



Science Spectrum Camp Release Form

Child's Name: _____

Code of Conduct

Camps and classes at the Science Spectrum are meant to be a fun, educational, and enriching. For the benefit of all campers, it is important that children behave appropriately within the camps. If it becomes necessary to take disciplinary action against a student, the steps that will be followed are outlined below:

- 1st Incident: The camper will receive a verbal warning and an explanation as to why the behavior is inappropriate. Whenever possible, this will be done in a one-on-one setting removed from other campers.
- 2nd Incident: Staff will determine an appropriate consequence for the camper's actions. Examples may include a "time out" or exclusion from participating in an activity. The camper's parent will be notified of their behavior when they arrive to pick up the child.
- 3rd Incident: The child will be excused from camp without a class fee refund. The Science Spectrum reserves the right to excuse any child from camps following a first incident in cases of serious behavior problems.

I have read the Camp Code of Conduct, explained its policies to my child, and agree to its courses of action.

Parent/Guardian Signature: _____ Date: _____

Medical Consent Policy

I hereby give my permission to Science Spectrum staff to order treatment and necessary transportation for my child. In the event I cannot be reached in an emergency, I hereby give my permission to the physician to secure and administer treatment for my child named below. I realize that there are natural hazards associated with classroom and group play activities. I hereby release and forever discharge the Science Spectrum Museum & OMNI Theater and its employees and volunteers from all claims of liability for any damages or injuries which may be sustained while my child is at camp. I have read and understand the above statements of the Medical Consent Policy and give permission for my child to be treated if I am unable to be reached.

Parent/Guardian Signature: _____ Date: _____

Covid-19

I have read the separate Covid-19 Policies and Procedures, explained its policies to my child, and understand Science Spectrum staff will do the best they can to maintain the health and well-being of all camp participants.

Parent/Guardian Signature: _____ Date: _____

Cancellation & Refund Policy

Cancellations because of a schedule conflict or a change in vacation plans will not be eligible for a refund. Only cancellations by the participant's family that are due to illness of the child, or a family emergency will be eligible for a partial refund. The camp fee minus a ten dollar per camp administrative fee will be refunded. Cancellations, for any reason, less than 24 hours in advance, will not receive a partial refund. Camps that are cancelled by the Science Spectrum due to low enrollment or any other reason will receive a full refund. I have read and understand the Refund & Cancellation Policy.

Parent/Guardian Signature: _____ Date: _____

*Optional Photo Release

I hereby consent that my child's image and likeness, as shown in photographs, film, or electronic images for which he/she posed, and/or audio recordings made of his/her voice may be used by the Science Spectrum in whatever way they desire. Furthermore, I hereby consent that such photographs, films, recordings, and electronic images shall be their sole property, and they shall have the right to sell, duplicate, reproduce and make other uses of such photographs, films, recordings, and electronic images as they desire free and clear of any claim whatsoever on my part. I have read and agree to the above statements.

Parent/Guardian Signature: _____ Date: _____