



## Program Registration Form

Name \_\_\_\_\_ Date \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_  
 Emergency Contact Name and Phone Number \_\_\_\_\_  
 E-Mail Address \_\_\_\_\_

Participant Name	Museum Member?	Program Name	Grade	Fee

Total Payment Enclosed: \_\_\_\_\_

VISA or MasterCard Number \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Verification Code: \_\_\_\_\_ (last 3 #s on the back of card) Name on Card: \_\_\_\_\_

**Mail or drop off your payment: Joliet Area Historical Museum, 204 N. Ottawa St., Joliet, IL 60432.**  
**Registrations may be taken over the phone or via fax with a VISA or MasterCard.**  
**Phone (815) 723-5201, ext. 235 or 226 Fax (815) 723-9039**

**Refund Policy:** All refunds will be subject to a \$5 handling fee for all participant cancellations, with the exception of medical necessity. A doctor’s note must be submitted with the refund request for medical necessity. Programs cancelled by the Joliet Area Historical Museum will be refunded in their entirety.

**Liability:** The Joliet Area Historical Museum assumes no responsibility for injury or loss of personal property. It is recommended that participants make provisions for this coverage with their own insurance company.

**Photography:** Registrants and participants permit the Museum to take photos and videos of themselves or minor children during Museum programming for use as the Museum deems appropriate.

