

Dr Pepper Museum & Free Enterprise Institute

Brunch with the Reindeer Bunch

2009 Reservation Form

Saturday, December 5

Saturday, December 12

Child's Name: _____ Parent/Guardian: _____

Home Address: _____

City _____ State _____ Zip _____

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

Other phone number(s) _____

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

- Age Range: 6 – 11 years old
- Each Program: 10am – 12noon Cost: \$10 per child (\$8 for Museum Members or Pepper Partners)
- Fees include: All program supplies, materials, and snacks.
- For Full Refund: Cancellations to be made one week prior to program date. Cancellations made less than one week prior will be charged a \$5 cancellation fee per child per program.
- Payment: Credit Cards accepted. Check or money order payable to "Dr Pepper Museum." Please, do not mail cash. Drop off cash along with reservation form in person.
- Extra participants: We will do our best to accommodate "extra" participants (neighborhood friends, cousins, etc. of registered participants), but 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 AND HOLD 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 Dr Pepper Museum's Brunch with the Reindeer Bunch. 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.

Parent/Guardian Signature _____



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