



2022 Museum Discovery Camp Registration Packet

The Reading Public Museum's Museum Discovery Camp is a multi-age, multi-disciplinary camp where children get to discover the Museum in new ways while honing their skills working independently and in group settings on a variety of hands-on activities and experiments.

General Information:

Child's Name:		Birthdate:	
School child will attend in Fall 2022:		Grade - Fall 2022:	
Child's FULL Address (Street, City, State, Zip):			
Does your child have a friend(s) attending camp at the same time? If so, please provide the name(s):			
Does your child have a nickname or preferred pronoun? If so, please provide:			
Museum Member:	YES NO	If Yes, Member Name:	
How did you hear about us?	RPM Website	RPM Publication	Social Media
		Repeat Camper	Friend or Family
			Other (Please List)
Please be advised: All communication information will be sent via email. In case of emergency, we will attempt to contact via phone first and use the order as listed.			

Parent/Guardian Name (Primary Contact):	Parent/Guardian Name (Secondary Contact):
Primary Contact Phone:	Secondary Contact Phone:
Primary Contact Email:	Secondary Contact Email:

Emergency Contact & Authorized Pick-Up Person(s) *other* than listed above
 (Only those listed will be allowed to sign out your child. Proper ID must be shown)
Please list in the order to contact

Name:		Phone:		Relationship:	
Name:		Phone:		Relationship:	
Name:		Phone:		Relationship:	
Name:		Phone:		Relationship:	
Name:		Phone:		Relationship:	

Please contact Rebeka Birch at rebeka.birch@readingpublicmuseum.org or 610.371.5850 x258 if you have any questions.

Medical Information:

Reading Public Museum Summer Discovery Camp is an **INCLUSIVE** program and will do everything we can to make reasonable accommodations for your child.

Does your child have any of the following needs or conditions (**check all that apply**):

<input type="checkbox"/>	Seasonal Allergies	<input type="checkbox"/>	Asthma	<input type="checkbox"/>	Sensory Processing	<input type="checkbox"/>	Autism Spectrum
<input type="checkbox"/>	Medication Allergies	<input type="checkbox"/>	Vision Difficulties	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>	Behavioral or Emotional
<input type="checkbox"/>	Insect Sting Allergy	<input type="checkbox"/>	Hearing Difficulties	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	ADD/ADHD
<input type="checkbox"/>	Food Allergies	<input type="checkbox"/>	Physical Difficulties	<input type="checkbox"/>	Other -		

If you checked anything above – PLEASE List necessary details here (attach extra if necessary):

We want your child to have the best experience possible; therefore, a camp counselor may contact you to discuss how we can best accommodate your child.

Failure to properly alert RPM to your child's relevant conditions may be cause for exclusion from camp.

***Please note: Reading Public Museum is not able to accommodate children with conditions that may pose a safety risk to themselves or others. If your child has a condition that qualifies, please arrange for a paraprofessional to accompany them and contact Rebeka Birch to discuss. 610.371.5850 x258 or rebeka.birch@readingpublicmuseum.org**

Is your child on any medications? Yes No

If yes, please list:

Will your child need to receive a prescription or over-the-counter medication **while here?** (including EpiPens and/or Rescue Inhalers) Yes No

Photo Release:

Should my child appear in photographs, films, video recordings, etc. taken during general participation, I hereby grant permission for my child to appear in promotional material, public relations material, social media posts, etc., related to Reading Public Museum.

Please initial in the space next to your selection:

_____ I agree

_____ I disagree (Note: disagreement in this matter will NOT affect your child's ability to attend camp)

FOR OFFICE USE ONLY:

I confirm that the information provided is correct and current (initial and date): _____

Behavior Expectation Policy:

At Museum Discovery Camp, we have high expectations in your child’s ability to monitor their own behavior and strive to keep disciplinary actions to a minimum. We ask all children to follow our three Museum Discovery Camp rules at all times.

1. **Respect The Reading Public Museum** – treat our facilities, exhibits, artifacts, supplies, and equipment with care; clean up after yourself. Follow The Museum Rules.
2. **Respect your fellow campers** – be kind, use polite and respectful language, share, take turns, and keep all body parts outside of others’ personal space.
3. **Respect your counselors** (including all camp staff and volunteers) – listen and then follow instructions, use polite and respectful language, stay with your class at all times.

Please read and initial:

If your child exhibits disrespectful or disruptive behavior or language, or becomes physically or emotionally aggressive toward another individual or themselves, we will enact our Behavior Expectation Policy. This policy can be found on our website, in our “Museum Discovery Camp Survival Guide,” and is available anytime at request. Please review the policy with your child prior to the start of their camp session.

I have read and understand the Behavior Expectation Policy and I agree to comply with it.

Please Initial: _____

Registration Information:

Museum Discovery Camp Full Day/Monday-Friday School Age Children (Entering Grades 1-5 in fall 2022)	*Mars-bound: Space Tech Camp (7/5-7/8) *Full Day/Tuesday-Friday *School Age Children (Entering Grades 4-8 in fall 2022)
Members:	Members:
Early Bird (March 1 – April 30): \$150/week/child	Early Bird (March 1 - April 30): \$135/child
Full Price (May 1 – Close): \$175/week/child	Full Price (May 1 – Close): \$140/child
Non-Members:	Non-Members:
Early Bird (April 1 – April 30): \$180/week/child	Early Bird (April 1 – April 30): \$155/child
Full Price (May 1 – Close): \$200/week/child	Full Price (May 1 – Close): \$160/child

Advanced registration is required. Full payment and completion of this packet are due at registration. Registration closes the Monday prior to the start of the camp week. All monies and completed forms must be submitted by that time or registration cannot be guaranteed. You will receive a confirmation of reservation via email once payment has been received and processed. Please allow up to 10 business days for processing.

✓	Camp Week:	Time:	Fee (See Registration Information):
	June 13 – June 17 – <i>Full STEAM Into Summer</i>	9 a.m. – 4 p.m.	
	June 20 – June 24 – <i>Camp-ology I</i>	9 a.m. – 4 p.m.	
	June 27 – July 1 – <i>Wild Nature!</i>	9 a.m. – 4 p.m.	SOLD OUT – Waitlist Open
	July 5 – July 8 – <i>Mars-bound: Space Tech (Tues - Fri)</i>	9 a.m. – 4 p.m.	
	July 11 – July 15 – <i>It's Craft-tastic!</i>	9 a.m. – 4 p.m.	SOLD OUT – Waitlist Open
	July 18 – July 22 – <i>Amazing Life on Earth!</i>	9 a.m. – 4 p.m.	
	July 25 – July 29 – <i>Meet Me at The Museum!</i>	9 a.m. – 4 p.m.	
	August 1 – August 5 – <i>Master of the Arts</i>	9 a.m. – 4 p.m.	
	August 8 – August 12 – <i>Camp-ology II</i>	9 a.m. – 4 p.m.	
	August 15 – August 19 – <i>Shh! It's a Surprise!</i>	9 a.m. – 4 p.m.	
		TOTAL DUE:	

Payment

Your child's admittance is not guaranteed until you receive your confirmation via email. Camp fees are non-refundable. We reserve the right to cancel sessions. Refunds are at the discretion of Reading Public Museum.

Payment Type	Enclosed Check (made payable to <i>Reading Public Museum</i>)		Credit Card	
Credit Card Type	MC	VISA	DISCOVER	AMEX
Credit Card #				
CCV Code		Expiration Date		Zip Code
Card Holder's Name (Please Print)				

*If you wish to make a payment over the phone, please call Rebeka Birch at 610.371.5850 x258

Signature: _____

Forms and/or Payment can be mailed or emailed to the following:

Reading Public Museum
Attn: Summer Camp
500 Museum Road
Reading, PA 19611

OR

rebeka.birch@readingpublicmuseum.org
Subject: Summer Camp

Receipts only provided on request

FOR OFFICE USE ONLY

Parent Name:	Camper Name:	
Phone:	Email:	
Program Dates:		
#Regular Weeks @	#Mars-Bound Weeks@	TOTAL OWED
Processed by Finance Office on	by	

Parent Agreement:

Please INITIAL all items and fill in information where space is provided - You must agree to all items in the Parent Agreement in order for your child to attend Discovery Camp at The Reading Public Museum

INITIAL	POLICY
	I/We, (legal parents/guardians' name(s)) _____, hereby authorize the Reading Public Museum to administer basic first aid when applicable to (child's name) _____ for minor injuries, including the treatment of minor cuts, scrapes, burns (including sunburns) and stings.
	Medications, including prescription and OTC, will not be administered by RPM staff at any time – should a camper require medication during camp, it will be provided with detailed instructions, a physician's note, and a completed medical form for that medication, and will be administered by the camper with RPM staff supervision.
	If my child may need to receive life-saving, emergency medication during camp (including EPI pens, rescue inhalers, etc.) I will provide a completed medical form for that medication, I will provide medication in its original container, and I will provide detailed written instructions for the administration. Museum Staff will ONLY administer life-saving, emergency medication in an emergency situation where my child is incapacitated and/or not capable of administering their own medication. I hereby relieve The Reading Public Museum and Reading Public Museum Staff of all legal ramifications as a result of administering life-saving, emergency medication.
	I hereby give permission to medical personnel and Emergency Medical Services selected by the staff of RPM to provide transportation and treatments, including X-rays and routine tests, for my child.
	In the event that I, or emergency contacts, cannot be reached in an emergency, I hereby give permission to the physician/hospital where my child is transported to secure and administer treatment, including hospitalization and surgery, for my child.
	I agree to assume financial responsibility for all medical and hospital expenses.
	On behalf of the child/minor, I hereby release, discharge, and hold harmless, The Reading Public Museum, and their officers, trustees, agents, and employees from and against all losses, claims, actions, costs, expenses and or damages, including attorney fees, arising out of my/our child's participation in The Reading Public Museum Discovery Camp, except for the willful misconduct or gross negligence of The Reading Public Museum.
	I have read and given my approval or disapproval for my child to appear in photographs taken during general participation that may be used in promotional material related to The Reading Public Museum.
	I have read and agreed to the Behavior Expectation Policy.
	Should anything in my child's medical or behavioral plans change from the time I sign this form through the time my child will be in the care of Reading Public Museum, it is my responsibility to inform Reading Public Museum immediately. If I/We fail to do so, Reading Public Museum cannot be held responsible for anything related to this change should it occur.
	I understand that failure to properly alert RPM to your child's relevant conditions may be cause for exclusion from camp.
	If my child requires a paraprofessional to attend camp with them, I agree to provide a paraprofessional and assume any necessary expenses that are required.
	I understand that I may need to sign a COVID-19 liability waiver prior to my child's first camp session for them to attend camp at The Reading Public Museum and that my child will need to comply with all current camp regulations regarding COVID-19, which can be found at www.readingpublicmuseum.org and may change frequently as they are constantly updated.

I have read, understand, and initialed all the information above:

Signature: _____ Relationship to Child: _____ Date: _____

I hereby authorize that, to the best of my knowledge, all of the information provided is complete and correct and I will be responsible to update it should it, at any time, change:

Signature: _____ Relationship to Child: _____ Date: _____

Please contact Rebeka Birch at 610.371.5850 x258 or at rebeka.birch@readingpublicmuseum.org if you have any questions.