



# Schumacher Farm Park Summer Camp

## ‘STEAM on the Farm’

### August 6-8, 2019



Registration due date is **July 8th, 2019**. Confirmations with camp details will be emailed upon receipt of registration form. If sufficient registration is not met, registered campers will be notified by due date regarding camp cancellation. Refunds will be given up to two weeks prior to camp, minus a \$25 processing fee. Make checks payable and mail with application to: Friends of Schumacher Farm, 5682 Hwy 19, Waunakee WI, 53782. Submit questions to email: [info@schumacherfarmpark.org](mailto:info@schumacherfarmpark.org) or call (608) 849-4559

\*Get member rates by joining Friends of Schumacher Farm: **Family membership \$40**

Registration type	Cost per child	# of children	\$ Amount
<b>Full week of camp (Aug. 6, 7, 8)</b>	<b>\$175 (FSF member \$158)</b>		
<b>Select days</b>			
<b>Tues., August 6th</b>	<b>\$58 (FSF member \$54)</b>		
<b>Wed., August 7th</b>	<b>\$58 (FSF member \$54)</b>		
<b>Thurs., August 8th</b>	<b>\$58 (FSF member \$54)</b>		
<b>Total</b>			<b>\$</b>

Camper's name \_\_\_\_\_ birthday \_\_\_\_\_ grade in fall \_\_\_\_ gender \_\_\_\_  
 Health conditions or allergies: \_\_\_\_\_

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 Health conditions or allergies: \_\_\_\_\_

Your name \_\_\_\_\_ Relationship to camper(s) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency contacts (PROVIDE 2):

1st contact \_\_\_\_\_ Phone \_\_\_\_\_  
 2nd contact \_\_\_\_\_ Phone \_\_\_\_\_

I consent in advance for medical treatment at an appropriate medical facility in case of illness or injury. I agree to hold harmless and indemnify the Friends of Schumacher Farm Park, Dane County Park and employees from any and all liability, loss, damages, costs, or expenses which are sustained, incurred or required arising out of the actions of my son, daughter or ward in the course of the camp.

I give permission for my child's picture to be used in promotional media for the Friends of Schumacher Farm Park.  
 YES NO

Legal guardian signature \_\_\_\_\_ Date \_\_\_\_\_