



# Quogue Wildlife Refuge-Summer Field Ecology Program 2026 Application

For Children and Teens in Grades 2<sup>nd</sup> – 11<sup>th</sup>

This summer marks the 57<sup>th</sup> Anniversary of the Summer Ecology Program. With immersive exploration, children will learn some of nature's secrets, and how important the natural world is. Your child will complete this program with more knowledge of and greater respect for the natural world. It is our hope that these lessons and memories will be carried with your children throughout their lives. Children can register for one session per summer.

Visit [QuogueWildlifeRefuge.org](http://QuogueWildlifeRefuge.org) for more information on scholarships and the assistant counselor volunteer program

<b>Summer Ecology Program</b> (Children entering 2 <sup>nd</sup> to 6 <sup>th</sup> grades) Each day of this program will be an immersive adventure into the Refuge's incredible biodiversity. Campers will explore unique spots like Chocolate Pudding Pond, the magic of Fairy Dell, and the secret Mud Trail. On Thursday, we'll head to Dune Road for an exciting seining experience on Shinnecock Bay! The program runs Monday through Friday, from 9am to 12pm. Please note that parents are responsible for transporting children to and from Dune Road on Thursday. More information will be provided upon registration regarding what to bring, and drop-off and pick-up information. <b>Members \$325 wk   Non-members \$350 wk</b>	<b>Young Explorers Program</b> (entering grades 7 <sup>th</sup> & 8 <sup>th</sup> ) In this immersive experience we will take campers to explore the biodiversity of the Refuge (Mon; 9am to 12pm) and learn about the unique habitats on Long Island with an offsite trip to Sunken Forest, Fire Island (Tues; 9am to 2:30pm) and a kayak adventure (Wed; 9am to 2pm). On Thursday, we'll discover the secret mud trail at the Refuge (9am to 12pm), then explore the trails at night on Thursday evening (7pm to 10pm). Parents must transport their campers to and from offsite locations on Tues & Wed. Further information on offsite trips will be emailed to you after your registration. <b>Members \$400 wk   Non-Members \$435 wk</b>	<b>Explorers Program</b> (entering grades 9 <sup>th</sup> , 10 <sup>th</sup> & 11 <sup>th</sup> ) Join us for a week of exploration! In this immersive experience we will take campers to explore the biodiversity of the Refuge (Mon; 9am to 12pm) and learn about the unique habitats on Long Island with an offsite trip to Sunken Forest, Fire Island (Tues; 9am to 2:30pm) and a kayak adventure (Wed; 9am to 2pm). On Thursday, we'll discover the secret mud trail at the Refuge (9am to 12pm), then explore the trails at night on Thursday evening and stay for a camp-over (7pm Thurs to 9am Fri). Parents must transport their campers to and from offsite locations on Tues & Wed. Further information will be emailed to you. <b>Members \$450 wk   Non-Members \$485 wk</b>
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A separate payment & application are necessary for each child. **A 50% refund will be granted if cancellations are received at least 30 days prior to the start of the camp session. There will be NO refund if the cancellation occurs within 30 days of the first day of the session, therefore please choose your sessions carefully and mark them in your calendar.** Cancellation requests must be made by email to: [Programs@QuogueWildlifeRefuge.org](mailto:Programs@QuogueWildlifeRefuge.org)  
**\*(Strictly enforced)\* Switching camp weeks (if available) will be subject to an additional \$50 processing fee per application.**

All sections below must be completed.

<b>Child's Name</b> (First/Last & Nickname if applicable):	<b>Child is entering grade:</b>	<b>Child's D.O.B:</b> (Month/Day/Year)	<b>Parent's Name(s):</b>
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**Please circle T Shirt Size:**

**Youth** XS(2/4) S(6/8) M(10/12) L(14/16) XL(18/20) or **Adult** S M L XL

## Member Registration:

Priority registration & discount is available for families who have a 2026 FAMILY LEVEL membership (or higher-level membership) to the Refuge and applies to immediate family members only (not grandchildren). All non-member applications can be submitted after May 11, 2026.

**My 2026 Membership is listed as (your name):** \_\_\_\_\_

Week 1	June 29 – July 3	Summer Ecology – Entering grades 2,3		<b>← Please register for only one session per child per summer by marking "X" next to the selected week.</b> <b>*Week 2: No Camp on July 10<sup>th</sup>. Campers return for Night Hike on Thurs, July 9<sup>th</sup> from 7pm-10pm.</b>  Due to limited class size, popularity of the program, and priority registration for members, sessions may fill up. You will be notified as soon as possible if the session is full.  Quogue Wildlife Refuge reserves the right to use photographs/ videos taken at camps, programs and events for use on our website, publications, and social media.
Week 2 *	July 6 – July 9 *	Summer Ecology – Entering grades 5,6		
Week 3	July 13 – July 17	Summer Ecology – Entering grades 3, 4		
Week 4	July 20 – July 23	Young Explorers I – Entering grades 7,8		
Week 5	July 27 – July 31	Explorers – Entering grades 9,10,11		
Week 6	August 3 – August 7	Summer Ecology – Entering grades 2,3		
Week 7	August 10 – August 13	Young Explorers II – Entering grades 7,8		
Week 8	August 17– August 21	Summer Ecology – Entering grades 4,5,6		
Week 9	August 24 – August 28	Summer Ecology – Entering grades 2,3		

**Please mail check(s) or credit card payment and application(s) to Quogue Wildlife Refuge at PO Box 492, Quogue, NY 11959**

**Circle one: AMEX VISA MC DISCOVER Card #:** \_\_\_\_\_

**Amount to be Charged: \$** \_\_\_\_\_ **Exp. Date:** \_\_\_\_\_ **CVC:** \_\_\_\_\_ **Billing Zip Code:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

# Quogue Wildlife Refuge Medical / Consent Form

*Please complete ALL Sections and Sign*

## 1. Parental Consent – Emergency Statement - *This form will be valid for 2026*

I \_\_\_\_\_ (Parent Name) hereby grant permission for \_\_\_\_\_ (Child Name) to attend the **Quogue Wildlife Refuge Summer Ecology Program** and participate in all activities listed.

*In the event of a medical or weather emergency and/or the inability to contact the designated guardian(s) in such an event, I agree that the Quogue Wildlife Refuge Staff may take such emergency measures, including transportation, as they deem appropriate and shall notify the parent and legal guardian as soon as possible.*

## 2. Parent/ Legal Guardian Contact Information – (PLEASE list phone #s that you can be reached at during the hours of the program)

Home Address: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_

EMAIL(s)\*: \_\_\_\_\_

*\*Please provide your email address so that we can send you a confirmation letter with more details for your child's camp week.*

## 3. Emergency Contact Information – (Please do not list yourself)

In the event that a parent/guardian cannot be reached in an emergency, please list two (2) individuals that can be contacted to act in your absence. Please make sure the persons named are aware you have them listed.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

## 4. Important Information & Medical History

**Known Allergies:** Y / N Please List \_\_\_\_\_

**Medications/Treatments:** Y / N Please List \_\_\_\_\_

**Seizures:** Y / N **Diabetes:** Y / N **Asthma:** Y / N **Inhaler:** Y / N **Insulin:** Y / N

**Please List Behavioral or other Medical History (restrictions/limitations, special needs, dietary concerns, etc...):**

\*\*If your child attends school with an aid, please inform Quogue Wildlife Refuge staff. At this time, we are not able to provide 1:1 supervision and therefore an aid must be provided. Please contact Refuge staff, as information on the aid must be provided before the start of your child's camp week (as per Suffolk County Health Department). Please send or attach any treatment, care, and behavioral plans if applicable.

5. *\*Vaccine dates MUST be provided for the Summer Ecology Program/ Explorers | Please give all dates of immunizations here OR attach record from MD | or email the record to [programs@quoguewildliferefuge.org](mailto:programs@quoguewildliferefuge.org) GENERAL VACCINATION RECORD ONLY, NOT COVID IMMUNIZATION CARD.*

Which of the following immunizations has the participant had?

Measles: Y / N Hepatitis A: Y / N

Chicken Pox: Y / N Hepatitis B: Y / N

Mumps: Y / N

TB Mantoux Test

Date of last test \_\_\_\_/\_\_\_\_/\_\_\_\_

Result: \_\_\_\_ Positive \_\_\_\_ Negative

Vaccine Dates:	Mo/Year	Mo/Year	Mo/Year	Mo/Year	Mo/Year
DTP					
TD (tetanus/diphtheria)					
Tetanus					
Polio					
MMR					
or Measles					
or Mumps					
or Rubella					
Haemophilus influenza B					
Hepatitis B					
Varicella (chicken pox)					

6. Parent/ Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_