



**Huron Museum & Huron Ouendat Village**  
 Box # 638, 549 Little Lake Park Road  
 Midland, Ontario L4R 4P4  
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## Summer Jam Day Camp Registration Form

1. **How did you learn about our camp?** \_\_\_\_\_

2. **Camper Information** Please print and fill in all categories

Name: _____	Allergies: _____
Age: _____ Date of Birth: _____ M / F	Medications: _____
Health Card # _____	
Doctor's Name: _____	

3. **Parent / Guardian Information** Please print and fill in all categories

Name: _____	Emergency Contact: _____
Mailing Address: _____	Relationship: _____
	Phone # _____
Postal Code: _____	Please tell us about your child: _____
Home Phone # _____	
Bus. Phone # _____	
Cell Phone # _____	
Names of additional individuals authorized to pick my child up from camp	
Name: _____	Relationship: _____
Name: _____	Relationship: _____
In the event that someone other than those listed above will be picking up your child, please notify the museum in writing.	

**Please indicate which days your child would like to attend camp**

**June:**

**July:**

**August:**

- 9 AM –4 PM \$22 (members) \$24 (non-members)**
- Extended hours—8 AM \$1 additional fee**
- Extended hours—5 PM \$1 additional fee**
- Extended hours AM and PM \$2 additional**

**Please read carefully before signing**

I give permission for pictures to be taken of my child during camp activities, both on and off-site, which may be used for marketing purposes.

Any personal belongings brought to camp are the responsibility of my child and Huronia Museum is not liable for any damage or loss of those items. Electronic devices, such as MP3 players and cell phones are not permitted in camp. Those found will be held in trust by museum staff and returned to the camper upon pick up.

**Huron Museum's Summer Jam Day Camp has a peanut free policy to ensure the safety of all campers. As such, we ask that you send your child with a peanut free lunch. Any items found to contain peanuts will be held by museum staff and returned to the child upon pick up.**

In the event of illness or injury, I give permission for Huronia Museum to seek medical attention for my child, including the transportation of my child to the local hospital, either by a staff vehicle or ambulance. I understand that, should my child, in the opinion of Huronia Museum staff be considered a hazard to him/herself or to other campers he/she may be sent home from camp at any time.

**I have read and understood the above rules and conditions. I certify that all the information provided is true and accurate.**

\_\_\_\_\_  
**Parent / Guardian**

\_\_\_\_\_  
**Date**

# Cancellation and Payment Policy

In order to prevent needlessly turning children away due to lack of space in camp, we have made the following policy changes. Parents should notify camp staff of any cancellations 24 hours in advance or you will be charged for the day. No spot will be held after 9:00, unless camp staff have been notified of a late arrival.

Payment should be made *no later* than the morning of your child's camp attendance. Payment may be made by cash, cheque, Visa, MasterCard or Debit. Weekly post-dated cheques will also be accepted.