

MEDICAL INFORMATION AND CAMPER SIGN-OUT AUTHORIZATION

Thank you for enrolling in the summer camp program at Carnegie Museums of Art and Natural History. Please complete this form and return it **no later than two weeks before** each child's first camp is scheduled to begin. For more than one child, please download (www.carnegiemnh.org/camps) or photocopy an additional form for each child attending summer camp. Please note: your registration will not be complete until the medical information form has been received by our office.

Camper Name: _____ Age: _____ Birthdate: ____/____/____

Parent/Guardian Name: _____	Is this person the preferred emergency contact? (circle) Yes / No	Authorized to sign camper out (circle)
Home Phone: _____		Yes / No
Work/Cell: _____		Yes / No

If the emergency contact(s) designated above can not be reached, please contact:

Name	Daytime phone #	Relationship to Camper	Authorized to sign camper out (circle)
			Yes / No

Additional persons authorized to sign-out your camper

Name	Daytime phone #	Relationship to Camper	Authorized to sign camper out (circle)
			Yes / No
			Yes / No

If your child is the ages of 11-13 and is authorized to sign him/herself in and out of camp, please initial here: _____

Allergies _____ Medications* _____

** Staff are not permitted to dispense medication. If medication must be given during camp, a designated adult must come to camp to dispense it.*

Other medical, behavioral or emotional issues we should know about (please continue on an additional sheet of paper if necessary):

Please check if your camper will attend camp with an aide or other grown-up. An education staff member will contact you.

PARENT AUTHORIZATION

Please read the authorizations below and sign on behalf of your child/children attending camp at Carnegie Museums of Art and Natural History.

Photography release for minors

I grant permission to Carnegie Museum of Art, Carnegie Museum of Natural History, and Carnegie Mellon School of Architecture to use photographs taken of my child/children for use in museum and/or university publications such as brochures, magazines, and mailings, and to use such photographs in electronic or other media. I understand that I will not be notified if/when the photographs are used. I understand that photographs will NOT be used with children's names or other identifying information. I waive any right to approve the finished photographs.

_____ I **DO** give permission to have my child/children photographed by Carnegie Museums of Art and Natural History and Carnegie Mellon School of Architecture.

OR

_____ I **DO NOT** give permission to have my child/children photographed by Carnegie Museums of Art and Natural History and Carnegie Mellon School of Architecture.

Behavior policy

I understand that any child exhibiting behavior that may cause harm to him/herself, other campers, or camp staff will be asked to leave the program without a refund. These behaviors include, but are not limited to, hitting, kicking, biting, sexual harassment, and/or possessing weapons or illegal substances. Parent/guardian will be contacted to pick up the child immediately.

Parent/Guardian Initial

Late pick-up policy

- Full-day campers not picked up by 3:30 p.m. will be considered enrolled in post-camp. Parent/guardian will be charged the full weekly post-camp fee of \$75 per child, payable at pick-up.
- **Post-camp is not available for children under age 6.** Half-day campers will be charged \$20 for every 15 minutes late.
- Post-camp campers will be charged \$20 for each 15-minute period past 6 p.m.
- Late pick-up and post-camp fees must be paid before the following day of camp. Campers will not be permitted to attend camp until late pick-up fees have been paid.
- If a full-day camper has not been picked up from post-care by 6:30 p.m., or a half-day camper by 3 p.m. (morning session) or 6:30 p.m. (afternoon session), and museum staff are unable to contact a parent/guardian, staff will contact the Allegheny County Department of Human Services Office of Children, Youth, and Families.

Parent/Guardian Initial

I have read this release and fully understand the contents. I understand that, prior to signing, I am free to address any questions regarding this release with the Program Registration office.

Child #1 Name (please print): _____

Child #2 Name (please print): _____

Child #3 Name (please print): _____

Parent/Guardian Name (please print): _____

Signature of Parent/Guardian: _____ Date: _____

If you would like to receive email updates about activities during camp, please provide your email address:
