

SEA Camp 2018

Registration May 5th

8:00 AM – 10:00 AM at the Texas Maritime Museum

- ✓ Faxed, emailed, or mailed forms will be accepted beginning **May 7, 2018**.
- ✓ Fax: (361) 729-9938.
- ✓ Email: educator@texasmaritimemuseum.org
- ✓ Address: 1202 Navigation Circle, Rockport, TX 78382
- ✓ Drop-off in the Administration Offices next door to the Museum. (White building/blue roof behind old chamber of commerce). **361-729-1271**.
- ✓ Please Print! Registration must be clear and legible.
- ✓ **Residents of Aransas County are FREE!** Non-Residents \$50.00 Fee.

Child's Name: _____ Gender: Male Female
Parent/Guardian Name: _____ **Relation:** _____
Daytime Phone(s): _____ **Emergency Phone:** _____
Mailing Address: _____ **Email Address:** _____

Parent/Guardian Signature

Print Name

Date

Parent/Guardian Initial

***Authorization for Emergency Medical Attention:** In the event that I cannot be reached to make arrangements for emergency attention, I authorize the Texas Maritime Museum or person in charge, to arrange treatment at the closest medical facility.

***Water Entrance Permission:** I give permission for my child to participate in activities involving water, such as Rockport Beach Saltwater Pool, Goose Island State Park, Little Bay and water games.

***Transportation:** I give my consent for my child to be transported by an ACISD bus and driver while supervised by S.E.A. Camp staff on field trips.

***Publications:** I give my consent for my child to be photographed and/or videotaped for publicity of S.E.A. Camp events.

***Release of Liability:** I, being the parent or guardian of the above stated child, release the Texas Maritime Museum, the Fulton Mansion, Goose Island State Park, Texas Parks and Wildlife Department Coastal Marine Fisheries Lab, Bay Education Center, Rockport Beach Park and staff, Rockport Country Club, Board members, volunteers or any representatives thereof associated with the S.E.A. Camp program, from any potential liability for any and all claims of injury, illness, and/or accident which may directly or indirectly result from my child's participation in the S.E.A. Camp program(s).

If applicable, please list of your child's medications, food allergies or special medical related conditions

*Circle the grade your child was in during the **2017-2018** school year! Then select one week of SEA Camp. (The grade they are attending as of May 5, 2018).

Check One Week: Camp Hours (9:00AM–12:00PM)

- | | | |
|---------------------------------|---|--|
| <input type="checkbox"/> Week 1 | 1 st & 2 nd Grade | June 11 th – 15 th |
| <input type="checkbox"/> Week 2 | 3 rd & 4 th Grade | June 18 th – 22 nd |
| <input type="checkbox"/> Week 3 | 1 st & 2 nd Grade | June 25 th – 29 th |
| <input type="checkbox"/> Week 4 | 3 rd & 4 th Grade | July 9 th – 13 th |
| <input type="checkbox"/> Week 5 | 5 th Grade | July 16 th – 20 th |

Circle Grade: ... 1st ... 2nd ... 3rd ... 4th ... 5th

Campers will receive a free S.E.A. Camp T-shirt. Please **circle** the child's shirt size below.

Child: Small (6/8) Medium (10/12) Large (14/16) **Adult:** Small Medium Large XL

I authorize my child to be released only to the following persons (Please Print):

1. _____ 2. _____
 3. _____ 4. _____

YES! I would be interested in learning about a \$40 Family Membership (2 Adults, 2 Children) to the Museum which includes unlimited Museum visits, plus store and camp discounts for one year.

Please cut off and keep.

Name: _____ **S.E.A. Camp Hours:** 9:00 AM – 12:00 PM **Location:** Texas Maritime Museum
Camp Contact: 361-729-1271 or educator@texasmaritimemuseum.org

- Week 1, June 11th – 15th Week 2, June 18th – 22nd Week 3, June 25th – 29th Week 4, July 9th – 13th Week 5, July 16th – 20th