

DolphinCamp Application



Directions: Please print this application single-sided. Please type or print clearly. Advise us of **any future changes in address or telephone numbers**. This application must be accompanied by a deposit via **check or money order for \$300.00** (U.S. Currency). *Please see last page if you would like to pay by credit card.* **All applicants under 18 years of age must enclose two letters of recommendation from non-family members.** Also, please include a fax number and/or email address accessible to your parent or guardian.

Name: _____
Last First Middle

Current Street Address: _____

City/State/Postal Code: _____

Telephone No.: _____
Current Business/Other
Fax

Parent/Guardian E-mail Address: _____

Student's E-mail Address: _____

Permanent Street Address/City/State/Postal Code & Phone Number:

Student Birthdate: ___ / ___ / ___ Age: ___ Sex: ___

Student Education: Grade Levels Completed: _____

Emergency Contact: _____
Name/Relationship Home Telephone # & Cell #

I am applying for (please check one):

DolphinCamp for ages 10-12

DolphinCamp for ages 13-14

Reservations Data: Provide dates for the DolphinCamp you are applying for. Indicate if you are interested in being put on "standby" should the class be full. Housing accommodations consist of a two-story **dormitory** with four bedrooms sleeping 4-6 people per room on **bunk beds**.

1st Choice: Class Dates Standby

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Dolphin Research Center, 58901 Overseas Highway, Grassy Key, FL 33050
(305) 289-1121, drc-ed@dolphins.org

It is essential that you describe, below, any dietary restrictions, health conditions or disabilities that might either warrant special consideration or possibly interfere with your ability to participate in any portion of the program. Advanced notice of any restrictions/ conditions/disabilities allows us to better accommodate your needs.

Please note the following:

- The dormitory is accessed by stairs and is approximately a 150 yard walk from DRC.
- One may not participate in activities involving direct interaction with the dolphins if he/she has any respiratory infection, open sores or other outward signs of illness; or if any physical conditions exist that might place him/her at an increased risk.
- Women may not participate in activities involving direct interaction with the dolphins if they are pregnant

For each of the following, check the column that best describes you:

	Low or None	Fair	Good	Excellent	Comments
Swimming skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Snorkeling skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Health and fitness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Marine mammal knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
English language skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Provide a brief answer to each of the following (use additional paper if necessary):

1. How did you originally hear about... (Please name your sources specifically.)

Dolphin Research Center?

- friend/relative
- school/other organization
- book/article
- TV/radio program
- lecture/presentation
- internet
- other

DolphinLab?

- friend/relative
- school/other organization
- book/article
- TV/radio program
- lecture/presentation
- internet
- other

2. Have you been to DRC before ? If yes, what did you participate in ?

3. Have you done anything with animals or nature before ? If so, what ?



4. Have you been around or seen dolphins or marine mammals before. If so, where?

5. What interests you about dolphins?

6. What reasons do you accept as being o.k. for having dolphins in human care?

7. What are you hoping to learn and do at Dolphin Camp? Please include any specific areas of interest.

Sign and date application in the space provided below. **All applicants under age 18** must have parental signature and two letters of recommendation from non-family members. Return application to: **Attn: DolphinLab Reservations**. You must include a deposit via **check or money order for \$300.00** (U.S. Currency) made payable to Dolphin Research Center in order to secure your space in a class. (Please see following page if you want to pay by credit card.) Your enrollment will be confirmed in writing and the deposit will be applied towards your total tuition balance. **The remaining balance is due 60 days prior to the class start date.** If the balance is not received by the due date, reservations are subject to cancellation and the deposit becomes non-refundable. **Cancellation of a confirmed reservation must be made in writing.** If a cancellation is received **more than 60 days before the start of the class**, your deposit minus a processing fee of \$35 will be refunded to you. **Cancellations made less than 60 days before the class are NOT eligible for a refund regardless of reason including weather and medical emergencies.** Please note that hurricane season extends from June to November, with the most active time frame being in September. Therefore, we strongly recommend that you purchase trip insurance through your travel agent to cover the cost of DolphinLab and travel for such events.

Applicant Signature

Date

Parent/Guardian Signature

Date

*** Dolphin Research Center would appreciate your help with connecting DolphinLab students. Please provide your signature below if you would like to grant DolphinLab staff the right to share your name and email address with other DolphinLab students.**

* _____

Applicant Signature

Date

Parent/Guardian Signature

Date



Dolphin Research Center, 58901 Overseas Highway, Grassy Key, FL 33050
 (305) 289-1121, drc-ed@dolphins.org

Payment Information



Applicant's name: _____

Dates of DolphinLab applying for: _____

Method of payment (check the method you are using):

Check, money order or cashier's check enclosed. (If you are making your payment less than 60 days prior to the class, tuition must be submitted in the form of a money order or cashier's check.)

Charge to my Credit Card

For those charging deposits & tuition via credit card, please read the following:

Two payments will be processed on your card:

- 1. An initial deposit of \$300.00 to secure the applicant's space in the class will be charged on your credit card. This fee will be applied to the entire tuition.*
- 2. Upon confirmation of the class (when minimum enrollment has been reached) the final balance payment of \$1,200.00 will be charged on your credit card. Credit card payments are subject to credit approval.*

If paying tuition via credit card, please supply the following information:

Credit Card # : _____ - _____ - _____ - _____

Expiration Date: _____ / _____
month year

Name as it appears on credit card: _____

I, _____, authorize the full tuition amount of _____ to be charged on my credit card for the DolphinLab class I am enrolling in at Dolphin Research Center.

Signature of Card Holder: _____ **Date:** _____

Billing address:

Street Address 1: _____

Street Address 2: _____

City: _____

State/Prov: _____

Zip/Postal Code: _____ Country: _____

