



**Hurononia Museum & Huron Ouendat Village**  
Box # 638, 549 Little Lake Park Road  
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## March Break Day Camp Registration Form

1. **How did you learn about our camp?**

2. **Camper Information** Please print and fill in all categories

Name: \_\_\_\_\_ Allergies: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ M / F \_\_\_\_\_

Health Card # \_\_\_\_\_ Medications: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_

3. **Parent / Guardian Information** Please print and fill in all categories

Name: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone # \_\_\_\_\_

Postal Code: \_\_\_\_\_ Please tell us about your child: \_\_\_\_\_

Home Phone # \_\_\_\_\_

Bus. Phone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Names of additional individuals authorized to pick my child up from camp

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

In the event that someone other than those listed above will be picking up your child, please notify the museum in writing.

**Please indicate which days your child would like to attend camp** Please notify camp staff of any cancellations or absences 24 hours in advance or you will be charged a cancellation fee.  
No registration is complete until payment has been received.  
Post dated cheques will also be accepted.

Payment may be made by cash, cheque, Visa, MasterCard or Debit

### Please read carefully before signing

I give permission for pictures/videos to be taken of my child during camp activities, both on and off-site, which may be used for marketing purposes.

I give permission for my child to take part in skating and sledding activities and understand that it is my responsibility to provide any safety equipment I deem necessary.

Any personal belongings brought to camp are the responsibility of my child and Huronia Museum is not liable for any damage or loss of those items. **Electronic devices, such as MP3 players and cell phones** are not permitted in camp. Those found will be held in trust by museum staff and returned to the camper upon pick up.

**Hurononia Museum's Day Camp has a peanut free policy to ensure the safety of all campers. As such, we ask that you send your child with a peanut free lunch. Any items found to contain peanuts will be held by museum staff and returned to the child upon pick up.**

In the event of illness or injury, I give permission for Huronia Museum to seek medical attention for my child, including the transportation of my child to the local hospital, by ambulance. I understand that, should my child, in the opinion of Huronia Museum staff be considered a hazard to him/herself or to other campers he/she may be sent home from camp at any time.

**I have read and understood the above rules and conditions. I certify that all the information provided is true and accurate.**

\_\_\_\_\_  
Parent / Guardian

\_\_\_\_\_  
Date