

Vacation Science Camp

the  children's museum

Join us for action-packed days of scientific investigations, Museum exploration, Amazing experiments, and up-close encounters with live animals.

Monday, January 17, 2022 Martin Luther King Jr. Day



Rainforest Escape

Take a break from winter's cold and escape to the tropical rainforest for the day. Campers will be transported to this biodiverse biome as they uncover the unique adaptations of organisms living there.

During Vacation Science Camp all animals will be presented in ways to minimize possible spread of the virus.

For further information on our COVID-19 policies, please go to our website and find this program under the Programs tab.

WHO: Children grades 1-6 (must be at least 6 yrs old)

WHEN: 9:00am to 4:00pm, drop-off at 8:45am

WHAT TO BRING: Simple peanut free snack, ready-to-eat lunch in paper bag (please no insulated bags), personal water, mask, and hand-sanitizer.

COST: Full Day \$75/day members, \$85/day non-members

TO REGISTER:

Return form below with full payment & ***along with all required paperwork.** call, or go online.

The Children's Museum Attn: Registration Department

Camp Health Requirements

- Record of physical examination from within the last **3 years**, with **immunization history**, **MUST** be submitted to us **BEFORE** the child attends the program.
- Documents must be signed by a doctor and feature an exam date from within the last **3 years**.
- A **Medication Authorization** Form is necessary for any child requiring medication administered while at camp.
- If your child requires an **Epi Pen** there is an additional form that must be filled out and have a physician's signature. While at camp, the Epi Pen (or other medication) must be in its original packaging with **prescription label attached**.

Call or go online to sign up, too! 860.726.4008 or www.TheChildrensMuseumCT.org

Vacation Science Camp Registration Form

Program fees are non-refundable and non-transferable.

1/17/22

Child's Name _____ DOB _____ School _____ Grade _____

Home Address _____ City _____ Zip Code _____

Home Phone _____ E-mail _____

Names of all Legal Guardians _____

Emergency Phone #1 _____ Contact Name _____

Emergency Phone #2 _____ Contact Name _____

Authorized for Pickup _____

Member Member # _____ Non-Member Amount enclosed _____ Cash Check Check # _____

VISA MC Exp. Date _____ CCV# _____