

# Release and Registration Form

In order to process your enrollment accurately, please complete a separate form for each camper.

Mail Completed forms and payment to:

Saint Louis Science Center Public Programs Department Summer Science Blast 5050 Oakland Avenue, Saint Louis, MO 63110

Telephone registrations cannot be accepted.

For questions about this form, or Summer Science Blast, please call 314.289.4439

#### **Registration Form**

Camp Title		Dates	Time	Tuition	
				\$	
				\$	
				\$	
				\$	
				\$	
Which Parent Open House session	on will you be attending?	•		June 1 🔲	July 13
SUPERVISED BEFORE AND A	FTER CARE				
Before Care (\$50 x Number of w	reeks) 7:30am - 9am			\$	
After Care (\$50 x Number of weeks) 3pm - 5:30pm				\$	
ADDITIONAL FEES					
Campers are required to wear th Summer Science Blast T-shirt	eir camp shirts EVERY da	,		enrollment.	
Campers are required to wear th	eir camp shirts EVERY da - MARK SIZE L	ay of camp.	ılt XL	\$	
Campers are required to wear th Summer Science Blast T-shirt  Youth S Youth M Youth I  Additional Summer Science Bla	eir camp shirts EVERY da - MARK SIZE L	ay of camp.	ılt XL		
Campers are required to wear th Summer Science Blast T-shirt - ' Youth S ' Youth M ' Youth I  Additional Summer Science Bla ' Youth S ' Youth M ' Youth I	eir camp shirts EVERY da - MARK SIZE L	ay of camp.  Adult L	ılt XL		
Campers are required to wear th Summer Science Blast T-shirt - Youth S Youth M Youth I Additional Summer Science Bla Youth S Youth M Youth I ALTERNATE PAYMENTS  If you are using a gift certificate	eir camp shirts EVERY da - MARK SIZE L	ay of camp.  Adult L	ılt XL	\$	
Campers are required to wear the Summer Science Blast T-shirt	eir camp shirts EVERY da - MARK SIZE - Adult S	ay of camp.  Adult L	ılt XL	-\$	
Campers are required to wear the Summer Science Blast T-shirt - Youth S  Youth M  Youth I Additional Summer Science Blast T-shirt - Youth S  Youth M  Youth I Youth I You are using a gift certificate please subtract the amount of a Total Payment Enclosed  PAYMENT METHOD  Check (Payable to Saint Louis S  Credit Card  Please call to complete credit c	eir camp shirts EVERY da - MARK SIZE  - Adult S - Adult M - st T-shirt (\$14)  - Adult S - Adult M - e, coupon, or scholarship sliternate payment here.  Science Center)	ay of camp.	ılt XL	-\$	
Campers are required to wear th Summer Science Blast T-shirt - ' Youth S ' Youth M ' Youth I  Additional Summer Science Bla ' Youth S ' Youth M ' Youth I  ALTERNATE PAYMENTS  If you are using a gift certificate please subtract the amount of a  Total Payment Enclosed  PAYMENT METHOD  Check (Payable to Saint Louis S) Credit Card	eir camp shirts EVERY da - MARK SIZE  - Adult S - Adult M - st T-shirt (\$14)  - Adult S - Adult M - e, coupon, or scholarship sliternate payment here.  Science Center)	ay of camp.	ılt XL	-\$	
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Campers are required to wear the Summer Science Blast T-shirt - Youth S  Youth M  Youth I Additional Summer Science Blast T-shirt - Youth S  Youth M  Youth I Youth I You are using a gift certificate please subtract the amount of a Total Payment Enclosed  PAYMENT METHOD  Check (Payable to Saint Louis S  Credit Card  Please call to complete credit c	eir camp shirts EVERY de - MARK SIZE - Adult S	ay of camp.	ılt XL	-\$	

Family & Friends PLUS and Family & Friends MAX members are eligible for discounts! Upgrade your membership or join today and get an incredible discount on registration fees for Summer Science Blast as well as a range of other benefits valued at more than \$650! For more information visit slsc.org or call Membership Services at 314.289.4491.

### **Registration Form**

Student's Name	
Select Camp Age Level (circle one)	4-5 6-7 8-9 10-12 13-16
Student's Birth Date	
Allergies (any type)	
Medications (medications will not be	given without written instructions from child's physician]
dedical Conditions or Behavioral	Concerns (please list all)
Primary Physician	
Physician Phone	
lospital of Choice	
f you or the physician of your che child to the nearest hospital (circle one	oice cannot be reached, do you authorize our staff to accompany your el Yes No
Parent/Guardian's Name	
Address	
Dity	StateZip
Phone # during camp hours	
Email	
Emergency Contact Name	
Contact's Relationship to Child_	
Phone # during camp hours	
n the event that I cannot drop off or pi	ick up my child for camp, I authorize the following person(s) to do so:
Name	Relationship
Name	Relationship
ou may add names to this form during proper parking sign for camp.	g camp; notify the group leader. The above person(s) will be required to show
Signature of Parent/Guardian	
Date	

## **Registration Form**

PHOTO RELEASE FORM (OPTIONAL)  I give my permission for the Saint Louis Science Center to use photographs of my child for purposes of publicity or publications, both
internally and externally through various media sources, including but not limited to, newspaper, magazine, internet and television.
LIABILITY RELEASE FORM (REQUIRED) Release is made as of (date) by the undersigned. I understand and appreciate
that participation in the Summer Science Blast Program involves potential, although highly unlikely, loss or damage to personal property and bodily injury.
In consideration of my being permitted, or my child being permitted, to participate in the scheduled activity, I hereby release and hold harmless the Saint Louis Science
Center as sponsor, its commissioners, officers, trustees, employees, affiliates and agents [the"Released Parties"] from any and all actions, damages, claims or demands which I or my child[ren], our heirs, executors, administrators or assigns may have against the Released Parties for all bodily injuries, known misconduct or grossly negligent act, of any of the Released Parties.
I, the undersigned, have read this release and understand its terms. I realize this is a partial release of liability, and limits, to some extent, my rights to sue in the event of any loss or injury, and I execute it voluntarily and with the full knowledge of its significance. I agree to follow, or cause to be followed, all directions of the activity's leaders.
I understand that cell phones and cash are not allowed at camp, and my child(ren) will not bring a phone or money to camp. Phones and money will be confiscated and returned to the parents. A second offense may warrant permanent expulsion from camp, and forfeiture of all fees.
I, the undersigned, am the parent or legal guardian of the following named minor and enter into the foregoing release on the minor's behalf.
Signature of Parent/Guardian
Date
For office use only
Payment type and amount Date Rec'd
Rec'd byConfirmation #

#### Your feedback is important to us

Please tell us where you heard about Summer Science Blast:
☐ We have previously attended Summer Science Blast camps.
☐ From a friend, Science Center staff member, or word of mouth.
☐ While visiting the Saint Louis Science Center.
☐ At a camp opportunities fair or similar event. Where?
☐ Advertisement in a print publication. Which one? (ex. Alive Magazine,
Ladue News, RFT, etc.)
Other (please explain)