

Muscoot Farm Young Farmers Camp Program

2012 Registration Form

All information is kept confidential

Child's name _____ Nickname _____ Gender M or F

Address _____ Town _____ State _____ Zip Code _____

Birth Date _____ Age _____ Grade entering as of September '12 _____

Parents/Guardians' Names _____ Daytime phone _____

Evening phone _____ Cell phone _____ Email address _____

If neither parent is available, please contact:

Emergency name _____ Phone _____ Relation: _____

Medical History: Immunizations (date of last)

DPT _____ Polio _____ Measles _____ HIB _____

Hepatitis _____ Mumps _____ Rubella _____ Chicken Pox _____

Allergies (medication, foods, etc.) _____

Is your child currently on any medication that needs to be taken during camp, including inhalers? YES NO

If yes, written permission from a parent or guardian will be necessary to accompany the medication and the medications must be self-administered.

If there is information you would like to share with our Camp Director, Katherine Sclafani, which will help maximize your child's summer experience please contact her at 864-7285 prior to the start of camp or provide the information below.

I give my permission for my child to participate in all program activities. I understand that continued misbehavior on the part of my child will result in dismissal from the program, without consideration of a refund.

Emergency Release:

I give permission, in the event of an emergency, for first aid to be administered to my child and emergency medical treatment including transportation by ambulance to the nearest hospital, should it be necessary. I understand that every effort will be made to contact me.

Parent/Guardian Signature Date

One Week Maximum

HOMESTEADERS (Entering Grades 1 & 2)

____ July 9-13 ____ July 16-20 ____ July 23-27 ____ July 30 – Aug 3 ____ August 6-10 ____ August 13-17

FARM HANDS (Entering Grades 3 & 4)

____ July 9-13 ____ July 16-20 ____ July 23-27 ____ July 30 – Aug 3 ____ August 6-10 ____ August 13-17

COWPOKES (Entering Grades 5 & 6)

____ July 9-13 ____ July 16-20 ____ July 23-27 ____ July 30 – Aug 3 ____ August 6-10 ____ August 13-17

CORNHUSKERS (Entering Grade 7 & 8)

(Choice of week 3- 6 only) ____ July 23-27 ____ July 30 – Aug 3 ____ August 6-10 ____ August 13-17

Parent/Guardian Signature Date

I would like my child to be in the same group as: _____

Fee: \$300 (non-refundable). If for medical reasons, your child does not attend camp a partial fee may be returned at the discretion of the Farm Manager.

Checks payable to: Muscoot Farm

