

SeaAffinity Youth Program Application

Please print form, complete and return.

Email: info@seaaffinity.org; Fax: 410-574-3416; Mail: 500 Walnut Grove Rd, Essex, MD 21221

Participant:

Participant's Last Name _____ First Name _____ Middle Initial _____
Grade Completed (as of June 20__) _____ Age (as of June 20__) _____ Birth Date _____ Gender _____

Parent/Guardian:

Parent/Guardian's Full Name _____ Spouse's Name _____
Street Address _____
City _____ State _____ Zip Code _____
Home Phone # _____ Work Phone # _____
Cell or pager # _____ Home Email Address _____ Work Email Address _____
Emergency contact or Person Authorized to Pick-Up Participant _____ Phone _____ Relation to Participant _____

Date:

Please indicate choice of Program. Include session number or time (AM/PM) where applicable.

Medical Information:

Participant has a history of:

- Epilepsy Motion Sickness Allergies Handicap Recent operation or illness Asthma Hay Fever
 Respiratory problem Chest Pains Headaches Sinus problem Ulcers Claustrophobia
 Heart problems Diabetes High/low blood pressure Dizziness/Fainting Mental/Emotional problems
 Wears contacts or glasses Drugs/Medications
 Problem if not listed above: _____

Please provide detail on any checked box above _____

The participant is currently taking the following prescribed medication: _____

Can the participant self-administer the medication? Yes No

Payment information:

- Minimum \$50 Non-Refundable Deposit (due now to secure a space) \$ 50
 Balance of Program Fee; (due two weeks before program start) \$ _____
(if choosing on-line payment below, entire fee is due upon invoice)

Donations:

Program Scholarships (for a disadvantaged child to participate) \$ _____

Total Enclosed: \$ _____

Make check payable to: SeaAffinity, Inc., 500 Walnut Grove Rd, Essex, MD 21221

- OR -

I would like to pay my total program fee (including deposit and donation indicated above) with a credit card through PayPal. Please send an invoice to my email address _____ Please note that when choosing this option, the entire camp fee will be invoiced.

Signed "Release and Waiver Agreement" form must be on file by start of program.

How did you FIRST hear about SeaAffinity?

- Family/Friend School Internet search Another program Other

Please be as specific as possible: _____