

The Schiele

Museum of Natural History

2017 Camp In Registration Form

CONTACT NAME: _____

GROUP NAME: _____

PHONE: HOME:(_____)_____ CELL: (_____)_____

ADDRESS: _____

EMAIL: _____

Estimate the number of **adults** that will be attending: _____

Estimate the number of **youth** that will be attending: _____

Ages of Youth Participants: _____

ESTIMATED TOTAL NUMBER OF PARTICIPANTS: _____

PLEASE SELECT THE CAMP IN DATE AND THEME:

____ February 16-17, 2018: Dino'snore

Flashlight Scavenger Hunt
Planetarium Show
Living Fossils Presentation
Dino Dig
Mini Fossil Hunt
Late Night Movie

Registration Deadline: January 26
Final Number of Participants Due: Feb 2
Full Payment Due: February 9

____ March 23-24, 2018: Fur, Feathers, & Ferns

Flashlight Scavenger Hunt
Planetarium Show
Extinct & Endangered Animal Presentation
Up Close Plants
Nature Trail Hike
Plant a Plant
Late Night Movie

Registration Deadline: March 2
Final Number of Participants Due: Mar 9
Full Payment Due: March 16

____ April 20-21, 2018: Boom, Pop, Fizzle

Registration Deadline: March 29
Final Number of Participants Due: Apr 6
Full Payment Due: April 13

- Flashlight Scavenger Hunt
- Planetarium Show
- Lab Safety Presentation
- Iron Nail vs. Copper Sulfate Experiment
- Cartesian Diver
- Meet a Chemist
- Late Night Movie

____ May 11-12, 2018: Sky is the Limit

Registration Deadline: April 20
Final Number of Participants Due: Apr 27
Full Payment Due: May 4

- Flashlight Scavenger Hunt
- Planetarium Show
- Moon Phases & Landscapes
- Make a Constellation
- Telescopes
- Late Night Movie

****Please note that programs are subject to be changed or altered ****

GROUP NEEDS:

Does your group require any special accommodations? (If Yes: Please Explain) _____

Does your group have any food allergies? (If Yes: Please List All Allergies) _____

(We will do our best to accommodate any food allergies but we cannot guarantee that we will be able to have foods available that are free of all allergens. Participants are more than welcome to bring their own snack/breakfast for the event.)

Any other information we may need to know about your group? _____

Please return this completed registration form to Christie Rhoney by email at christier@cityofgastonia.com, by fax at 704-836-0034, or by mail at 1500 E Garrison Blvd Gastonia, NC 28054. Registration Forms must be returned to complete the registration process for your group.