Spring Break Amazing Afternoons

A spring break adventure at the Museum & Aquarium for students age 5-12!

Mighty Mammals

March 13, 20 & 27, 2015 (All dates will offer the same programming)

Dive into the amazing life of the mighty river mammal! You'll be introduced to our museum mammals: the six-banded armadillo, North American river otters, and beavers. Enjoy fun, mammal-themed games and crafts, and leave with new amazing stories to tell!

Rocking Reptiles and Awesome Amphibians

March 14, 21 & 28 (All dates will offer the same programming)

Come face-to-face with snakes, turtles, toads, and tortoises! Discover what makes reptiles different from amphibians during our live animal program. Explore the aquarium with our expert educators and create a reptile-themed craft to bring home. You'll have an amazing time with lots of fun activities and great adventures!

All sessions will take place from 1-4 pm and a snack will be provided. Prices for each session are \$20 per student for non-members and \$15 per student for members. Registration is required by March 2, 2015. Refunds are permitted up to seven days before the program, with exception of low attendance or weather-related cancellations. For further information contact 563-557-9545 x 213 or mwersinger@rivermuseum.com.

Spring Break Day Camp Registration Form

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STUDENT INFORMATION:	• \$15/child (member rate)
Child's Full Name: Age :	• \$20/child (non-member rate)
Parent/Guardian Full Name: E-mail:	Select a Date: Mighty Mammals
Home Address: (City/State) (Zip Code)	- "
	Friday, March 13
Home Phone#: () Alternative/Cell Phone#: ()	Friday, March 20
MEDICAL INFORMATION	Friday, March 27
Emergency Contact Person: Relationship to Student:	-
Home Phone #: (Alternative/Cell Phone#: (Rocking Reptiles and
Does your child take any medications that we may need to know about? YES NO	Amazing Amphibians
If yes, please list them here:	Saturday, March 14
(Provide additional sheet if necessary)	Saturday, March 21
Allergies/Medical Conditions:	Saturday, March 28
Child's Preferred Physician/Hospital:	_
Child's Insurance/Policy #:	Total Amount Due (see pricing above):
PAYMENT METHOD	
My check is enclosed. (*Please make payable to "DCHS")	
Charge my credit card. * Select Card Type: MasterCard Visa American Express	
Name on Card:Exp. Date:	
Signature:	
The National Mississippi River Museum & Aquarium/Dubuque Historical Society has my authorization to obtain necessary medical treatment in the case of any emer indicated emergency contact is able to be reached at the time of such emergency. I agree that in no event will the National Mississippi River Museum & Aquarium/E injuries, accidents or losses suffered by my child/the participant while participating in any supervised programs and the Museum & Aquarium/Historical Society is h	Oubuque Historical Society be held liable for any
ture authorizes the Museum & Aquarium to photograph the registered participant for the reasonable use and purpose of promotional advertising for summer camp	• • • • • • • • • • • • • • • • • • • •
Parent/ Guardian Signature:Date:	