2018 SSA CLASS REGISTRATION

WENATCHEE VALLEY MUSEUM & CULTURAL CENTER 127 S. Mission Street, Wenatchee, WA 98801

Check (payable t	o wymuu), credit card, or cash (delivered) accept	ed. Please list each cr	niid on a separate form.
Student Name: Entering grade: Current School:			
Parent/Guardian: Email:			
Address:			
City:	State:	_ Zip:	
Phone:	Alternate Phone:		
Emergency Contact: Phone:			
Allergies or any	other issues we should know about?		
	BEHAVIOR ACKNOWLE	DGEMENT	
ensure this expectati emphasizes cooperat guardian will be contact contact with others. can occur at any time violation of the behav	dventure teaching staff strive to provide a happy, safe, spirited ion is honored, all camp participants are required to sign a behation and respect for fellow students, teaching staff, the teaching acted if a camper engages in disrespectful, uncooperative or the Staff will generate a written report in the event of a second are depending on the severity of the circumstances. No refunds we wior contract. Guardian	vior contract at the time of g environment and museum reatening behavior, destruct nd third incident. Immediate ill be issued for dismissal fro	enrollment. This contract property. A parent or iveness or improper physical dismissal from the program om camp as a result of a
	SESSION REGISTRA	TION	
Session #	Class Name		Fee
		Total Fee: \$	
	Date: _		
Credit Card #	Exp. Date:	3-Digit	Lode:

^{*} Some camps have special fee schedules due to advanced content or limited space. See specific catalog description for details.