

Registration 2008

A separate registration form must be completed for each child

CAMPER INFORMATION

Child's Name _____ Age _____ Birth Date _____

Parents' / Guardians' Names _____

Address _____

Daytime Phone _____ Evening Phone _____

Allergies _____ Other Health Conditions _____

Alternate Emergency Contact _____

Phone _____ Relation _____

PAYMENT INFORMATION

HMA Membership ID # _____ Check Enclosed? Y N

VISA or MasterCard _____ Exp. Date _____ Cardholder Signature _____

PHOTOGRAPHY RELEASE

Signing gives permission for the registered student to be photographed for publicity purposes including but not limited to media coverage during his/her visit to HMA, and release HMA from liability and demands for compensation, award or other consideration whatsoever arising from the enrolled appearing in such material.

Would you like to receive E-News? Y N Email Address _____

AGE	CAMP TITLE	WEEK	AM / PM	FEE
		Membership (add \$50)		
		TOTAL		

Return form and payment to Museum:

BY MAIL
 Hickory Museum of Art
 PO Box 2572
 Hickory, NC 28603

BY FAX
 (828) 327-7281

IN PERSON
 Bring to HMA offices
 on the 2nd Floor of the
 Museum.