

Spring Break Art Camp Registration Form

March 2017

Child's Information

Name of Child: _____ Age: _____

Name of Parent (Guardian): _____

Address: _____

Phone: _____ Email: _____

Emergency Contact: _____ Tel: _____

Relationship: _____ Child's BC Medical Card #: _____

Please list any medical conditions your child may have that we should be aware of:

Please list any behavioural concerns that your child may have that we should be aware of:

Camp Information

All half-day camps run Monday to Friday on the designate week and cost \$125 plus applicable taxes per child. Museum Members receive a 10% discount.

Time Travellers

March 13-17

9am–12pm (Ages 6-9)

1pm–3pm (Ages 10-13)

Elements of Emily

March 20-24

9am–12pm (Ages 6-9)

1pm–3pm (Ages 10-13)

Audain Art Safari

March 27-31

9am–12pm (Ages 6-9)

1pm–3pm (Ages 10-13)

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Payment and Refund Policy

Full payment must be received in order for a child's spot to be confirmed within a camp. Payment can be made via cash, debit, credit card or cheque and is accepted directly at the Museum. Should a child's spot need to be cancelled and notification of withdrawal is received at least 14 days in advance of the Spring Art Camp start date, the registration fee, less a \$20 administrative fee will be refunded. If minimum registration is not achieved for a particular camp, the Audain Art Museum reserves the right to cancel said program and a full refund will be issued.

Medical and Behavioural Information

If a child has a medical condition, including a severe allergy, or a behavioural concern that the Audain Art Museum needs to be aware of, it is the parent or guardian's responsibility to ensure that sufficient information has been provided on this form. Should there be a need to provide more information to staff, the Museum asks for the completion of the Additional Medical and Behavioural Information Form that is available upon request. Please note that staff members and volunteers of the Audain Art Museum shall not administer medication of any kind to a child. By signing this form you are providing permission for Audain Art Museum staff to seek medical assistance for your child in case of emergency

Informed Consent

On behalf of the child and the child's parents and guardians, I hereby release the Audain Art Museum, its Directors, Officers, Employees and Volunteers from all actions, claims and demands for damages, loss or injury arising from any accidents that may be caused by, or arise of the participation of the child named in any program or in any facility or at any location where a program is being held, whether or not caused by the negligence of or any of the aforesaid persons. The child named on this form has my informed consent to participate fully in all indoor and outdoor activities associated with a Spring Art Camp program at the Audain Art Museum.

Parent/Guardian Printed Name: _____

Parent/Guardian Signature: _____

Date: _____

The Audain Art Museum may take photos or videos of participants within its educational programs to be used for marketing materials. These materials may include but are not limited to: social media, website, newsletters, videos or print material. Please note that specific names of children will not be used.

Yes, you have my permission to take and use photos of my child

No, you do not have my permission to take and use images of my child