FWMSH LITTLE SCHOLAR’S PROGRAM
ADMISSION REQUIREMENT FORM

Museum Little Scholar’s Program requires the following acknowledgments by October 1, 2020 or 4 days prior to the first day of the child’s first class once the school year begins. *A child may not begin Museum Little Scholar’s Programs until the Admission Requirements below have been submitted.*

A link to the FWMSH Little Scholar’s Program Parent Handbook: Operational Policies & Notice Regarding COVID-19 may be found on the Museum Little Scholar’s Program web page [https://www.fwmuseum.org/learn/little-scholars-program/](https://www.fwmuseum.org/learn/little-scholars-program/). Paper copies of these documents are available upon request by sending an email to LittleScholars@fwmsh.org.

<table>
<thead>
<tr>
<th>Family Last Name: _________________________________</th>
<th><em>One Admission Requirement Form must be submitted per family.</em></th>
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List the first names and ages (as of 9.1.20) of all children participating in Museum Little Scholar’s Program classes:

<table>
<thead>
<tr>
<th>Name _______________________________</th>
<th>Grade ___</th>
<th>Name _______________________________</th>
<th>Grade ___</th>
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My signature below verifies that I have read, understand and agree to: (checking all boxes is required for admission)

- [ ] The FWMSH Little Scholar’s Program Discipline and Guidance Policy
- [ ] The FWMSH Little Scholar’s Program Acknowledgment and Waiver

My signature below verifies that I have read, understand and (select ONE)  [ ] AGREE  [ ] DO NOT AGREE to the Museum Little Scholar’s Program Photography and Filming policy.

Two custodial parent/guardian signatures are required.

- Parent/Guardian #1 Signature _______________________________  [ ] Parent  [ ] Guardian
- Parent/Guardian #1 Printed Name _______________________________
- Date of Signature _______________________________

- Parent/Guardian #2 Signature _______________________________  [ ] Parent  [ ] Guardian
- Parent/Guardian #2 Printed Name _______________________________
- Date of Signature _______________________________