

# The Depreciation Lands Museum

## Adventures in Pioneer Living

### Day Camp Registration 2017

*--Early Registrations accepted Feb 1 for returning camper families--*

*--Registrations accepted March 1 for new families--*

Full week, June 19-23, 9am-11:45am, for ages 8-12

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

School Grade completed in June \_\_\_\_\_ Gender for costume: boy \_\_\_\_\_ Girl \_\_\_\_\_

Clothing size for costume: ch sm \_\_\_\_\_ ch med \_\_\_\_\_ ch lg \_\_\_\_\_ adt sm \_\_\_\_\_ adt med \_\_\_\_\_ adt lg \_\_\_\_\_

Primary Phone \_\_\_\_\_ Alternate phone \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Cell \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-Mail (confirmation of acceptance will be sent via e-mail) \_\_\_\_\_

Have you attended the camp before? \_\_\_\_\_ If so, when? \_\_\_\_\_

How did you hear about Adventures in Pioneer Living? \_\_\_\_\_

Unit Choice : \_\_\_\_\_ Pioneer \_\_\_\_\_ Indian \_\_\_\_\_ Militia

**\*\*An emergency form must be received by the museum prior to the start of camp.\*\***

Signature of Parent \_\_\_\_\_ Date \_\_\_\_\_

Enclosed Camp Registration fee: \_\_\_\_\_ \$100 for Non-members, week long camp

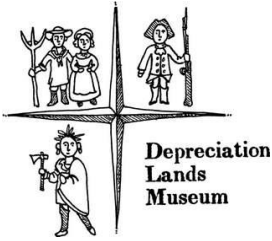
\_\_\_\_\_ \$85 for DLMA Immediate Family Members, week long camp

Please make checks payable to **"The Depreciation Lands Museum"**

Mail Registration form, Payment and completed Emergency form to:

Depreciation Lands Museum  
Adventures in Pioneer Living  
Box 174  
Allison Park, PA 15101

If you need further information, please visit the website [www.DLMuseum.org](http://www.DLMuseum.org), e-mail the museum at [DepreciationLands@gmail.com](mailto:DepreciationLands@gmail.com) or call 412-486-0563 to leave a message.



The Depreciation Lands Museum  
**Adventures in Pioneer Living**  
Day Camp Registration 2017

## Emergency Information

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

Primary Phone \_\_\_\_\_ Alternative phone \_\_\_\_\_

Health Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Phone \_\_\_\_\_

Emergency Contact if Parent/Guardian is not available:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Please list any allergies, dietary restrictions, or medical conditions we should be aware of:

### Medical Release

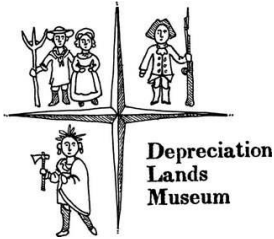
I, \_\_\_\_\_, give the Depreciation Lands Museum permission to seek emergency medical care for my child in the event that I cannot be reached or until I am able to be present.

Please read and sign the following waiver:

I understand that publicity photos and/or video may be taken during the camp and that my registration grants permission for my child to appear in future promotional material for the Depreciation Lands Museum without restriction or compensations.

I agree to release and discharge the Depreciation Lands Museum and its staff and volunteers from any claims, demands or liability of damage arising from the participation of my child in any programs sponsored by the Depreciation Lands Museum.

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_



Depreciation Lands Museum

P.O. Box 174

Allison Park, PA 15101

412-486-0563

Web: [www.DLMuseum.org](http://www.DLMuseum.org)

Email: [DepreciationLands@gmail.com](mailto:DepreciationLands@gmail.com)

Location: 4743 S Pioneer Rd, Allison Pk PA 15101

## Membership at the Depreciation Lands Museum

Local history, intriguing exhibitions, and exciting programs...all of these come together at the Depreciation Lands Museum. With your membership, you can become a vital part of this organization dedicated to bringing The Depreciation Lands history to life.

Membership privileges for all immediate family members include:

- Free admission to the museum on regular admission days
- Free admission to the Hydref (our Fall Festival) 1<sup>st</sup> Saturday in October
- Reduced entrance fees to many special events, camps & classes
- Discounted rates for Facilities rentals
- Invitation to attend monthly DLMA meetings
- Email notification of special museum events

It's easy to join.....

Mail the form below to us with your dues.

*The Depreciation Lands Museum depends on its members to help us meet our mission.*

*We appreciate your participation and support!*

.....  
Today's Date \_\_\_\_\_ New Member \_\_\_\_\_ Renewal \_\_\_\_\_

Name(Mr/Mrs/Ms) \_\_\_\_\_ Phone \_\_\_\_\_

List names of immediate family members: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

E-mail Address \_\_\_\_\_

\_\_\_\_\_ I am interested in becoming a Volunteer, either costumed or in another capacity.

Annual Membership: \_\_\_\_\_ Individual - \$15 \_\_\_\_\_ Family - \$25 Additional Donation \$ \_\_\_\_\_

Make checks payable to : Depreciation Lands Museum  
Memberships  
Box 174  
Allison Park, PA 15101