Texas Forestry Museum Summer Camp Form

| Child's Name: |
|--|
| Check off camp/s attending: |
| *NEW Camp: \$40 per child (4 day camp) |
| Maker Camp: May 31 st – June 3 rd from 8 am – 12 pm (entering 3 rd – 5 th grade Fall 2022) |
| <u>\$75 per child</u> (full-ride scholarships available – call (936) 632-9535) |
| EEK Week: June $6^{th} - 10^{th}$ from 8 am $- 5$ pm (entering $6^{th} - 8^{th}$ grade Fall 2022) |
| Children attending EEK Week will need to bring their lunch and any snacks that they would like to have each day. The museum will have a water jug and a gatorade jug each day for the children to refill their water bottles throughout the day. Children will need to wear clothing appropriate for outdoor weather (t-shirts, shorts, etc.) and closed-toe shoes. If you have any questions, please feel free to contact Kaitlin Wieseman at 936-632-9535 |
| \$40 per camp/per child Timber Tots Forest Animals: June 20 th – 24 th from 9 am – 12 pm (4 yrs. old – entering 1 st grade Fall 2022) |
| Summer Sylvans Forest Animals: June 20 th – 24 th from 1 pm – 5 pm (entering 2 nd – 5 th grade Fall 2022) |
| Summer Sylvans STEM: June 27 th – July 1 st from 8 am – 12 pm (entering 2 nd – 5 th grade Fall 2022) |
| Summer Sylvans Sawmill Days: July 11 th – 15 th from 1 pm – 5 pm (entering 2 nd – 5 th grade Fall 2022) |
| Timber Tots Nature Art: July 18 th – 22 nd from 9 am – 12 pm (4 yrs. old– entering 1 st grade Fall 2022) |
| Summer Sylvans Nature Art: July 18 th – 22 nd from 1 pm – 5 pm (entering 2 nd – 5 th grade Fall 2022) |

Children will need to wear clothing appropriate for outdoor weather (t-shirts, shorts, etc.) and closed-toe shoes. The museum will provide Timber Tots and Summer Sylvans camps with a snack. If you have any questions, please feel free to contact Kaitlin Wieseman at 936-632-9535.

| Please Print or Type | |
|---|-----------------------------------|
| Child's Name | Prefers to be called |
| Address | City, State Zip Code |
| Age | Gender: M or F |
| Grade Entering | Shirt Size: YS YM YL YXL AS AM AL |
| Paid: Check CC Cash | |
| *Registration is not complete until payment is re | eceived. |
| Parent/Guardian Name | |
| Phone: | Email: |
| How did you hear about our camp? | |
| Referred by: | |
| Child's Favorite Color: | |
| Child's Hobbies: | |

^{*} We will provide sunscreen and bug spray for children that request it unless told otherwise. Also, during part of the camp we will go outside where campers may be exposed to poison ivy, and may get bug bites, scratches, or falls.

Health Form

| Please Print or Type Child's Name | Prefers to | be called | | |
|--|------------------------------------|--|--|--|
| | City, State Zip Code | | | |
| | | Home Phone | | |
| | | Home Phone | | |
| Additional Contacts: (if we are unable | e to reach a parent) | | | |
| In Case of Emergency notify | | Relationship | | |
| Emergency Phone | | | | |
| In Case of Emergency notify | | Relationship | | |
| Emergency Phone | | | | |
| Physician | Phone_ | | | |
| | | ip Code | | |
| Child is subject to: Asthma Diabetes Fainting Convulsions Heart Trouble | □ Food □ Inse | d name(s) ct stings (list reaction) on Ivy (list reaction) | | |
| NosebleedsOther | <u> </u> | | | |
| Additional Comments (including any | medication your child takes such a | as Epi Pen): | | |
| | | | | |
| | | | | |
| Parent Authorization: The health history above is accurate a scheduled activities unless otherwise | - | described has permission to engage in all ion. | | |
| Signature: | | Date: | | |
| Parent or Legal | Guardian | | | |

Because we at the Texas Forestry Museum are concerned about the safety of your children, it is important that the children be brought to the Museum and picked up by a parent, or others designated by the children's parents. We cannot allow children to wait outside the Museum. They must be picked up inside. If you are going to be late picking up your child, please call the Museum and let us know. The safety of your child is very important to us.

| THE FOLLOWING PERSONS ARE AUTHORIZ | ZED TO PICK UP MY CHILD: |
|---|---|
| Name/Relationship | Phone |
| Name/Relationship | Phone |
| Name/Relationship | Phone |
| Signature of Parent or Guardian | |
| IS THERE A COURT ORDER IN PLACE THAT | LISTS CERTAIN PERSONS WHO ARE NOT |
| AUTHORIZED TO PICK UP YOUR CHILD (AT | TENDING CAMP)? |
| No Yes If Yes, please list the | eir name/relationship here: |
| Photo R | elease Form |
| Dear Parent or Guardian: | |
| while participating in activities. It is possible to promotional purposes (press releases, program | r Camps your child may be photographed/videoed that these photos/videos may be used for a brochures, website, social media, etc.). Names eo clips. Please check the appropriate line below, |
| I allow the Texas Forestry Museum to | use my child's picture or video. |
| Please do not use my/my child's pictu | are or video. |
| Child(ren)'s Name(s): | |
| Parent's Name: | |
| Parent's Signature: | |
| Date: | |

EEK! Week Consent Form Texas Forestry Museum

| I, | hereby give permission for my child, |
|-----------|---|
| (] | parent/guardian name) |
| (| , to participate in the <u>EEK! Week Summer camp</u> child's name) |
| that the | e Texas Forestry Museum is hosting on June 6 th thru June 10 th , 2022. |
| I also g | rive the staff permission to take my child to different sites around East |
| Texas. | I understand that the staff will be driving my child to the different |
| sites in | a van. I will also instruct my child to cooperate and follow instructions that the museum |
| staff pro | ovide during the camp. |
| | |
| | |
| n | parent/guardian signature Date |