



Remick Country Doctor Museum & Farm 2010 Vacation Week Camp Registration Form

April 15th	Animals Day	\$40
April 16th	Gardening & Soil Day	\$40
April 17th	Water and Wetlands Day	\$40
April 18^h	Fun on the Farm	\$40
April 19th	½ day with Shared feast celebration	\$20
April 19-23	A week on the farm in the 1800's	\$150 (all week!)

Camper's Name: _____ Date of Birth: ____/____/____

Mailing Address: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

- _____ Check if you would like camp materials sent via e-mail
- _____ Check if you are a "Friend of the Remick Museum" at the family level
- _____ Check if you are interested in becoming a "Friend of the Museum"
- _____ Amount enclosed. Please do not send cash.

- * If applying for more than one child, please copy and complete a separate form for each camper
- * Each camp session requires a minimum of 6 campers or it will be canceled.
- * Each camp session has a maximum of 10 campers, be sure to register early!
- * You will receive a confirmation letter with a checklist on what each camper should bring.

**Please return this form and health forms by April 14, 2010 with full payment to:
Remick Museum, PO Box 250, Tamworth, NH 03886
Make checks payable to *Remick Foundation***

For additional information contact Susan Junkins: (603) 323-7591 or (800) 686-6117
E-mail: edfarm@remickmuseum.org

We now accept MasterCard and Visa Credit Cards:

Name on credit card: _____

MasterCard: _____ Visa: _____ Expiration Date: _____

Amount to be charged: _____

Signature: _____

Date Received: _____ Check Amount \$: _____ Check#: _____