



4525 47A Avenue  
Red Deer, AB T4N 6Z6

P. 587.797.4040  
reddeermuseum.com

**Red Deer Museum**  
**mag**  
+ Art Gallery

## Red Deer Museum + Art Gallery

### Program Registration Form – Day @ the Museum Day Camps

Red Deer Museum + Art Gallery Day Camps run from 9:00 am to 4:00 pm on select school PD Days. Drop off time is between 8:30 am and 9:00 am. Pick up time is between 4:00 pm to 4:30 pm.

Winter 2023	
Available Dates	\$45/day Regular, \$40/day MAG Members,
January 20 – Love for the Land	
February 23 – Museum Reflections	
February 24 – Museum Reflections	
→ TOTAL \$:	

### Child Information

Name (first & last): \_\_\_\_\_ Gender: **M / F** (circle one)

Birthdate (yyyy/mm/dd): \_\_\_\_\_ Alberta Healthcare #: \_\_\_\_\_

Is your child on any medication that we should be aware of? If so, how and when is it administered?

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Does your child have any allergies that MAG staff should be aware of? \_\_\_\_\_

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Do their allergies require an epi-pen?

- ☐ Yes  
☐ No

Is there any additional information MAG staff should be aware of that would help us to create a fun and positive experience for your child? (ie, behavioural or medical concerns). \_\_\_\_\_

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### Guardian Information

Guardian One

Name: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

*Administrative Use Only – initial the following fields once completed.*

Date Received: \_\_\_\_\_ Staff Initial: \_\_\_\_\_ Veevart: \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

☐ Is the child's primary address

**Phone #1:** \_\_\_\_\_

☐ Is a cell phone

**Alternate Phone:** \_\_\_\_\_

☐ Is a cell phone

**Email Address:** \_\_\_\_\_

Guardian Two

**Name:** \_\_\_\_\_ **Relationship to Child:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Province:** \_\_\_\_\_ **Postal Code:** \_\_\_\_\_

☐ Is the child's primary address

**Phone #1:** \_\_\_\_\_

☐ Is a cell phone

**Alternate Phone:** \_\_\_\_\_

☐ Is a cell phone

**Email Address:** \_\_\_\_\_

## Terms and Conditions

I acknowledge that a spot will not be held for my child without full payment for the program. Fees are not refundable if spot is cancelled within one week of the program date. Date switches and credits may be offered in the event of illness on a case-by-case basis. The Red Deer Museum + Art Gallery (MAG) holds the right to refuse the registration of any child. \_\_\_\_\_ (Initial)\*

I acknowledge that minimum of 5 children must be registered before the program is undertaken and the MAG reserves the right to cancel the program if less than 5 children are registered. **Notice of cancellation will be given no later than three days prior to the program date.** \_\_\_\_\_ (Initial)\*

I acknowledge that my child's participation in the program may be cancelled, without refund, if the MAG feels that my child is not adhering to the rules and instructions of the program, or if my child behaves in a way that is harmful to the other participants, staff, or museum artifacts. I understand that if my child must be removed from the program, they must be picked up within 60 minutes of notification. \_\_\_\_\_ (Initial)\*

I acknowledge that my child is not to leave the premises of the MAG on their own for the duration of the program unless written permission has been provided by the parent/guardian in advance of the program date and it has been discussed with the Programs Coordinator. \_\_\_\_\_ (Initial)\*

I understand that the MAG will administer standard First Aid as needed, and will call emergency personnel (ie, ambulance) for serious medical concerns. I understand all associated fees are the responsibility of the child's legal parent/guardian. \_\_\_\_\_ (Initial)\*

I give permission for the Red Deer Museum + Art Gallery to take photos of my child and use them in any promotional and/or website material. **Yes / No (circle one).** \_\_\_\_\_ (Initial)\*

## Release and Indemnity Agreement

I am aware that there are many inherent risks, dangers and hazards associated with participation in the summer camp programs at the MAG. I freely accept and fully assume all such risks, dangers or loss resulting from hazards that may arise in connection with my child's attendance at the MAG. I waive any & all claims that I may have against the MAG, its employees, agents & representatives. I release the MAG from any and all liability for any loss, damage, injury or expense that I may suffer or incur as a result of my child's attendance at or participation in the programs at the MAG, on the part of the staff, volunteers & representatives. I hold harmless and indemnify the MAG from any and all liability for property damage, personal injury or death suffered by my child or by a third party as a result of my child's attendance at or use of the premises.

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

*The personal information contained on this form is collected under the authority of the Personal Information Protection Act of Alberta and will be used to the purpose of administration of Red Deer Museum + Art Gallery's registered programs. If you have any questions about this collection, please contact the Programs Coordinator, 4525 47A Ave. Red Deer, AB T4N 6Z6 or telephone 587-797-4040.*