



Education Program Registration Form

Important Registration Information - PLEASE READ

- Please complete this form in legible print.
- We cannot reserve space without full registration and payment.
- We reserve the right to cancel a program if minimum registration requirements are not met.
- Complete refunds minus a \$25 processing fee will be given up to two weeks prior to the start date of the program.

Registration Questions? Contact (386)-428-3310 or michelle@marinediscoverycenter.org for more information.

Child

First _____ Last _____ Gender: Male ____ Female ____

New to MDC ____ Returning to MDC ____ Birth date ____/____/____ Age ____

Please indicate the child's experience in the following outdoor activities (Beginner, Intermediate, Advanced).

Swimming _____ Kayaking _____ Archery _____

Parent/Guardian - Contact Information

Parent/Guardian #1

First _____ Last _____

Street Address _____ Town/City _____ State ____ Zip Code _____

Home Phone _____ Cell phone _____ E-mail _____

Parent/Guardian #2

First _____ Last _____

Street Address _____ Town/City _____ State ____ Zip Code _____

Home Phone _____ Cell phone _____ E-mail _____

Membership

Are you a member of Marine Discovery Center? Yes ____ No ____

If yes, what name is the membership registered under? _____

Please check how you heard about the Marine Discovery Center Education Programs.

Website School _____ Flyer Word of Mouth Other _____

Please See Page Two

For internal use only: Receipt #: _____

SHC: SS WW SC: SS WW LH LB MM AA SF LAG SCU A CP: A HSS HFS Scouts

Please read the following agreements and policies carefully before signing with your initials.

Terms of Agreement

Media Release

I hereby give permission for my child to be photographed during the Marine Discovery Education Program and for those photographs, as well as published videos or audio transmissions, to be used in news media and promotional segments, advertising, social media, websites, public information and cable television, DVDs, or any other lawful purposes. I understand that although my child's photograph may be used for advertising: his or her identity will not be disclosed, I do not expect compensation, and all photos are the property of Marine Discovery Center and its affiliates.

Parent's/Guardian's Initials _____

Transportation Release

I hereby give permission for the transportation of my child for official Marine Discovery Center Education Program activities by modes of transportation agreed to by the camp organizers. In the event of inclement weather or emergency, I allow Marine Discovery Center staff to transport my child as necessary.

Parent's/Guardian's Initials _____

Form of Consent (Required)

I have read the description of the Marine Discovery Center Education Programs and find it acceptable for my child's involvement. My child has permission to participate in the field trips on and off the center's property. I recognize the educational benefits of this program and acknowledge that participation is completely voluntary. I, the parent or guardian, do hereby agree to release indemnity and hold harmless the Marine Discovery Center for any bodily injury or any loss, injury, or damage to property resulting directly and indirectly from the involvement in this program.

Parent's/Guardian's Initials _____

Behavior Policy (Required)

I understand that the Marine Discovery Center is an educational program that requires strict safety and behavior guidelines. The staff at the center reserves the right to terminate the attendance of any child due to insubordinate issues without refund.

Parent's/Guardian's Initials _____

Pick Up/Drop Off Policy (Required)

I understand that pick up and drop off times for Marine Discovery Center Education Programs are set to allow staff to prepare and clean up before and after. Children must be picked up within 15 minutes after the end time of the program, or a \$10 fee will be incurred. After care may be available for certain programs if requested. For more information please contact the education department at (386)-428-3310.

Child's Name: _____

Parent/Gaurdian Signature: _____

Date: _____

Printed Name of Parent/Gaurdian: _____