2022 Rural Life Apprentice Program

DATES: Monday, June 6 – Friday, June 10, 2022

TIME: 8:00 am – 12:30 pm

PLACE: LSU Rural Life Museum
4560 Essen Lane (Essen Lane at I-10)

AGES: Entering 4th grade through 8th grade (2022 – 2023 school year)

COST: $100.00 per child

STUDENT INFORMATION:

Last Name: __________________________   First Name: __________________________

Grade (2022-2023): ________   Gender: ________________   Age: __________

PARENTAL INFORMATION:

Mother’s Name: __________________________   Phone: __________________________

Father’s Name: __________________________   Phone: __________________________

Email for registration confirmation and notices: __________________________

Address: ____________________________________________________

City: __________________________   State & Zip: __________________________

Name other people (other than parents/guardians listed above) that have permission to pick up your child:

________________________________________________________________________________

EMERGENCY INFORMATION:

Name: __________________________   Phone: __________________________

Relationship to child: __________________________
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PARENTAL CONSENT:

I understand that my child, ___________________________, will be participating in activities that entail working with heat and hand tools during the Rural Life Apprentice Program Monday, June 6 – Friday, June 10, 2022, and do hereby give permission for my child to do so.

A new activity this year will be a BEEKEEPING EXPERIENCE AND HONEY TASTING. Live bees will be present. If your child has an allergy to BEES or HONEY, this experience will be one of the activities on Thursday, June 9. Please circle whether or not you want your child to participate in the Beekeeping Experience and Honey Tasting.

YES  NO

MEDICAL CONSENT:

If an emergency arises, the Rural Life Apprentice Program will first try to contact the child’s parents/guardian. If neither can be reached, I give permission to: _______________________________ Phone: _______________________________
to be wholly responsible in the event of an emergency. I give the LSU Rural Life Museum unlimited power of authority to seek emergency care at the medical or hospital he/she chooses, with liability for any expense incurred being my responsibility.

ALLERGIES TO FOOD/MEDICATIONS:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

PHOTO/VIDEO RELEASE:

I hereby grant Louisiana State University permission to make photographs, videotapes, and/or sound recordings, separately or in combination, of me. Further, I relinquish and give to Louisiana State University all rights, title, and interest I may have in the finished photographs, videotapes, and/or sound recordings for the purpose of the promotion of Louisiana State University by the LSU Office of University Relations and LSU Rural Life Museum.

Parent or Guardian Signature  Date

Please Return To: Rural Life Apprentice Program
LSU Rural Life Museum
P.O. Box 80498
Baton Rouge, LA  70898

Make Check Payable To: LSU Rural Life Museum