

Lancaster Science Factory Summer Camp 2012 Registration Form  
Please complete all of the pages of the registration form and return to LSF

Camper Information:

Name(s): \_\_\_\_\_ T-shirt size(s): \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade entering in fall: \_\_\_\_\_

Name(s): \_\_\_\_\_ T-shirt size(s): \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade entering in fall: \_\_\_\_\_

Parent/Guardian Information:

Primary Contact: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Secondary Contact Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Emergency Contact Information: (in case of emergency, parents will be contacted first)

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

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

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

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Child's Physician: \_\_\_\_\_ Physician's phone: \_\_\_\_\_

List any health conditions, allergies, physical handicaps, medicines presently taking or special conditions in

your child's medical history: \_\_\_\_\_

\_\_\_\_\_

List any activities in which your child should not participate in due to health reasons: \_\_\_\_\_

\_\_\_\_\_

Are there any other factors that LSF should take into consideration when caring for your child?

\_\_\_\_\_

Please list any people picking up your child from camp. Everyone listed will be required to show ID when picking child up. Your child will not be released to any person not on the list you provide.

\_\_\_\_\_

\_\_\_\_\_

## Lancaster Science Factory Summer Camp 2012 Registration Form

Camper's Name(s): \_\_\_\_\_ Date of submission: \_\_\_\_\_

Please choose number of children registered for each camp below:

\_\_\_\_\_ Invent It! – JUNE 18 – 22 AM (AGES 6-13)

\_\_\_\_\_ Phun Physics Domination – JUNE 18 – 22 PM (AGES 6-13)

\_\_\_\_\_ Unstoppable, Unpredictable? – JUNE 25 - 29 AM (AGES 6-13)

\_\_\_\_\_ They Did it First! – JUNE 25 - 29 PM (AGES 6-13)

\_\_\_\_\_ **\*\*Blast Off! Air Propulsion** – JULY 2 – 6 AM NOT HELD JULY 4<sup>TH</sup> (AGES 6-13), special price \$100

\_\_\_\_\_ **\*\*Freeze! Science Crime-Stoppers** – JULY 2 – 6 PM NOT HELD JULY 4<sup>TH</sup> (AGES 6-13), special price \$100

\_\_\_\_\_ You're in Charge! (Girls Only!) – JULY 9 – 13 AM (AGES 6-13)

\_\_\_\_\_ Move It! (Girls Only!) – JULY 9 – 13 PM (AGES 6-13)

\_\_\_\_\_ True or False? – JULY 16 – 20 AM (AGES 6-13)

\_\_\_\_\_ No Limits – JULY 16 – 20 PM (AGES 8-13)

\_\_\_\_\_ The Creative Scientist: Secrets of Color – JULY 23 – 27 AM (AGES 8-13)

\_\_\_\_\_ The Creative Scientist: Secrets of Sculpture – JULY 23 – 27 PM (AGES 8-13)

\_\_\_\_\_ Ooey Goopy – JULY 30 – AUGUST 3 AM (AGES 6-13)

\_\_\_\_\_ Mad Scientist – JULY 30 – AUGUST 3 PM (AGES 6-13)

\_\_\_\_\_ Survivor – AUGUST 6 – 10 AM (AGES 6-13)

\_\_\_\_\_ Out of the Shadows – AUGUST 6 – 10 PM (AGES 6-13)

\_\_\_\_\_ Blast Off! Bottles and Models – AUGUST 13 – 17 AM (AGES 6-13)

\_\_\_\_\_ Mystery of the Music – AUGUST 13 – 17 PM (AGES 6-13)

\_\_\_\_\_ Total number of camps registered                      X \$125 = \_\_\_\_\_

\_\_\_\_\_ **\*\*Total number of camps registered**  
for the week of July 2<sup>nd</sup>-6<sup>th</sup>                      X \$100 = \_\_\_\_\_

\_\_\_\_\_ Are you a member of LSF? Subtract 10%                      - \_\_\_\_\_

TOTAL = \_\_\_\_\_

\* Each camp is five half-day sessions and costs \$125/child. All members get 10% off. All day children are welcome to stay for Lunch Bunch, in which they can eat their own packed lunch, and then enjoy free time on the exhibit floor before the afternoon camp begins.

**\*\*Blast off! Air Propulsion** and **Freeze! Science Crime-Stoppers** are differently priced due to the 4<sup>th</sup> of July holiday. Each camp is four half-days and costs \$100.

\*Payment is due in full at the time of registration. Please send your completed registration forms, Parental Release form and payment to Lancaster Science Factory, Attn: Lauren Schaller, 454 New Holland Avenue, Lancaster, PA 17602.

\_\_\_\_\_ Visa    \_\_\_\_\_ MasterCard    \_\_\_\_\_ Discover    \_\_\_\_\_ AmEx

Acct. # \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV2 Code \_\_\_\_\_

Signature: \_\_\_\_\_

Please make checks payable to: Lancaster Science Factory

Lancaster Science Factory Summer Camp Parental Release Form 2012

**Agreement:**

I hereby grant permission for my child to participate in Summer Camp at the Lancaster Science Factory as described. I understand the Lancaster Science Factory may deny enrollment or dismiss at any time any camper whom it considers not to be participating properly in the camp. I also understand that any of the camps receiving an insufficient registration may be cancelled.

In the event of an emergency requiring immediate medical treatment, I understand that the staff of the Lancaster Science Factory will try to reach me by using the telephone numbers listed in this form. In the event that I cannot be reached, I authorize treatment by appropriate personnel to administer any prescribed medications to my child or any emergency care (i.e. EpiPen for allergic reactions) as approved by Lancaster Science Factory staff. If such care is needed, I authorize the Lancaster Science Factory to make the decision to take my child to the nearest hospital (Lancaster General Hospital) in the event of extreme emergency.

We understand and accept the need for the Lancaster Science Factory to be fully informed as to the physical and mental health of the enrollee. Failure to disclose such essential information at the time of enrollment or upon the request of the Lancaster Science Factory can be cause for dismissal from camp. The Lancaster Science Factory pledges to respect the confidentiality of such information and to use it only for professional purposes.

**Release Statement:**

In consideration of the acceptance of the camper for enrollment in the Lancaster Science Factory Summer Camp, I hereby release and discharge the Lancaster Science Factory, its agents, employees and officers from claims, demands, actions, judgments and executions which the undersigned, as parent or guardian of the camper, ever had or now has, or may have, or which the undersigned's heirs, executors, administrators, or assigns may have or claim to have against the Lancaster Science Factory, its successors or assigns, for all personal injuries, known or unknown, and injuries to property, real or personal, caused by or arising out of, the camper's enrollment in the Lancaster Science Factory Summer Camp.

Child's Name: \_\_\_\_\_

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

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

**Photo Release:**

I will allow the Lancaster Science Factory to take photos of my child. I understand that the Lancaster Science Factory may use these photographs and recordings for promotion, marketing, training and advertising. I release and hold the Lancaster Science Factory harmless for any and all present and future claims for compensation or damages relating to this release.

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