

**Calhoun County Museum & Cultural Center
2016 Registration Form for Summer Programs**

Please select program(s):

_____ **Monday, June 13; 10:30-11:30; Professor Brainstorm's Brilliant Idea (ages 11 & under)**
Columbia Marionette Theater. One adult must stay and supervise child(ren) for theater programs. Please indicate the total number in your family including adults: _____

_____ **Monday, July 11 from 10:30-12:00 (ages 7-12)**
Painting on Wood; Cost \$20

_____ **Monday, July 18 from 10:30-12:00 (ages 7-12)**
History Tour & Butter Making; Sponsored by Farm Bureau Ag in the Classroom

_____ **Monday, July 25 from 10:30-12:00 (ages 7-12)**
Painting on Canvas; Cost \$20

_____ **Monday, August 1 from 10:30-11:30; Rockin' Through the Ages (ages 11 & under)**
Columbia Marionette Theater. One adult must stay and supervise child(ren) for theater programs. Please indicate the total number in your family including adults: _____

Please use one form to list all children of the same household:

Name (1): _____ Age: _____

Name (2): _____ Age: _____

Name (3): _____ Age: _____

Name (4): _____ Age: _____

Phone Number (home): _____ Cell: _____

I _____ (Parent/Guardian) give permission for my
child(ren) _____

to attend the summer programs checked above at the Calhoun County Museum and Cultural Center. I agree to supervise my child(ren) while at the Museum if the need for supervision is indicated for the program for which I am registering. I will not hold the Museum, Calhoun County, employees of Calhoun County, or the staff/business which has been hired by Calhoun County responsible for any accidents that may occur while attending a program at the Museum.

If you do not use Facebook and would like to receive information on our programs by email, please give your email address: _____

Mail registration form & payment (if applicable) to: Calhoun County Museum
313 Butler Street, St. Matthews, SC 29135