

Camp Registration Form PLEASE PRINT ALL INFORMATION LEGIBLY

Camper Information

Child 1:	Date of birth:/	_/ Age:	Gender/Pronouns:	
Allergies, Medications, Conditions:				
Dietary Restrictions:				
School District:				
Child 2:	Date of birth:/	_/ Age:	Gender/Pronouns:	
Allergies, Medications, Conditions:				
Dietary Restrictions:				
School District:				
Child 3:	Date of birth:/	_/ Age:	Gender/Pronouns:	
Allergies, Medications, Conditions:				
Dietary Restrictions:				
School District:				
Parent Information				
Parent 1:				
Parent 1 phone: ()	Parent 1 Email: _			
Parent 2:				
Parent 2 phone: ()	Parent 2 Email: _			
Address:				
Street:				
State:				
Scan or take a pictu	ure to submit your for	m by email:	camps@theworks.org	

OR mail: The Works Museum, Attn: Camp, 9740 Grand Ave S, Bloomington MN 55420



Camp Title:	Engineering Fun	Cost: S
		Cost
For child(ren):		
Camp Title:	Dates:	Cost: \$
For child(ren):		
Camp Title:	Dates:	Cost: \$
For child(ren):		
Camp Title:	Dates:	Cost: \$
For child(ren):		
Camp Title:	Dates:	Cost: \$
For child(ren):		
PLEASE NOTE:		
 or 4:25 for afternoon or full day camps Lunch supervision is included from camp, or a full day camp. Lunch supervision 	12:00-1:00 only for campers attend vision is NOT available for morning-	ling a morning AND afternoon only or afternoon-only campers.
Become a member today and take 10% off the price of camp!		+Add a membership +\$ I am a Member: Yes No
Add a Family Membership for \$90; for other membership options, visit the Membership page on our website: www.theworks.org.	Minus Scholarship OR Member Discount (10%)** -\$ **Member camp discounts may NOT be combined with camp scholarships	
	Total du	e with registration =\$
 Method of payment: Cash/Check (Please make checks pa Visa/Master Card/Amex/Discover 	yable to The Works)	
 Name on Card: 		
• Card Number:		
 Expiration date: 	CVV code:	

Scan or take a picture to submit your form by email: camps@theworks.org OR mail: The Works Museum, Attn: Camp, 9740 Grand Ave S, Bloomington MN 55420

The Works Camp Policies



- PARTICIPANT BEHAVIOR:
 - The Works Museum makes the safety and enjoyment of all campers a top priority.
 - If the safety of staff, campers, or property is at risk, the camper will be removed from class 0 immediately and sent home.
 - If a behavior issue occurs, educators will redirect campers. 0
 - If the behavior continues, campers will be removed from the classroom and parents will be called. Education staff, parent, and camper will work together to problem-solve the situation and create a behavior plan for the camper so s/he can return to camp.
 - If behavior issues continue, the camper will be removed from class and sent home for the day. 0
 - If it is determined that a resolution cannot be met, The Works reserves the right to remove a child 0 from camp. No refund will be issued under these circumstances.
 - HOSPITALIZATION: I give permission for my child to be transported to the nearest medical facility if emergency medical attention is needed.
 - AGE-EXCEPTION POLICY:
 - No age exceptions will be made for Pre-K camps. Campers must be entering a Kindergarten program in September.
 - Campers MUST BE IN OR HAVE COMPLETED Kindergarten by the camp start date to register for camps in the 6-8 year old section.
 - If a camper will turn 9 years old within 3 months of the camp start date, they may register for a camp in the 9-12 year old section. If the child is younger than this and the parent wishes to register them for a camp in the 9-12 year old section, the parent must provide a letter:
 - From a teacher or adult mentor who has worked with their child
 - On school letterhead
 - Addressing the child's ability to work with older children in terms of their social/emotional, fine-motor and cognitive skills.
 - The child will be registered for one camp outside of the age range; our staff and the parents . will communicate about the child's ability to continue to take future programs with age exception.
- PHOTOGRAPHS: Registration for camp implies permission to use photographs of students for promotional purposes only. Children will not be identified by name.
 - Please check here if you do NOT give permission for photographs to be used for promotion.

CANCELLATION POLICY:

If you need to cancel:

30 or more days before camp start date, 50% of the camp fee will be refunded (minus a 10% processing fee) OR you can choose to receive a voucher for the full amount of the camp fee to be used for future camps.

14-29 days before the camp start date, receive a voucher for the full amount of the camp fee to be • used for future camps.

13, or fewer, days before camp start date, no refunds or vouchers will be issued.

If The Works Museum must cancel your camp for any reason, we will work with you to find another camp to switch your registration to, or you will receive a full refund or a voucher for the full amount of the camp.

\Box I agree to the above policies.

_____ Date _____ Signature

Comments (use back of form as needed):

Office Use Only: Date Form Received: _____ Date Confirmation Sent:

Scan or take a picture to submit your form by email: camps@theworks.org OR mail: The Works Museum, Attn: Camp, 9740 Grand Ave S, Bloomington MN 55420