's safety, please answer the following questions:

- Up to date on immunizations?  Yes  No
- Drug sensitivities?  Yes  No Explain possible reaction: \_\_\_\_\_
- Allergies to insect stings?  Yes  No Explain severity: \_\_\_\_\_
- Has your child had any serious illness/injury/surgery in the past year?  Yes  No

If yes, please explain: \_\_\_\_\_

- Does your child have any allergies or special dietary needs \*(Nuts, Wheat, Hay Fever, etc.)  Yes  No

If yes, please explain: \_\_\_\_\_

\*Please note: We welcome all children, but due to the nature of the summer program, it may be difficult to accommodate those with severe nut and wheat allergies.

- Please list any medications that your child is currently taking: \_\_\_\_\_

- Any information concerning your child that we need to know: \_\_\_\_\_

\_\_\_\_\_

**WAIVER FOR EMERGENCY TREATMENT**

In case of emergency, if parents/guardians are not available, I hereby authorize Seasons in the Sun Farm to have my child, \_\_\_\_\_, treated by a physician and/or admitted to the emergency room of a hospital. BY SIGNING HERE ON THIS WAIVER FOR EMERGENCY TREATMENT, I ALSO CERTIFY THAT I HAVE BEEN FORTHRIGHT IN INFORMING SEASONS IN THE SUN FARM AND ITS STAFF OF ANY ALLERGIES, ILLNESSES, FOOD SENSITIVITIES OR IMPORTANT HEALTH/WELL-BEING ISSUES MY ENROLLED CHILD HAS.

DO WE HAVE YOUR PERMISSION AND CONSENT TO GIVE YOUR CHILD THE FOLLOWING MEDICATIONS IN CASE OF AN EMERGENCY? Benadryl:  Yes  No | Tylenol:  Yes  No | Neosporin:  Yes  No

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

**HEALTH INSURANCE**

• Health Insurance Carrier, if any: \_\_\_\_\_

• Policy Number: \_\_\_\_\_

• Insurance Phone Number: \_\_\_\_\_

**OTHER INFORMATION**

We have photography and videography taken during our events at the farm for current and future publications (including, but not limited to brochures, our website, facebook). If you have concerns of your child being featured in our farm media, please contact D’Lee Reeves Please initial you have read the above: \_\_\_\_\_

FOR OFFICE USE ONLY			
DESCRIPTION	DATE RECEIVED	TYPE	DATE ENTERED
Received Application			
Conformation Sent			
Tuition Received			

**ACKNOWLEDGEMENT OF RISK  
ACCEPTANCE OF RESPONSIBILITY & RELEASE OF LIABILITY**

I, the undersigned, hereby acknowledge that I have voluntarily applied to engage in an activity of dealing with animals, being outdoors, and farming with Seasons in the Sun Farm.

I understand that these activities involve numerous inherent risks of injury that are an integral part of such an activity. I assume full responsibility for all such risks, including loss of control, collisions, and obstacles whether they are obvious or not obvious.

I and/or my family further understand that an animal, irrespective of its training and usual past behavior and characteristics, may act or react unexpectedly or unpredictably at times, and I also assume such risks.

I understand that I may encounter variations in terrain, which may result in injury or damages. I acknowledge that these are my responsibility, and I assume the risk for these hazards, including breaks, growth, debris, rocks, cliffs, and other hazardous surface or subsurface conditions and obstacles, whether they are obvious or not obvious, manmade or natural.

I understand that animals are unpredictable and that the risk of injury is inherent to the activity. I understand that animals may bite, scratch, kick, or jump up on people in this activity. I agree to assume all risks of injury or death caused by interacting with the animals, whatever the cause, except as provided by law.

As consideration for being permitted to engage in all camp activities, I do hereby waive any claim, and release all of the animal owners, officers, member, affiliated organizations, landowners, agents, employees, and/or volunteers for any injury or death caused by or resulting from my participation in these activities.

This contract shall be legally binding upon my heirs, my estate, my assigns, my legal guardians, my personal representatives, and myself. I have carefully read this agreement and fully understand the contents. I am aware that I am releasing certain legal rights that I otherwise may have, and I enter into this contract on behalf of myself and/or my family of my own free will.

**THIS IS A RELEASE OF LIABILITY. DO NOT SIGN OR INITIAL THIS RELEASE IF YOU DO NOT UNDERSTAND OR DO NOT AGREE WITH ITS TERMS.**

---

PRINT: Child's Name

PRINT: Responsible Guardian

Signature

Date