



For Office Use Only	Payment Information	Confirmation mailed _____
Date Received _____	<input type="checkbox"/> Check No. _____	Confirmation Number: _____
<input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Front Desk	<input type="checkbox"/> Credit Card	_____
Initials _____	<input type="checkbox"/> Money Order	Initials _____

Summer Camp 2010 Registration Form

Section 1 :: Camper Information

Camper 1 Camper's Name _____ Grade Completed _____ Age _____

Camper's Sex M or F _____ Camper's Date of Birth _____ Are this camper's immunizations current? Y or N _____

Any allergies or special needs? _____

T-Shirt Size Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult X-Large

Camper 2 Camper's Name _____ Grade Completed _____ Age _____

Camper's Sex M or F _____ Camper's Date of Birth _____ Are this camper's immunizations current? Y or N _____

Any allergies or special needs? _____

T-Shirt Size Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult X-Large

Parent/Guardian Information

Mother's/Guardian's Name _____ Day/Work Phone _____ Cell Phone _____

Father's/Guardian's Name _____ Day/Work Phone _____ Cell Phone _____

Street Address _____ City _____ State _____ ZIP _____

Section 2 :: Emergency Information

In an emergency, which parent/guardian should we contact first? _____ Emergency Phone _____

Alternate person who would be authorized to assist your child if we cannot reach a parent or guardian in an emergency:

Name _____ Relationship to Child _____

Cell Phone _____ Alternate Phone _____

Section 3 :: Waiver and Release *Please check boxes to indicate your agreement and sign below.*

- My child is physically fit and able to participate in camp activities. S/he may receive emergency care if needed.
- My child has my permission to walk to various locations to eat lunch, under the supervision of summer camp staff.
- My child has my permission to participate in any camp field trip(s). (More information will be sent to parents prior to the field trip.)
- I understand my child needs to be able to focus and listen. If discipline problems occur, I will be called to pick up my child.
- My child's age and grade completed as listed above is correct.

Photographs or video recordings may be taken during camp for use in the Science Museum's marketing materials.

Identifying information is not published.

- I give permission for my child's image to be used in any or all media.
- I decline permission. (Declining does not prohibit the child from participating in the camp program.)

Signature of Parent or Guardian _____ Date _____

Section 4 :: Camp Selections Please select the camp(s) your child plans to attend and calculate the total fees for each week, including Before and After Care, in the right-hand column. Next, calculate your grand total of camp fees, extra t-shirts, membership fee, and scholarship donation at the bottom of the right-hand column. Mail or fax form to SMWV with check, money order, or credit card information. **Questions? Call the Summer Camp Hotline at 540/857-4381.**

Camper 1 Camper's Name _____ Grade Completed June 2010 _____

Kindergarten-5th Grade Camps

Week	Camp	Section (Circle one)	Camp Fee	Before Care & After Care	Fee
<input type="checkbox"/> July 5-9	To Infinity and Beyond	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> July 12-16	We All Live Here	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> July 19-23	Junior Veterinarian	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> July 26-30	Rocking Through the Ages	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> August 2-6	Tooth to Toe	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> August 9-13	Top Chef to Mad Scientist	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____

6th-8th Grade Camps

<input type="checkbox"/> June 21-25	Exploring Espionage	Section n/a	\$200 :: \$215	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> June 28-July 2	Veterinary Apprentice	Section n/a	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____

Preschool Camps

<input type="checkbox"/> July 5-8	Animal Investigators	Section n/a	\$70 :: \$85	Before Care & After Care is not available for Preschool Camps.	\$ _____
<input type="checkbox"/> July 12-15	Digging Up Dinosaurs	Section n/a	\$70 :: \$85	Before Care & After Care is not available for Preschool Camps.	\$ _____

Camper 2 Camper's Name _____ Grade Completed June 2010 _____

Kindergarten-5th Grade Camps

Week	Camp	Section (Circle one)	Camp Fee	Before Care & After Care	Fee
<input type="checkbox"/> July 5-9	To Infinity and Beyond	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> July 12-16	We All Live Here	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> July 19-23	Junior Veterinarian	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> July 26-30	Rocking Through the Ages	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
<input type="checkbox"/> August 2-6	Tooth to Toe	K-1 :: 2-3 :: 4-5	\$180 :: \$195	<input type="checkbox"/> BC\$25 <input type="checkbox"/> AC\$25 <input type="checkbox"/> Both\$40	\$ _____
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Preschool Camps

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<input type="checkbox"/> July 12-15	Digging Up Dinosaurs	Section n/a	\$70 :: \$85	Before Care & After Care is not available for Preschool Camps.	\$ _____

Section 5 :: Payment

All fees must be paid at the time of registration.

Membership Information Current Member? Yes No :: Membership Number (from Membership Card) _____

Purchase or renew your membership? Family \$55 :: Grandparent \$55 \$ _____

New! Initial here if you would like SMWV to check the status of your membership and renew your membership for one year if it has expired as of February 28, 2010. Your credit card will be charged \$55. _____

Payor Name _____

Extra T-Shirts (\$10 each) Please circle size(s) \$ _____

Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large Adult X-Large

Scholarship Fund Yes, I want to help underprivileged children experience summer camp. I will donate \$ _____ \$ _____

Method of Payment Please choose one.

Check enclosed, payable to the Science Museum of Western Virginia

Charge my VISA MC Discover AMEX :: Number _____ Expiration Date _____

Signature _____ Date _____ \$ _____

Grand Total