



## Red Mill Museum Village

### Spring Break Workshop 2020 Registration

Information for parents:

All participants must be signed in and out. The day runs from 10am to 3pm. Please call and notify the Red Mill Museum Village staff if your child will be absent or needs to be picked up early. A written note must be provided to allow another parent (or anyone else) to pick up your child.

It is advised that children wear comfortable, washable play clothes, including sneakers with socks (please no flip-flops or clogs). Children must bring lunch and snack. A water bottle is also recommended. Please make sure your child's name is clearly labeled on all items brought in for the day. Children are not permitted to use cell phones or other electronic devices during the program.

Child's name: \_\_\_\_\_

Child's age: \_\_\_\_ \*Children age 7-12 are welcome

Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Caregivers – please list the name(s) and phone number(s) for at least one emergency contact and/or those allowed to pick up your child. Please include email address for primary contact:

(Primary) Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

Email: \_\_\_\_\_

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

Phone number: \_\_\_\_\_

In the event of an emergency and a caregiver cannot be reached, please provide the name and phone number for your child's physician:

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

Phone number: \_\_\_\_\_

Please list any allergies your child has:

\_\_\_\_\_

Please list any other medical concerns we should be aware of:

\_\_\_\_\_

Please read the following statement and sign below:

*Red Mill Museum Village staff and volunteers are not certified to administer medication. Children must take their medication at home or be able to self-medicate - the staff is happy to remind campers when it's time. In the event of injury, the First Aid Squad will be called and may transport your child to the nearest hospital (likely Hunterdon Medical Center). I hereby waive and release all rights and claims for damages against the Red Mill Museum Village and their employees and volunteers for all injuries which may be sustained by the herein named minor or myself while participating in the Summer Program. I understand the content of the program and the risk of personal injury therein. I also give my permission for the employees of the Red Mill Museum Village and the Hunterdon Medical Center (or other hospital) to admit me or my child for EMERGENCY medical treatment that would become necessary as a result of a medical emergency during this program. I also give permission to the Red Mill Museum Village to make noncommercial use of any activity photographs of myself or my child. Any information provided will be treated with confidentiality and will allow the Red Mill Museum Village to better serve individuals attending programs.*

Parent/Guardian Name (print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Where did you hear about our summer program? : \_\_\_\_\_

Were you referred by a previous participant in our summer program? Let us know who so they can receive a discount on their registration: \_\_\_\_\_

Anti-bullying and Behavior agreement:

All parents please review the following behavior policy with your child. To indicate that you both understand and agree to each statement, initial next to each statement and sign below.

\_\_\_\_\_ I will arrive and remain at the Museum with a positive attitude, open to meeting new people and trying new activities.

\_\_\_\_\_ I will work with my volunteer leaders and fellow participants towards creating an environment that is safe and welcoming for each of us.

\_\_\_\_\_ I understand that doing intentional harm or bullying another camper, either physically or emotionally, is grounds for dismissal from the program.

\_\_\_\_\_ I understand that although I may be able to solve some conflicts on my own, the volunteer leaders are always ready to listen and assist if there is a problem. I understand that my counselors and all of the program staff need and want to help but can only do so if I am willing to share my concerns with them.

\_\_\_\_\_ I will remain with my volunteer leader and participate in the activities as required.

\_\_\_\_\_ I will use appropriate language and understand that the use of excessive, deliberate, or profane language will not be accepted.

\_\_\_\_\_ I will leave my cell phone and other electronic devices at home. I understand that if there is an emergency the program staff will be happy to allow me to use the Museum's phone and will be happy to pass on any urgent messages from home.

\_\_\_\_\_ I will respect the property and personal space of other participants and museums staff.

\_\_\_\_\_ I will respect the grounds, buildings and exhibits of the Red Mill Museum Village.

Instances involving unacceptable behavior will be dealt with on a case-by-case basis. A zero-tolerance policy is enforced in regards to physical aggression. Any child who commits an act of physical aggression against another child, volunteer, or anyone else will be removed from the program. In this case a parent must pick up their child within one hour of notification from the Museum staff. There are no refunds for children removed from the program for disciplinary reasons.

By signing below, I state that I have read and agree to abide by the anti-bullying and behavior policies. Furthermore, I certify that I have discussed these policies with my child and they understand their meanings and consequences.

Parent/Guardian Name (print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Child's Name (print): \_\_\_\_\_

Child's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

I would like to enroll my child in the following program session(s):

Spring Break Workshop April 15<sup>th</sup> – fee \$60 for Museum members and \$75 for non-members

Payment method (check one):

I have enclosed a check for the full amount made out to The Red Mill Museum Village.

I would like the full amount to be charged to my credit card. Details below:

MasterCard       Visa       American Express

Credit Card #: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_      Security Code: \_\_\_\_\_

Billing Address:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Cancellation requests must be in writing. In the event of a cancellation after a child is enrolled in the program, refunds will be subject to a 30% service charge. No refunds will be issues for cancellations made less than one week prior to the start of program session.

Send your completed registration form and payment to:

Red Mill Museum Village  
56 Main Street  
Clinton, NJ 08809

Or

Assistant Director Marie Salthouse at [programs@theredmill.org](mailto:programs@theredmill.org)

[www.theredmill.org](http://www.theredmill.org)

908-735-4101