



Museum Explorers Summer Camp 2015 at the Waukesha County Museum

Dates and Themes:

July 20-24: Season's Greetings – Campers will explore the four seasons: summer, spring, fall, and winter. Activities include the science behind the seasons, holidays during each time, and popular traditions each season is known for!

July 27-31: Around the World in 5 Days – Campers will journey to South America, Asia, Europe, Africa, Australia, and North America to discover the history and culture from around the globe!

August 3-7: Mad Scientist – Campers will perform experiments and games with chemistry, astronomy, zoology, botany, meteorology, engineering, and much more!

Timing: Regular camp hours are 9am – 4pm each day. For an additional charge, campers can register for early drop-off at 8:15am or late pick-up at 5pm.

Ages: Campers must be 6 to 10 years old as of July 21, 2014.

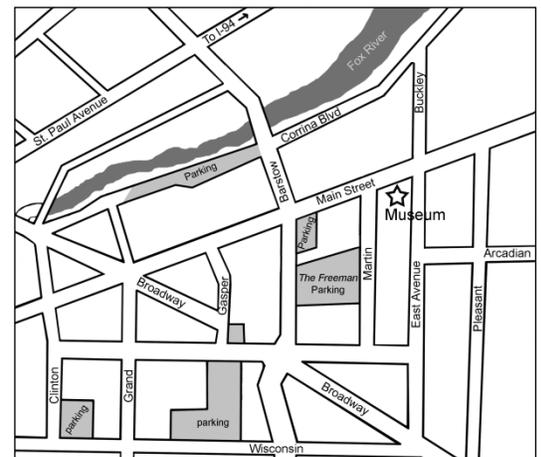
Staff: The Museum Explorers Camp will be developed and facilitated by the museum's education staff. The staff has extensive experience working with children of all ages and is committing to providing a positive experience for all campers.

Fees: The fee for each week of camp is \$135 per child for members and \$145 per child for non-members. Sign up for all three weeks and receive a discount of \$30 per child! Early drop off and late pick up options are available at \$10 per option per week. Museum membership is \$30; for more information on memberships, visit <http://www.waukeshacountymuseum.org/involved-member.html>.

Registration: Please complete one form for each child. Registration is taken only by mail, on a first-come, first-served basis and *must* be received with payment. A confirmation will be mailed to you once your registration is processed. All registrations are non-refundable. If you must cancel your registration, please call 262-521-2859, ext. 224. **Registration deadline: July 5th.**

What to bring: Campers should wear comfortable clothing and sneakers that they can run in and get dirty. They should also bring a bagged lunch and a snack that does not need refrigeration. We try to get outside as much as possible, so they should also bring sunscreen and insect repellent.

Directions: The Waukesha County Museum is located at 101 W. Main St. (at East Ave.) in downtown Waukesha, WI. From I-94, take exit #295 (Hwy. F) south approximately 2.5 miles. Turn left on Barstow. Turn left on Main Street. The museum is on the right. Free parking is available on city streets and in city lots. Refer to street signs for time limits and restrictions.



Questions?

Contact the Education Department at 262-521-2859, ext. 224 or khoeker@wchsm.org.



Museum Explorers Summer Camp 2015

Registration Form

Registration and Payment: Please complete one form for each child. Registration is taken only by mail, on a first-come, first-served basis and *must* be received with payment. A confirmation will be mailed to you once your registration is processed. All registrations are non-refundable. To cancel, please call 262-521-2859, ext. 224.

Camper: _____ Birthday: _____ Age on July 20, 2015: _____

Parent / guardian: _____ Relationship to camper: _____

Address: _____

City: _____ State: _____ Zip: _____ Home phone: _____

Day phone: _____ Alternate phone: _____

E-mail: _____ My family currently has a museum membership.

Emergency contact (other than above): _____ Relationship to camper: _____

Day phone: _____ Alternate phone: _____

I heard about Waukesha County Museum summer camps from _____.

Camp	Member	Non-member
<input type="checkbox"/> July 20-24: Season's Greetings	\$135	\$145
<input type="checkbox"/> July 27-31: Around the World in 5 Days	\$135	\$145
<input type="checkbox"/> August 3-7: Mad Scientist	\$135	\$145
Registering for all three	- \$30	- \$30
<input type="checkbox"/> Museum Membership	\$30	
<input type="checkbox"/> Early Drop Off	\$10 <u>per week</u>	
<input type="checkbox"/> Late Pick Up	\$10 <u>per week</u>	

Total payment: _____

Complete next page (one form for each child) and mail with payment to:

Waukesha County Museum
Attn: Summer Camp Registrations
101 W Main St.
Waukesha, WI 53186

Make check payable to:

Waukesha County Museum.

FOR MUSEUM OFFICE USE ONLY

Date Regis'd: _____

Total paid: _____

Conf. sent: _____

Notes:

WAUKESHA COUNTY MUSEUM 2015 MUSEUM EXPLORERS SUMMER CAMP

Medical Information

Camper: _____

List any medical information of which we should be aware: _____

List any medications your child is currently taking: _____

List any medications that we will be **giving** your child during the camp day. List name of medication, proper dosage, how it is given (by mouth, with water, with food, etc.), and the times the medication should be given: _____

If you have any medications that we will be giving your child (including over the counter medications), please sign below: *I give permission to Waukesha County Museum staff to give the medication(s) listed above, according to the directions that I have listed above. If any medication information changes, I will inform camp staff of those changes.*

Parent / Guardian Signature

Date

Pick-Up Permission

It is very important to the Waukesha County Museum that we protect the safety of all campers. For this reason, only adults over the age of 18 who are on your camper's "pick-up list" will be allowed to pick up your camper. If during the week you need to add someone to that list, you may do so. *We reserve the right to check ID of anyone picking up a camper to make sure that his or her name is on the pickup list.*

Emergency contacts and pickups:

_____ Full name	_____ Relation to camper	_____ Phone number
_____ Full name	_____ Relation to camper	_____ Phone number
_____ Full name	_____ Relation to camper	_____ Phone number

Emergency Consent and Authorization

In the event of an emergency, I give permission to the physician selected by the Waukesha County Museum to hospitalize, secure proper treatment for, and to order injection and/or anesthesia and/or surgery for my child, _____ (name).

I consent to my child's participation in all activities and trips, which are part of the Museum Explorers Summer Camp program at the Waukesha County Museum and under the direction of Waukesha County Museum staff.

I give permission to the Waukesha County Museum to use photographs, motion pictures, or videotapes of my child in publicizing and promoting Waukesha County Museum work.

The undersigned parent or guardian of _____ ("Minor") hereby consents to the minor participating in the Waukesha County Museum Summer Camp program and all of its activities and programs. The undersigned, for herself or himself and on behalf of said Minor, does hereby absolutely and unconditionally release, indemnify, hold harmless and forever discharge the Waukesha County Museum, its employees, successors, assigns, and agents and each of them, from and against any and all claims, demands, obligations, and liabilities of every nature and kind whatsoever including, without limitation, negligence, occurring during, directly or indirectly resulting from or arising out of the Minor's participation in such Waukesha County Museum Summer Camp program. As to matters covered hereby, the CONSENT AND RELEASE shall extinguish all claims, demands, and rights which the undersigned or the Minor (and/or each of their heirs, successors, and assigns) has or may ever have against the parties released hereby, or any of them, for any injuries, costs or damages to the Minor occurring during, directly or indirectly resulting from or arising out of the Minor's participation in such Waukesha County Museum Summer Camp program whether such injuries, costs or damages are known or unknown, foreseen or unforeseen, ascertainable or unascertainable.

Parent / Guardian Signature

Printed Name

Date