



SUMMER DAY CAMP REGISTRATION FORM

Form must be returned with signature.

Course Title: _____

Date & Time: _____

Cost Enclosed \$ _____

Member Number: _____

Mystic Seaport Member? Yes No

Name _____ Birthdate _____ Age _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

Parent (Guardian) Name _____

The persons listed above have permission to pick-up my child _____

Emergency Contact #1 Name _____ Relationship _____ Phone _____ Phone #2 _____

Emergency Contact #2 Name _____ Relationship _____ Phone _____ Phone #2 _____

Method of Payment

Cancellations made up to 30 days prior to the start of courses will receive a refund less an administrative fee of 25% of the course cost. No refund will be given for cancellations made within 30 days of any *Brilliant* or camp courses.

Check is enclosed Please charge my: VISA/MC AMEX DISCOVER

Credit Card Number _____ Expiration Date _____

Total Amount \$ _____ Name of Cardholder _____

Occasionally Mystic Seaport photographs or videotapes visitors while on grounds for use in a variety of publicity and promotional materials and to advance our educational mission. We thank you for your cooperation and support.

For information on all programs, call 860.572.5322 or email reservations.desk@mysticseaport.org.

Please return registration form to: (fax) 860.572.5398 or (mail) Reservations, Mystic Seaport, PO Box 6000, Mystic, CT 06355