

HISTORY ALIVE!

The Merchants and Drovers Tavern Museum Living History Club for Children

ENROLLMENT APPLICATION

Child's Full Name: _____

Date of Birth _____ Grade (as of 9/1/09): _____

Child's School: _____

Home Address: _____

City: _____ State: _____

Parent's Home Phone: _____ Parent's Cell Phone: _____

E-mail address: _____

Mother's Name: _____

Father's Name: _____

1. Emergency Contact: _____ Relationship: _____

Phone: _____

2. Emergency Contact: _____ Relationship: _____

Phone: _____

Parent/Guardian Signature: _____

Date: _____

To be completed by child interested in joining the club:

What type of history are you interested in? What particular aspects of that history do you find interesting/fascinating? (i.e. U.S. Civil War, Ancient Greece, African history, Early American)
