

Cowpoke Camp 2015 Registration

Registration closes on June 26, 2015

GENERAL INFORMATION

Date: _____

Camper's Name: _____

Date of Birth: _____ Gender: _____

Parent/Guardian Name: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Phone Number to call during camp session: _____

EMERGENCY CONTACT

Name: _____ Relationship: _____

Phone Number to call during camp session: _____

List any Food Allergies: _____

How did you hear about the event?

NCMHOF Website Cattle Raisers Website FTWChild Camp Guide

Facebook Word of Mouth Other: _____

REGISTRATION

All days run from 10:00 am – 12:00 pm

- Go West!**- Friday, July 3rd
- Me and My Horse**- Friday, July 10th *(Please wear closed-toe shoes for this event)*
- The Art of the West**- Friday, July 17th
- Ranch Hands**- Friday, July 24th
- Western Superstars**- Friday, July 31st

Available for ages: 6 – 10 *Please inquire about younger or older siblings*

-Registration continues on the next page-



PRICING

- Non-Members: \$15.00 each X _____ days = \$ _____
- Members: \$10.00 each X _____ days = \$ _____

* It is free to drop-off and pick-up your camper at the front of the museum. If you plan to park, Cultural District parking is \$5.00.

Membership:

National Cowgirl Museum and Hall of Fame membership, Cattle Raisers Museum membership, and Fort Worth Museum of Science and History membership apply.

Important Information:

Camp begins at 10:00 am and ends promptly at 12:00 pm. You may stay with you camper, explore the Museum, or leave and pick up your camper at 12:00 pm. Please be prompt.

Refunds and Cancellation:

Cancellations are not eligible for a refund unless the camp is cancelled by Museum staff.

Authorization and Waiver:

I authorize the National Cowgirl Museum and Hall of Fame, its employees, and contract employees to secure proper medical treatment for the child named above, in case of an emergency illness, accident or injury. I do hereby release, absolve, and hold harmless the National Cowgirl Museum and Hall of Fame and its employees, contract employees, and activity supervisors, any or all of them from liability of any kind whatsoever. I also give my permission for any photographs taken during these activities to be utilized for educational and public relations purposes by the Education Department now and in the future. I, the parent or legal guardian of the above named participant, do hereby give my approval for the participation by the participant in any and all of the above program's activities.

Parent/Guardian Signature: _____	
Parent/Guardian Name: _____	Date: _____
<input type="checkbox"/> Please do NOT photograph my child.	

-Registration continues on the next page-

PAYMENT

Payment amount of _____ for the _____ selected camp days is enclosed:

Check (Please make check payable to the National Cowgirl Museum and Hall of Fame)

Credit Card, charge my:

MasterCard

Visa

Discover

American Express

Card Number: _____ Expiration Date: _____

Cardholder Name: _____

Signature: _____

Reservations are not secured until payment is received in full. You can submit this form by:

E-mail: kschenk@cowgirl.net

Fax: 817-336-2470