



# 2021 Summer Camp Registration Form

To be completed by parent or guardian.

1. All required information must be complete before your registration is accepted.
2. Make a copy for your records.
3. Return the completed form with your payment in the envelope provided or return to the Museum of Discovery. You may also call (501) 537-3073.
4. Make checks payable to the Museum of Discovery.
5. Submit one form per child.
6. Registration is complete upon receipt of completed form and full camp payment.

Camper's Name: \_\_\_\_\_

Camper's Date of Birth: \_\_\_\_\_ Camper's Age (at time of camp): \_\_\_\_\_

Parent / Guardian Name(s): \_\_\_\_\_

Museum member: Yes No If yes, member ID #: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list any adults (18+) who are authorized to pick up your child. Those picking up the child

will be required to present valid I.D. to sign out the child

Drop off times 8-8:30 am Pick up times 4:30-5 pm

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Physician's Phone: \_\_\_\_\_

Please list any allergies the child has: \_\_\_\_\_

Please describe any relevant behavioral information regarding your child so we can accommodate his or her needs to provide the best experience possible: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Does your child require medication Yes No If so, list the medication: \_\_\_\_\_

Dosage \_\_\_\_\_ Time the medication is to be administered: \_\_\_\_\_

Reason for medication: \_\_\_\_\_ Known side effects: \_\_\_\_\_

I understand the medication will be handed to a museum educator. I also understand the medication will be kept in a safe place and administered by a responsible adult.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

### Check Discovery Camp Choices for Ages 6-13

Date	Name	Date	Name
____ June 7-11	Tinkering, Tools, Tech... (ages 10-13)	____ July 5-9	Wizards, Muggles & Sci (ages 6-8)
____ June 7-11	Unicorn Biology (ages 6-8)	____ July 5-9	Pokémon-ology (ages 8-10)
____ June 7-11	Go Nintendo (ages 8-10)	____ July 5-9	YouTube U (ages 10-13)
____ June 14-18	Legoville Engineer (ages 6-8)	____ July 12-16	Super Splash! (ages 6-7)
____ June 14-18	Go Nintendo (ages 8-10)	____ July 12-16	CSI: Discovery (ages 9-12)
____ June 14-18	Minecraft: Epic Mode (ages 9-12)	____ July 12-16	Minecraft: Epic Mode (ages 8-10)
____ June 21-25	Science Sampler: Tinkering (ages 6-8)	____ July 19-23	Super Splash! (ages 6-8)
____ June 21-25	Don't Try this at Home! (ages 8-10)	____ July 19-23	Minecraft: Epic Mode (ages 8-10)
____ June 21-25	Minecraft: Epic Mode (ages 9-12)	____ July 19-23	Wizards, Muggles & Sci (ages 9-12)
____ June 28-July 2	Legoville Engineer (ages 6-8)	____ July 26-30	Science Sampler: Tinkering (ages 6-8)
____ June 28-July 2	Pokémon-ology (ages 8-10)	____ July 26-30	Awesome Olympics (ages 8-10)
____ June 28-July 2	YouTube U (ages 9-12)	____ July 26-30	Minecraft: Epic Mode (ages 9-12)
		____ Aug 2-6	Unicorn Biology (ages 6-8)
		____ Aug 2-6	Legoville Engineer (ages 8-10)
		____ Aug 2-6	Codebots (ages 10-13)

### Check First Discoveries Camp Choices for Ages 4-6

____ Jan 11	Community Helpers:
____ Jan 25	Under the Sea
____ Feb 8	The Way I Feel:
____ Feb 22	Planes, Trains, and Automobiles
____ Mar 8	What is Weather?
____ Apr 5	Nature Nerds
____ Apr 26	Life on the Farm
____ May 10	Mess it Up!

Fees:

Discovery Camp: \$275 member/\$300 non-member per week

First Discoveries Camp: \$40 (member)/\$50 (non-member) per day

TOTAL: \_\_\_\_\_

Form of Payment (circle one): Check VISA MC AMEX DISC

Make checks payable to Museum of Discovery

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

\_\_\_\_\_  
Signature

Return form to: Museum of Discovery – 500 President Clinton Avenue, Ste. 150, Little Rock AR 72201

Phone (501) 537-3073 • Fax (501) 396-7054 • [www.MuseumofDiscovery.org](http://www.MuseumofDiscovery.org)

For questions contact Beth Nelsen at [bnelsen@museumofdiscovery.org](mailto:bnelsen@museumofdiscovery.org)