



Mercer's Wizarding Academy Mercer Museum 2026 Summer Camp

Dear Parent/Guardian:

The Mercer Museum looks forward to providing an engaging and rewarding camp experience for your child this summer.

In this packet you will find:

- Health & Safety Form
- Participation Consent Form
- Summer Camp Information & Guidelines

Please complete, sign and return the attached Participation Consent form and Health & Safety form to the Mercer Museum no later than **Monday, June 1, 2026**

The forms can be emailed via scanned PDF to Katy Pownall (kpownall@mercermuseum.org) or sent via mail to:

Mercer Museum
Attn: Katy Pownall
84 S. Pine Street
Doylestown, PA 18901

Please make a copy of these documents for your own records before sending in the signed forms and guidelines.

If you have any questions about the information provided in this packet, please feel free to contact Katy Pownall, Manager of Education, at 215-345-0210, ext. 123 or via email at kpownall@mercermuseum.org.

Sincerely,

Department of Community Services
Mercer Museum & Fonthill Castle



Health & Safety Form

Mercer Museum 2026 Summer Camp

Please check which camp session your child is attending:

- Session #1: Monday, July 6 – Friday, July 10, 2026 | 9:00 am – 12:00 pm
- Session #2: Monday, July 13 – Friday, July 17, 2026 | 9:00 am – 12:00 pm
- Session #3: Monday, July 20 – Friday, July 24, 2026 | 9:00 am – 12:00 pm
- Session #4: Monday, July 27 – Friday, July 31, 2026 | 9:00 am – 12:00 pm

Camper Details:

If you requested your child be placed in the same group as another camper, please list that camper. (Not guaranteed):

Contact Information:

Child Name:

Age (as of June 30, 2026): _____ Gender: _____

Address: _____

School: _____ What grade are you entering in September 2026? _____



Health & Safety Form (continued)

Mercer Museum 2026 Summer Camp

Parent/Guardian #1 Full Name: _____

Parent/Guardian #1 Cell Phone (mandatory): _____

Parent/Guardian #1 Home Phone: _____

Parent/Guardian #1 Email: _____

Parent/Guardian #2 Full Name: _____

Parent/Guardian #2 Cell Phone (mandatory): _____

Parent/Guardian #2 Home Phone: _____

Parent/Guardian #2 Email: _____

Additional Emergency Contacts (please list two other than parents/guardians):

Contact #1 Full Name: _____ Relationship: _____

Cell Phone (mandatory): _____

Contact #2 Full Name: _____ Relationship: _____

Cell Phone (mandatory): _____



Health & Safety Form (continued)
Mercer Museum 2026 Summer Camp

Additional Authorization for Pick-Up:

Please list any person other than the above listed parent/guardian to whom the camper may be released from camp. This includes parents/guardians of other campers or junior counselors, babysitters, friends or any other authorized person.

Full Name: _____ Relationship: _____

Cell Phone (mandatory): _____

Parent/Guardian Signature: _____ Date: _____

Full Name: _____ Relationship: _____

Cell Phone (mandatory): _____

Parent/Guardian Signature: _____ Date: _____

Illness Policy:

It is our policy to require all parents to keep home any child who exhibits any of the following symptoms (accordingly, we reserve the right to contact a parent or emergency contact to have the child picked up if they exhibit any of the following symptoms): diarrhea, severe coughing, difficult or rapid breathing, yellowish skin or eyes, pinkeye/conjunctivitis, vomiting, contagious rashes, unidentifiable rashes, fever (over 100 degrees orally or 101 degrees in the ear) and head lice.

We also ask that any children who require more than a reasonable accommodation make alternative arrangements, or if already at camp, be picked up by a parent/guardian or emergency contact.

Mercer’s Wizarding Academy also utilizes a “24-hour fever-free policy.” This policy mandates that any child sent home with a fever cannot be readmitted to camp within 24 hours. Children with vomiting and/or diarrhea will be sent home and/or need to stay home for 24 hours until free of vomiting and/or diarrhea for 24 hours WITHOUT medication.



Health & Safety Form (continued)

Mercer Museum 2026 Summer Camp

Medical Information:

Please list any medical concerns, behavioral conditions, dietary restrictions, allergies, limitations or special needs. Please share as much information as possible to ensure that your child has a positive and rewarding camp experience. If your child has no medical considerations, please check the box below.

- My child does not have any medical concerns, behavioral conditions, dietary restrictions, allergies, limitations or special needs.

Parent/Guardian Initial: _____

Please Note: If medication is needed during the day, it must be dispensed by a parent/guardian either before or after camp. Camp staff is not allowed to dispense any medication for any purpose. In some cases, museum staff may contact you to gather further information regarding your child's needs.



Camp Participation Consent Form

Mercer Museum 2026 Summer Camp

I, _____ (print parent/guardian name), parent or legal guardian of _____ (print child name), hereby agree to allow my child to participate in the 2026 Mercer Museum Wizarding Academy Summer Camp. I understand and acknowledge that by allowing my child to participate in this camp, I will be responsible for damage to property of the Museum and private parties caused by my child, and for any injuries to my child or other parties, which may result from his/her participation in camp activities. I hereby release and hold harmless the Museum, its employees or agents from liability for any such injury or loss.

I authorize the Mercer Museum staff to arrange for emergency medical care as deemed necessary. I authorize hospital personnel to provide emergency medical treatment for my child.

I give permission to the Mercer Museum for publication of photos and videos taken of my child participating in camps for the summer of 2026. Such photos may be used for public relations, marketing and camp activity purposes. I understand that my child's name will not be used.

I understand that neither my child nor I will be due any royalty or other compensation for these photos. I relinquish any right to said photos or videos.

Child's Name: _____ Date: _____

Parent/Guardian Print Name: _____

Parent/Guardian Signature: _____ Date: _____

Address: _____

Cell Phone: _____

Home Phone: _____

Parent/Guardian Email: _____



Summer Camp Information & Guidelines

Mercer Museum 2026 Summer Camp

Camp Arrival & Departure

Location: Mercer Museum
84 S Pine Street
Doylestown PA 18901

Please note: Our parking lot entrance is located on Scout Way between Pine and Green Streets

Time: Drop-off can occur between 8:30 am – 8:55 am
Camp begins at 9:00 am sharp
Pick-up: 12:00 pm

- All parents or guardians **MUST** sign their children in and out of camp each day. There will be a sign-in and sign-out sheet with a camp staff member outside on the museum plaza every day. This procedure is important to ensure that all children are safe during camp and after camp.
- No child may be released to an adult other than a parent/guardian unless camp staff has been notified beforehand in writing and the other party has been authorized on camp forms.
- All parents, guardians, or other authorized parties **MUST** show a photo ID at pick up before any camper is released to them.
- At the end of camp each day, parents, guardians, or other authorized parties will form a line until campers are released by counselors.

Attendance

- Please inform us prior to camp start time if your child is unable to attend camp due to illness or for any other reason by calling Katy Pownall at 215-345-0210 ext. 123 or via email at kpownall@mercermuseum.org.

Departure from Premises

- No child may leave without their designated parent/guardian from the museum premises for any reason.



Summer Camp Information & Guidelines (continued)

Mercer Museum 2026 Summer Camp

Discipline Policy

- Misbehavior is defined as not respecting other campers, camp staff, or museum property; refusing to listen or follow instructions; improper use of tools, props or museum property.
- The first instance of misbehavior will result in a written warning; the second will result in the immediate, non-refundable cancellation of the child's enrollment in camp.

Cancellation/Refund Policy

- Refunds will be given only if you notify us at least 14 days prior to your child's camp start date. No refunds will be given after that deadline for any reason.

What to Wear to Camp

- Comfortable play clothing – camp activities can be messy!
- Sneakers or other comfortable, close-toed shoes
- Costumes (wizarding attire) are welcome

What to Bring to Camp

- One snack every day, to be eaten mid-session (we have a peanut and tree nut policy – please see below)
- One refillable water bottle filled with only water at the start of every camp day
- Sunscreen and/or sun protection for days spent outside (you will be notified in advance)
- Ideally, please place everything in a small drawstring bag – the smaller the bag, the better! One bag per camper is preferred

What NOT to Bring/Wear to Camp

- NO CELL PHONES or DIGITAL DEVICES (except to be used for emergencies to contact parents/guardians)
- No toys or other objects that could be damaged or lost.
- No flip-flops or other open-toed shoes.



Summer Camp Information & Guidelines (continued)

Mercer Museum 2026 Summer Camp

At the Mercer Museum, we aim to create an environment that is “Nut Aware.” Please review our Nut Free Policy to fully understand the guidelines.

Nut Free Policy

- Mercer Museum strives to provide a nut-free environment for our campers.
- We ask that all camp families please respect these safety concerns. Please ensure that your camper does not come to camp with any foods that “may contain” peanuts or tree nuts, that are “processed in a facility with” peanuts or tree nuts, or foods that have similar labeling.
- Campers are not allowed to share or exchange food.
- If you have any questions regarding this policy, please contact Katy Pownall at 215-345-0210 ext. 123 or via email at kpownall@mercermuseum.org.

I hereby acknowledge the above guidelines and agree to the terms of Mercer Museum’s Wizarding Academy summer camp.

Parent/Guardian Signature: _____ Date: _____