August
1-4

MUSEUM CAMP 2022

BAKER HERITAGE MUSEUM

$35
REGISTRATION FEE

WHEN: AUGUST 1-4, 2022
1-4PM
WHO: KIDS GRADES 1-6

Register at the Baker Heritage Museum by July 20, 2022

SCHOLARSHIPS AVAILABLE

www.bakerheritagemuseum.com

Baker Heritage Museum Summer Camp 2022
Registration and Liability Release Form

For our records, please copy and fill out a separate form for each child.

Camper's Name _____ **Age/Grade** _____
Full Mailing Address:

_____

Parent 1/Legal Guardian Name: _____
Work #: _____ Cell/Home #: _____
Parent 2/Legal Guardian Name: _____
Work #: _____ Cell/Home #: _____
Physician' Name _____
Office Phone # _____
Camper T-Shirt Size: _____

Please List Emergency Contacts and/or Individuals with Permission to Pick Up Your Child:
***Please note that no one other than those listed below and the parents listed above will be allowed to pick up your child without a written note at the time of drop off.**
Name_____ Phone#_____
Name_____ Phone#_____

Please Circle Appropriate Medical Needs/Conditions for Indoor/Outdoor Safety:
ASTHMA INHALER EPI-PEN BEE ALLERGY FOOD ALLERGY
Describe Allergies/Medical Conditions/Sensitivities/Other (Use Space Below):

_____

I, _____ (Print name of parent or legal guardian), grant permission for my child to attend and participate in all **Baker Heritage Museum Summer Camp** activities at the Baker Heritage Museum and adjacent Geiser-Pollman Park during Camp hours from 1:00 pm to 4:00 pm on August 1-4, 2022.

WAIVER AND RELEASE: I do hereby release, waive, hold harmless and discharge the Baker Heritage Museum, its Staff, Representatives and any and all organizations, persons and personnel associated with said Baker Heritage Museum Summer Camp, from any and all loss, damage, injuries and/or claims of any kind arising from my child's participation, even though that liability may arise from negligence or carelessness on the part of the persons and organization named in this waiver. The Baker Heritage Museum Staff reserves the right to dismiss participants who physically, emotionally or verbally pose a threat to their own safety, the safety of other campers or camp staff; there will be no refund of any amount because of behavior problems. I also realize that the Baker Heritage Museum does not carry accident and/or medical insurance on participants. In the event that I cannot be reached in a timely manner, I give permission for my child to receive emergency medical treatment as necessary. I agree to assume any and all costs associated with medical needs both now and any which may arise as a result of my child's participation in the Baker Heritage Museum Summer Camp. I agree that I and my child will follow the COVID-19 procedures set in place for Museum Camp at the Baker Heritage Museum.

I give permission for my child's name or photograph to be mentioned in news media or online: Yes___ No___

BY MY SIGNATURE BELOW I DECLARE THAT I HAVE READ, FULLY UNDERSTAND AND ACCEPT THIS WAIVER AND RELEASE.

_____ _____
Signature of Parent/Guardian Date

Please return this form with $35 (cash, check, or card) to the Baker Heritage Museum by July 20th.
Please make checks payable to the "Baker Heritage Museum".