

Forest School & Field Studies 2021 Registration Form

Student Information

Full Name	Date of Birth	____ / ____ / ____ <small>Month Day Year</small>	Age
School Situation <input type="checkbox"/> Homeschool <input type="checkbox"/> Public/Private School – Hybrid <input type="checkbox"/> Public/Private School – Fully Remote <input type="checkbox"/> Public/Private School – In Person			

Parent/Guardian Information

Parent/Guardian 1

Full Name		Relationship to Camper	
Street Address			
City	State	Zip	
Email Address	Cell Phone, or Best Phone to Reach You <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> W	Alternate Phone Number <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> W	

Parent/Guardian 2

Full Name		Relationship to Camper	
Street Address			
City	State	Zip	
Email Address	Cell Phone, or Best Phone to Reach You <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> W	Alternate Phone Number <input type="checkbox"/> C <input type="checkbox"/> H <input type="checkbox"/> W	

Emergency Contacts

Name of Adult	Relationship to Student	Cell Phone	Home Phone	Work Phone

Medical Information

Does your child have any of the following? (Check all that apply)		
<input type="checkbox"/> Food/Medication Allergies	<input type="checkbox"/> Asthma	<input type="checkbox"/> Seizure Disorder
<input type="checkbox"/> Insect Sting Allergies	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Other
If you checked any of the above, please note specifics and possible reactions. Included your Emergency Action Plan if you have one.		
Does your child have any special needs including, but not limited to: physical limitations, difficulties, disorders, or disabilities? If so, please provide specific information. (Please include information on any Autism Spectrum Disorder here)		
Will your child need to receive medication during the day? If yes, list medication, dosage, and time to administer. (ALL Medications must be in the original container and accompanied by a physician's note, or they will NOT be administered.)		
PLEASE ATTACH ANY ADDITIONAL DOCUMENTATION TO THIS APPLICATION.		

Program Selection

Forest School and Field Studies are tuition-based programs. Your Tuition Agreement will be sent upon acceptance.

Forest School Spring 2021

Meets 18 days. Class Times: 10:00am - 3:30pm

Ages: 4-12 Year Olds

Fees	Non-Member	Member
1 st Child	\$615	\$600
2 nd Child	\$605	\$590
3 rd Child	\$595	\$580

Select Preferred Session:	
	Tuesdays: January 12 - June 8, 2021
	Wednesdays: January 13 - June 9, 2021
	Thursdays: January 14 - June 10, 2021
	Fridays: January 15 - June 11, 2021
	Any Session is acceptable

Field Studies Spring 2021

Meets 18 days. Class Times: 10:00am - 3:30pm

Ages: 13-15 Year Olds

Fees	Non-Member	Member
1 st Child	\$720	\$700
2 nd Child	\$700	\$680
3 rd Child	\$680	\$660

Select Session:	
	Thursdays: January 14 - June 10, 2021

Parent Agreement and Expectations

I give permission for my child to participate in the Cumming Nature Center Forest School. I understand that the program will take place at the Cumming Nature Center campus in Naples, New York.

I agree to assume all risks and liabilities associated with my child's participation in said programs and to hold the Rochester Museum & Science Center and its Camp Program harmless from all claims which may arise as a result of participation in forest school activities.

I understand that participation in these activities is voluntary. I understand that students will have the opportunity to participate in somewhat dangerous activities. These activities include but are not limited to:

- Fire building & maintenance
- Using a handsaw for cutting fire wood
- Whittling and carving with a pocket knife
- Climbing trees
- Playing in creeks
- Building shelters and forts

I give permission to the RMSC staff to administer any medical attention to my child and understand I am liable for any medical care costs that are incurred in the case of emergency treatment. The RMSC will make every effort to contact the parents/emergency contact persons in case of any emergency.

I give permission for my child to participate in any off-campus field trips for the program (if applicable).

I understand that any child exhibiting behavior that may cause harm to themselves, other students or staff will be asked to leave. These behaviors include, but are not limited to hitting, kicking, biting, spitting, sexual harassment and/or possessing weapons or any illegal substances. I have discussed the above rules with my child and agree to abide by them. **I understand that if my child does not follow these rules, a personal conversation between an administrator and the parent/guardian will occur prior to any action being taken. Students that do not abide by these rules will be asked to leave the program. Refunds will not be given due to expulsion or suspension from a program.**

I understand that in the event of a mandatory lock-down as determined by government officials, Forest School instruction will be provided via online platforms and the program will continue virtually until in-person gatherings are allowed to resume. Tuition will not be reimbursed.

I give permission to the RMSC to use images of my child for marketing and promotion materials within the RMSC brands. Identifying information will be removed from images before use. **(please see instructor/administration if you have any questions or concerns about our photo release policy)**.

I am aware that RMSC cannot be held responsible for lost or stolen personal belongings, including electronics and other valuables. It is your child's responsibility to keep track of any items he or she may bring.

Signature of Parent/Guardian

Date

Please email this completed form to Member and Visitor Services at mvs@rmsc.org.