

The Ward Melville Heritage Organization

presents

salt marsh detectives!

August 14 - August 18 • Ages 10-12

INSTRUCTIONS FOR APPLYING:

1. Contact WMHO to reserve a space for your child: (631) 751-2244.
2. Fee: \$275.00 per child. Register by July 15th for **Early Bird Special**: \$265.00
3. Mail the completed application to the following address with your check made payable to:
Ward Melville Heritage Organization, P.O. Box 572, Stony Brook, NY 11790.

**Minimum of
10 students,
Maximum 15
SO RESERVE
EARLY!**

PERSONAL INFORMATION:

Student's Name: _____ Grade Level: _____

Parent/Guardian's Name: _____

Address: _____

Home phone: _____ Evening (if different): _____

Cell phone: _____ Email: _____

Child's School: _____

EMERGENCY CONTACT INFORMATION:

Emergency Contact Name: (other than parent parent/guardian) _____

Emergency contact phone: _____

Doctor's Name: _____ Doctor's phone: _____

In the event of an emergency, does the Ward Melville Heritage Organization have permission to transport your child to the emergency room? _____

Preferred Hospital: _____

Medical insurance carrier and member number: _____

Known medical conditions: _____

Known allergies: _____

Current medication(s): _____

TRANSPORTATION:

Parents/guardians are responsible for the transportation of child to and from class location at Dr. Erwin Ernst Marine Conservation Center on West Meadow Creek.

PARENTAL APPROVAL:

I. Proximity to Water

Since this program takes place in close proximity to water, your child cannot participate unless he/she is able to swim.

Please sign to affirm that your child is able to swim: "This is to affirm that my child has the ability to swim"

Parent/ Guardian Signature

Date

II. Expectations for Safety of Children

- WMHO employees will discuss rules and safety with students.
- Parents/ Guardians must certify that all Emergency Medical Information on file with this registration form is current.

III. Waiver

All claims against Ward Melville Heritage Organization or its agents with regard to accident, illness, injury, damage, death or other loss incurred or suffered by your child during the "Salt Marsh Detectives" programs are hereby expressly waived.

Please sign to below to authorize this waiver, as well as the above written information:

Parent/ Guardian Signature

Date