

# Shenandoah Valley Discovery Museum Personal Information Form



Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

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

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

Cell Phone: \_\_\_\_\_ E-mail \_\_\_\_\_

Secondary Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Medical Conditions: \_\_\_\_\_

IEP or 504 Plan:  Yes  No

*Note: If your child has an anaphylactic allergy, IEP or 504, please contact Cheryl at [learning@discoverymuseum.net](mailto:learning@discoverymuseum.net). Please note that the Shenandoah Valley Discovery Museum is not equipped to accommodate IEP/504s.*

Child's Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_

I authorize the following person(s) to pick up my child from camp or be contacted in case of an emergency:

Relationship to child: \_\_\_\_\_ Phone: \_\_\_\_\_

### Emergency Medical Release:

In the event of a medical emergency and the parent/guardian cannot be immediately contacted, I grant permission to museum staff to give consent for necessary medical treatment.  Yes  No

### Photo Release:

Your registration implies permission to use photographs of campers for Discovery Museum promotional purposes. If you DO NOT authorize photos (for web use or camp recap emails), please check box.  No

**Field Trips:** I grant permission for my child to go offsite with his/her camp counselors and assistants for walking field trips on or near the museum. I understand that I will be notified verbally or at drop off/pick up when such trips are planned.  Yes  No

Other considerations in regards to your child: \_\_\_\_\_

### Legal Release:

In consideration of my participation in the SVDM Summer Camp, I do hereby, for myself, my heirs, executors, and administrators, waive, release, and forever discharge any and all rights and claims for property damage and/or personal injury which may occur or which I may have, against the Shenandoah Valley Discovery Museum and the Summer Camp, or any of their officers, members, agents, or representatives, arising out of participation in any program activity.

**All information is correct to the best of my knowledge and I agree to the policies listed below.**

### Signatures:

\_\_\_\_\_  
Parent or guardian (Print)

\_\_\_\_\_  
Parent or guardian signature

\_\_\_\_\_  
Date

# SVDM Summer Day Camps Policies

To ensure a safe and enjoyable camp experience for all, please read the following policies carefully.

## Cancellation/Refund Policy

Any cancellations must be completed at least 10 business days before the start of the camp week. No refunds given for orders canceled within 10 business days of the camp unless due to a medical emergency or illness resulting in 3 or more missed days. No partial refunds due to missed days due to vacations, sick days, etc.

## Drop-off/Pick-up Information

Morning camps begin at 9am and end at 12pm. Afternoon camps begin at 1pm and end at 4pm. Campers should be checked in at the check-in/pick-up location near the front of the museum no earlier than 10 minutes prior to the start of their camp. *Adults must come in with your child for drop off and to pick up.* We do not release unchaperoned students from programs due to issues of safety and liability. Campers must be picked up promptly at the end of their camp's scheduled end time. After one warning per family, late pick-ups (15+ min.) will be charged for a \$9 play ticket fee to be paid before each child is dropped off the next day/camp scheduled.

## Camp Hours/Museum Hours

The museum will be open to the public during summer camps. These hours are 9:30am-3:30pm Wednesday-Friday. Campers will primarily remain in their camp space during open hours. Campers who are staying for an afternoon camp will have a lunch break from 12pm-1pm. This may take place on the roof, an open museum space, or across the street at George Washington's Office with accompanying museum staff.

## Health Information

If your child has a medical condition, peanut or other severe allergy, dietary restrictions, or other special need, please inform registration staff as soon as possible so we can discuss accommodations. Email [learning@discoverymuseum.net](mailto:learning@discoverymuseum.net) and complete the attached health forms when you register for camps.

## Health Policy

We ask that your child stay home if they are experiencing or have in the last 24 hours experienced symptoms such as fever, vomiting, diarrhea, persistent cough or congestion, or COVID/Flu type symptoms.

## Behavior Policy

In order to make the experience of our programs a positive one for all students and staff, we have established a policy to manage behavior incidents that involve chronic disruption of classes and/or safety. We reserve the right to remove students who do not adhere to our museum guidelines, which are posted on our website, or can be provided by emailing [learning@discoverymuseum.net](mailto:learning@discoverymuseum.net).

## What to Wear/Bring

- The museum is not responsible for lost, missing, or damaged personal items.
- Campers are asked to bring their own snack and bottled water. No refrigeration is available nor are we able to heat up lunches. If attending camps or classes all day, bring a bag lunch and a drink. **We are a nut-free museum, so please, no PB&J sandwiches and nut-free snacks only!**
- Wear closed-toed shoes and comfortable clothing that can get messy.
- Please leave all toys and valuables, including collectable cards and personal electronics at home. Electronics brought to the camp will be held in a safe place until the end of the program day.