



Come Face to Face with the World

For Office Use Only

Received:

Mailed:

Information Sent:

Summer Art Camp 2010 - Registration Form

Please read carefully to make sure that all information is correct.

A separate registration form must be completed for each participant

Participant Information

Participant's Last Name: _____ First Name: _____

Parent/Legal Guardian's Full Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: Home () _____ Work () _____ Cell/Pager () _____

Sex of Child: Male Female

Age of Child: (Minimum Age is 6) _____ Date of Birth: Month _____ Date _____ Year _____

Are you a Member of the Bowers Museum Yes No

If so, please list your Membership number and expiration date

Membership No. _____ Expiration Date _____

If you wish to renew or begin a new membership please call (714) 567- 3639

E-mail address: _____

Photographs of camp participants may be taken for publicity purposes. Do you give permission for photographs of your child to be taken?

Yes No

Please read all registration information before completing.

Please make your registration choices from the following selection:

(Check all your choices)

<u>Camp</u>	Early drop off 7:30 to 9:00 am	Late pickup up 3:00- 5:30 pm	<u>Camp Fee PAID</u>
	@ \$75.00 per week		
Expedition 1 June 21 – 25 Secrets of the Silk Road			
Expedition 2 June 28 - July 1 Mysterious Mummies of Ancient Egypt and China			
Expedition 3 July 5 – 9 Himalayan Adventure			
Expedition 4 July 12 – 16 Mediterranean Odyssey			
Expedition 5 July 19 – 23 Voyage to the Pacific Islands			
Expedition 6 July 26 - 30 Modern Art Explorations			
Expedition 7 August 2 - 6 Land of Aztecs, Mayans and Sun Gods			
Totals	\$		\$
Final Total			

Children enrolled in Extended Camp late pickup must **absolutely be picked up by 5:30 pm**. A late charge of **\$10.00** will be assessed every 15 minutes past 5:30 pm until your child is picked up. Payment in full of this late charge is required at the time you pick up your child.

Parents must provide a sack lunch and drink.

Pre-registration is required.

To request a registration packet or information please call Cynthia Callard at 714- 480-1524 or e-mail ccallard@bowers.org, or visit the website www.bowers.org.

Hours: Monday through Friday, 9:00 AM to 3:00 PM

Weekly Fee: Members:	Special early bird discount	\$150.00	9:00 – 3:00
	After May 14, 2010	\$165.00	
	Special early bird discount	\$110.00	9:00 – 12:20
	After May 14, 2010	\$125.00	
Non Members:	\$175.00	9:00 – 3:00	\$130.00 9:00 – 12:30

Extended camp fee: \$75.00 per child, per week from 7:30 - 9:00 a.m. or/and 3:00-5:30 p.m.

Payment is required in full per child, per camp session at the time of registration.

Cancellations and Refunds

In light of the fact that the Bowers Kidseum has expended the time and other resources necessary to make this Summer Art Camp Program a rewarding and educational experience for the camp participants, the following refund policy shall apply:

- a) If a participant's registration is cancelled in writing thirty (30) days or more prior to the beginning of a camp session, a full refund of all fees paid to date will be refunded.
- b) If a participant's registration is cancelled in writing two-weeks prior to the beginning of a camp session, one-half of all fees paid to date will be refunded.
- c) If a participant's registration is cancelled less than two-weeks prior to the beginning of a camp session, no refund will be given at all for any reason.

All written requests for cancellation should be directed to the Bowers Kidseum.

Within two-weeks of receipt of such written notice of cancellation, Bowers will mail a check to the requesting party.

Payment Record

Check (Please make all checks payable to the **Bowers Kidseum**)
(A charge of \$25 will be assessed for all checks returned for non-sufficient funds).

Credit Card

Authorization: I hereby authorize you to charge my credit card in the amount of
\$_____.

Card Type (check one): Visa MasterCard American Express

Name on Credit Card _____

Credit Card No. _____

Signature required: _____

Card Expiration Date: _____

PLEASE NOTE:

Your reservation is not guaranteed until you receive Confirmation of Registration.

I have thoroughly read and completed this Registration form and agree to all of its terms.

 Parent *or* Guardian (Check One)
Signature

Print Name

Date: _____

Please tell us how you heard about the Summer Camps _____
