



WINTER BREAK 2011 REGISTRATION PACKET

Complete the registration form and return via fax: (956) 504-1348 or call (956) 548-9300. Camp registrations are processed in the order in which they are received.

Child's Name: _____

Address: _____

City, State Zip: _____

Date of Birth: _____ Age: _____

Parent/Guardian Name: _____

Daytime phone: _____ Evening phone: _____

Cell phone: _____ E-mail address: _____

Select Name of Camp(s) Attending:

- | | |
|--|--|
| _____ DECEMBER 19 TH Morning - Jingle Bell Rock (Ages 6-8) | Afternoon – Elfin' Around (Ages 4-6) |
| _____ DECEMBER 20 TH Morning – Dreaming of a "Green" Season (Ages 7-10) | Afternoon – Winter Wonderland (Ages 3-5) |
| _____ DECEMBER 21 ST Morning – Santa's Workshop (Ages 3-5) | Afternoon – Dear Santa (Ages 5-7) |
| _____ DECEMBER 22 ND Morning – Winter in the Valley (Ages 7-10) | Afternoon – Holly Jolly Day (Ages 4-6) |
| _____ DECEMBER 23 RD Morning – Crafty Elves (Ages 4-6) | Afternoon – Reindeer Games (Ages 6-8) |
| _____ DECEMBER 26 TH Morning – Rockin' New Year (Ages 4-6) | Afternoon – Let It Snow (Ages 5-7) |
| _____ DECEMBER 27 TH Morning – Tea for Two (Ages 6-8) | Afternoon – Go Green in 2012 (Ages 7-10) |
| _____ DECEMBER 28 TH Morning – Let's get Artsy (Ages 7-10) | Afternoon – Winter Wonderland (Ages 3-5) |
| _____ DECEMBER 29 TH Morning – Jumpstart 2012 (Ages 7-10) | Afternoon – Green Cheer.... (Ages 7-9) |
| _____ DECEMBER 30 TH Morning – Brite New Year (Ages 5-7) | Afternoon – Happy 2012 (Ages 6-8) |

Will early drop off (8:30 am earliest) or late pick up (5:30 pm latest) required? _____
 (\$25 fee will be added to total cost)

How did you find out about our Winter Break Camps? (Please circle)

Internet Flyer Member E-Newsletter Friend Other _____

Payment Information:

Please make check payable to: **Children's Museum of Brownsville**

For Office Use ONLY:

Circle: Cash Credit Check (#: _____) Amt. paid: _____

Circle: Visa Master Card American Express

Card Number: _____ Exp. Date: _____

Name as it appears on Card: _____

Date: _____ Employee Initials: _____

Total Amount: _____ Balance: _____

Emergency Information

Pediatrician's Name: _____ Office Phone #: _____

- 1) Please list allergies including food, medicine, etc.:

- 2) Please list any medical conditions your child may have:

- 3) Please list any medications your child will be taking while attending camp. If your child will need museum staff to administer medication, you must fill out a camper medicine form upon check-in.

Please Read:

In the event of an emergency, CMB staff will contact emergency medical personnel and then the child's parent or guardian. Based on medical personnel's assessment, your child may be transported to a local hospital to receive further medical attention. Requests to alter this policy must be made in writing to the Executive Director of the museum. Emergency Medical personnel will not honor requests to bring children to specific hospitals, doctors or medical establishments.

- 4) Please list individuals to contact in the event of an emergency (please include yourself and at least one other person):

Emergency Contact #1: _____ Relationship to child: _____

Phone #: _____

Emergency Contact #2: _____ Relationship to child: _____

Phone #: _____

Emergency Contact #3: _____ Relationship to child: _____

Phone #: _____

- 5) Please list individuals other than yourself that are authorized to pick up your child from the Children's Museum of Brownsville. Museum staff may request a photo ID from anyone picking up a child.

- I-including myself, spouse, child/children/other members of my family and heirs-release and hold harmless the Children's Museum of Brownsville, its employees, volunteers, board members, and officers and related parties from all liability for lost or stolen personal items, injuries or losses as a result of attending and/or participating in any class, camp, program, tour or other function of the museum whether on-site or in transit.
- I authorize the Children's Museum of Brownsville to take photographs of my child/children for marketing purposes. I give permission for pictures of my child/children to be used in the museum's printed materials, including advertisements, brochures, flyers and website.
- I authorize the Children's Museum of Brownsville to make copies, scan and photograph hand made and/or digitally made projects created by my child for marketing purposes. My child's artwork may be displayed at the museum and/or used in the museum's printed materials, including advertisements, brochures, flyers and website.
- I-including myself, spouse, child/children/other members of my family understand that only authorized adults listed on registration form including parents will only be allowed to drop off and pick up child/children from the Children's Museum of Brownsville. I understand I will sign in and out my child/children on the sign-in sheet provided each day.
- I hereby certify that I have read the Children's Museum of Brownsville Rules, Code of Conduct, Camp Agenda and Lunch Information, and Dress Code and have retained a copy of page 4 attached hereto.

Parent/Guardian Signature: _____

Parent/Guardian Printed Name: _____

Date: _____

Children's Museum of Brownsville Rules

- Always WALK in the museum.
- Touch EVERYTHING, but gently!
- No climbing on museum exhibits.
- No food drinks or chewing gum allowed on the museum floor.
- Share all accessories and toys with other museum patrons.
- Return all accessories and toys to their proper area.

Camp Rules and Code of Conduct

Children's Museum of Brownsville's mission is to provide a fun and safe environment for children to learn and grow, however the Children's Museum of Brownsville reserves the right to place any child in "time-out" for a period of time if that child is:

- 1) Not following the rules stated above.
- 2) Disrespectful to:
 - a) camp instructors
 - b) fellow campers
 - c) CMB staff members
 - d) CMB volunteers
- 3) Disrupts by:
 - a) not following directions or instructions
 - b) engaging in activities that could harm themselves or others

**Please note that one "time-out" is considered the first warning; two consecutive "time-outs" is considered the second warning.

- 4) Call parent/guardian of a child given three warnings.
- 5) The final warning will result in no participation in final performance, if applicable.
- 6) Dismissal from Camp in extreme circumstances including:
 - a. severe disrespect of camp instructors
 - b. severe disrespect of fellow campers
 - c. severe disrespect of CMB staff members
 - d. severe disrespect of CMB volunteers
 - e. damage to CMB exhibits
 - f. damage to fellow campers' property
 - g. damage to camp instructors' property

Lunch Information

Lunch will not be provided.

Camp Dress Code

1. T-shirt
2. Shorts
3. Socks
4. Tennis shoes (*NO flip-flops or sandals)



Sample Spring Break Day Camp Agenda

Morning Session 9:00-12:00

Monday, Dec. 19

Jingle Bell Rock (6-8) SAMANTHA

9:00-9:15 Ice Breakers

9:15-10:00 Jingle Bell Bracelet/Tambourine

10:00-10:45 Holiday Skirt

10:45-11:15 Restroom Break and Museum Playtime

11:15-12:00 Holiday Dance Routine

Afternoon Session 2:00-5:00

Monday, Dec. 19

Elfin' Around (4-6) THANIA

2:00-2:15 Ice Breakers

2:15-3:00 Santa's Helper

3:00-3:45 Elf Bowling

3:45-4:15 Restroom Break and Museum Playtime

4:15-5:00 Elf Puppets