

# SUMMER ARTS+ARCHITECTURE

# 09

## REGISTRATION FORM

A separate registration form must be completed for each child.

New Camper       Returning Camper

CAMPER'S NAME \_\_\_\_\_ PARENT'S or GUARDIAN'S NAME \_\_\_\_\_

camper's age \_\_\_\_\_ student number (office use only) \_\_\_\_\_

address \_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip code \_\_\_\_\_

e-mail address \_\_\_\_\_

daytime phone number \_\_\_\_\_ cell /home phone number \_\_\_\_\_

nonmember       member      membership number \_\_\_\_\_

Week #	Camp Title	Half-Day	Full-Day	Dates	Fee	Pre-Camp (7:30-9 a.m.)	Post-Camp (9-6 p.m.)
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

## PAYMENT INFORMATION

Enclosed is a check to **Carnegie Museum of Art**

Charge my credit card    VISA       MasterCard       American Express

credit card # \_\_\_\_\_ expiration \_\_\_\_\_

signature of cardholder \_\_\_\_\_

Camp Fee Total:

Pre-Camp Total (\$25/week):

Post-Camp Total (\$50/week):

**TOTAL PAYMENT:**

\_\_\_\_\_ Please initial here to indicate you have read the museum's cancellation policy to the left.