

Dr Pepper Museum & Free Enterprise Institute 2009 Summer Camp Reservation Form

Mon: <i>Create a Soft Drink</i>	June 29 _____	July 13 _____	August 10 _____
Tues: <i>Soda Jerk Academy</i>	June 30 _____	July 14 _____	August 11 _____
Wed: <i>Soda Pop Science</i>	July 1 _____	July 15 _____	August 12 _____
Thurs: <i>Pop Art</i>	July 2 _____	July 16 _____	August 13 _____

Child's Name: _____ Parent/Guardian: _____

Home Address: _____ Child's Age: _____

City _____ State _____ Zip _____

Best phone number to call during camp _____ Home / Work / Mobile (circle one)

Other phone number(s) _____

Does your child have any food allergies or other special needs? Medications?

- Age range: 8 to 13 years old.
- Each day: 1:00pm 'til 4:30pm each afternoon.
- Cost: One day \$10.00 per child (\$8 for Museum Members or Pepper Partners).
- Cost: Four days (same week) \$35.00 per child (\$25 for Pepper Partners).
- Fees include: All program supplies, materials, and snacks.
- For full refund: Cancellations to be made one week prior to the camp date. Cancellations made less than one week prior will be charged a \$5 cancellation fee per child per day registered.
- Payment: Credit Cards accepted. Check or money order payable to "Dr Pepper Museum." (Please do not mail cash. Drop off cash with reservation form in person.)
- Extra participants: We will do our best to accommodate "extra" participants (friends, cousins, etc. of registered participants), but we cannot guarantee a spot without a reservation.

Visa _____ MasterCard _____ Discover _____

Name on card _____

Card # _____

Security Code (on back of card) _____

Exp. Date _____

Signature _____



I understand and agree that by signing this release, I am to release, indemnify & hold harmless the Dr Pepper Museum and Free Enterprise Institute, and its officers, agents, or employees harmless from any and all liability or costs, including attorney fees, associated with or arising from my child's participation in the 2009 Summer Camp. I grant the Dr Pepper Museum the right to use pictures taken of my child for use by the Dr Pepper Museum in an honorable and legitimate way.

300 S. 5th Street
Waco, TX 76701
254-757-1025 x129

Parent/Guardian Signature _____ Date _____