



## **SUMMER CAMP 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: _____	Shirt size: _____
Parent/Guardian Name: _____		
Daytime phone: _____		Evening: _____
Cell phone: _____	E-mail address: _____	

### Select Name of Camp Attending:

_____ Fairy Tale Camp	June 2 – June 5	9:00am – 12:00 noon	Age 3
_____ Petite Chef Camp	June 9 – June 12	9:00am – 12:00 noon	Ages 4 – 6
_____ Science Camp	June 16 – June 19	9:00am – 12:00 noon	Ages 7 – 9
_____ Under the Sea	June 23 – June 26	9:00am – 12:00 noon	Ages 4 – 6
_____ Play-Doh Camp	June 30 – July 3	9:00am – 12:00 noon	Age 3
_____ Fairy Tale Camp	July 7 – July 10	9:00am – 12:00 noon	Ages 4 - 6
_____ Gone Fishin'	July 14 – July 17	9:00am – 12:00 noon	Ages 7 – 9
_____ 123 Play with Me	July 21 – July 24	9:00am – 12:00 noon	Age 3
_____ Dino Camp	July 28 – July 31	9:00am – 12:00 noon	Ages 4 – 6
_____ Camping Out	Aug 4 – Aug 7	9:00am – 12:00 noon	Ages 4 – 6
_____ Build & Play	Aug 11 – Aug 14	9:00am – 12:00 noon	Ages 7 – 9
_____ Hands on Fun	Aug 18 – Aug 21	9:00am – 12:00 noon	Age 3

Early drop off or late pick up required? \_\_\_\_\_ (\$25 fee will be added to total cost)

How did you find out about our Summer 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:

<b>Circle: Cash</b>	<b>Credit</b>	<b>Check (#: _____)</b>	<b>Amt. paid: _____</b>
<b>Circle: Visa</b>	<b>Master Card</b>	<b>American Express</b>	
<b>Card Number: _____</b>	<b>Exp. Date: _____</b>		
<b>Name as it appears on Card: _____</b>			
<b>Date: _____</b>	<b>Employee Initials: _____</b>		
<b>Total Amount: _____</b>	<b>Balance: _____</b>		

Emergency Information

Pediatrician's Name: \_\_\_\_\_ 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.

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.

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

**Camp Agenda Including Snack Information**

Half Day Camps (9:00 a.m. to 12:00 p.m.) – please provide one healthy snack for your child.

**Camp Dress Code**

1. t-shirt
2. shorts
3. socks
4. tennis shoes (\*NO flip-flops or sandals)

I hereby certify that I have read the Children’s Museum of Brownsville Rules, Code of Conduct, Camp Agenda and Snack Information, and Dress Code and have retained a copy of pages 4 and 5 attached hereto.

Parent/Guardian Signature: \_\_\_\_\_

Parent/Guardian Printed Name: \_\_\_\_\_

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