

St. Patrick's Day Children's Program 2023

Heritage House Museum

All programs require pre-registration with full payment in advance. Program size is limited so early registration is recommended.

Cost **\$30.00**

Personal Information

Child's Name:

Health Card #:

Date of Birth:

Age:

Grade:

Allergies, concerns, medication, or special needs:

Can they have individually packaged outside food sources (candy etc.) provide by staff?

YES **NO**

Family Information

Parent/Guardian's Name:

Email:

Address:

Postal Code:**Home Phone:****Work Phone:**

Cell Phone:

Family Doctor:

Phone:

Emergency Contact

Name:

Phone:

Relationship to child:

Payment Information

- ☐ Enclosed is the following payment: \$_____
- ☐Cheque ☐Cash ☐Interac, Visa or Mastercard

To complete registration choose one of the following:

- Visit us at Heritage House Museum to pay with cash, cheque, credit, or interac
- Mail form with cheque to: Heritage House Museum, 11 Old Slys Road, P.O. Box. 695, Smiths Falls, ON, K7A 4T6

Parent/Guardian Consent

- ☐ I have provided all of the health, behavioural and physical needs information which pertains to my child that is necessary for the leadership of this program to provide a safe experience for my child and other participants.
- ☐ I understand that the program leaders will use their best judgment for maintaining a safe environment for each child. This may include refusing my child the privilege of participating in a portion of the program if they are behaving in an unacceptable manner.
- ☐ I understand that the Smiths Falls Heritage House Museum will follow all guidelines published by the Ministry of Health.
- ☐ I understand it is up to my own discretion on sending my child to the Heritage House Museum Day Camps.

I hereby give my permission:

- ☐ To administer medication provided by me in accordance with proper and complete instructions that I will provide.
- ☐ To administer first aid if necessary.
- ☐ To take my child off museum property for pre-arranged activities.
- ☐ To photograph/film my child while participating in a museum program, for promotional purposes.
- ☐ To all local newspapers to print photos/articles related to my child.
- ☐ To allow the Heritage House Museum to put photos on their website/Facebook page.

Your signature indicates your agreement with the above-mentioned statements.

Parent/Guardian Signature: _____

Date: _____