

Glass Camp Registration



Glass Camp reservations must be accompanied by full payment of \$75. Please enclose a check, payable to The Corning Museum of Glass, or call 607.438.5126 with credit card information. You will receive confirmation and additional details after registration is complete. Space is limited.

Please indicate which camp you are registering for: Amazing Accidents (Ages 9–11)
 Art Experts (Ages 12–13)

Adult's Name: _____

Child's Name: _____ Age: _____

Address: _____

Phone: _____ Email: _____

MEDICAL INFORMATION

Describe any known allergies or medical conditions _____

Physician's Name and Phone: _____

EMERGENCY PHONE CONTACTS

1. Name: _____ Relationship: _____

Home: _____ Work: _____ Cell: _____

2. Name: _____ Relationship: _____

Home: _____ Work: _____ Cell: _____

PHOTO RELEASE

I hereby consent to and authorize the use and reproduction of any and all images (in all known formats) that are taken of my child/ward, _____, by The Corning Museum of Glass or anyone licensed by CMOG for any purpose without compensation to me.

All images are owned by CMOG. CMOG reserves the right to use these images in print or electronic publications, on our web site and in other educational content. I hereby acknowledge that I am 18 years of age or older and have read and understand the terms of this release.

Signature _____ Date _____

Print Name _____

Please return form to:

Corning Museum of Glass, Attention: Bonnie Wright, 1 Museum Way, Corning, NY 14830