



*Moss Mansion Museum and  
Billings Senior Platinum Program Present:*

**American Girl Doll  
Summer Camp  
*Like A Girl***



The Moss Mansion Museum is now accepting registration for the first annual American Girl Doll Summer Camp! This exciting program will be presented at the mansion in the summer of 2017 by Madison Duneman, Platinum Program participant, and other counselors over the age of 16. This year's theme is 'Like A Girl', based on American Girl doll *Samantha Parkington*.

Indoor and outdoor activities include creative lessons in math and science, a behind-the-scenes tour of the mansion, making ice cream, craft projects and journaling as participants learn more about *Samantha* and explore the advancement of women in the last century. All materials will be provided. Participants must be able to climb stairs, follow instruction, and work independently. Some activities will be outside, and some will be in rooms without air conditioning – please be sure to dress appropriately and to describe any sensitivities, allergies, and other considerations in the attached registration material. Supervision is not provided before or after the session times below.

- Who:** Girls ages 8 – 12
- Where:** Moss Mansion Museum and Grounds
- When:** Session One: July 17 – 21, 9am to 12pm, Monday - Friday  
Session Two: August 7 – 11, 9am to 12pm, Monday – Friday
- How Much:** \$150.00 per Participant per week; cash, check, credit or debit cards accepted. This fee is payable in advance; partial refunds can be requested up to one month in advance. Non-refundable after June 17, 2017.
- How Many:** Up to 20 Participants may attend each session. Registration is considered with full payment on a first come/first served basis.

To Register: Complete all information on the attached Registration Form and return to:

[madison@mossmansion.com](mailto:madison@mossmansion.com) or  
Summer Camp, Moss Mansion Museum  
914 Division Street, Billings, MT 59101.



**Registration and Risk & Consent Form**  
**American Girl Doll Summer Camp**  
*Like A Girl*



Session One – July 17-21

Session Two – August 7-11

*{Select ONE}*

Please submit a Registration/Risk and Consent form for each student you are enrolling. Students are ineligible to participate until payment is received and all required forms are on file.

*Please Print*

Name of Participant (one per form)		
Mailing Address		
City	State	Zip
Home Phone 406-672-0566		
Emergency Contact Name		Phone
Age	Gender	

*Please Print*

Parent or Guardian Of Participant		
Mailing Address		
City	State	Zip
Email address		
Phone		

I, \_\_\_\_\_, parent of \_\_\_\_\_,  
do give consent for this child to participate in the American Girl Doll Summer Camp at the Moss Mansion Museum. I understand that the camp begins at 9am each day, and that it ends at 12pm each day, and that additional supervision beyond these times is not provided by camp staff.

To ensure that my child has the most positive experience possible, I share any special conditions to be aware of (learning challenges, medical concerns, medications, recent injuries or illnesses, etc. Please use additional paper if necessary).

<input type="checkbox"/> I am aware of no special needs for my child.
<input type="checkbox"/> These special needs exist for my child that may require special care:

*Continued on page 4...*

**ACKNOWLEDGMENT OF RISK AND CONSENT FOR TREATMENT:** I acknowledge that there are risks inherent in any youth program, including but not limited to injury or death arising from: participant's failure to follow instructions of supervisors; communicable illness; and independent acts of third parties not under the control of supervisors. I release Moss Mansion Museum, or any person working on their behalf, from liability for any bodily injury sustained and loss of damage of any personal article while on the premises or participating in any activity sponsored by the Moss Mansion Museum. In order to minimize risks to my child or other participants, I will take responsibility to see that my child is prepared for all activities and is in good health each day of the session. In case of medical emergency, I understand that every reasonable attempt will be made to contact me or the emergency contact named herein. However, in the event that I or my named contacts cannot be reached, I give my permission to the adults in charge of the Camp to secure emergency medical treatment for my child. I agree to pay for any charges for emergency medical treatment that are not covered by my personal health insurance. This acknowledgment applies to the session indicated above for which I may register my child.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**MEDIA RELEASE:** I give permission for my child to be photographed, filmed, interviewed, and have work samples published in print and/or on the Internet for public relations or archival purposes only.

**Yes**       **No**

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_