

MUSEUM VILLAGE SUMMER 2008 PROGRAMS
Before registering, please read the Registration Procedures carefully.

Child Information

Name _____ Age _____

Parent's Name(s) _____

Address _____

Day Phone _____ Cell _____ Evening _____

Please list any allergies or other medical conditions the museum should be aware of

Will the child be taking any medications during the day? _____

(Medications must be left in the office. Parents are responsible for clearly indicating the proper dosages. Inhalers or any immediate type medications can remain with the child.)

Contact in case of emergency (other than parent or guardian)

Name _____ Relationship _____

Address _____

Phone(home) _____ Work _____ Cell _____

If an adult other than a parent will pick up your child, please list their name and phone. Please note we will not allow your child to leave with someone not listed and verified.

Please check the date of the session you wish to attend.

_____ Summer Pottery August 4, 5, 6, and 13th \$125

_____ Puppet Making Aug. 4th-8th \$185 non-member \$165 member

_____ Puppet Making Aug. 11th-14th \$185 non-member \$165 member

More sessions may be added at a later date if existing dates are filled.

For Puppet Making children should bring a lunch each day. A drink and snack will be provided by the museum.

I hereby hold Museum Village and its staff harmless in the event of an accidental injury to my child.

Signature_____ Date_____

Payment Information:

Cash Enclosed:

Amount:_____

Check Enclosed:

Check Amount:_____

Check Number:_____

Credit Card:

Type:_____

Number:_____

Exp. Date:_____

CVC Code:_____