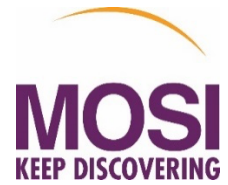


MOSI Program Information Form



Child's Name _____ Age _____ Grade Level _____
(Please use separate form for each child)

MOSI Program Policies

I/We, the undersigned parent(s) or guardian(s) of the minor child named above, hereby grant permission for my/our child to participate in all activities in and around the Museum of Science & Industry as part of the MOSI Education Program. In addition, I/we hereby grant permission for my/our child to participate in activities, which may include walking through wooded areas and other activities, including, but not limited to those activities included in the program description. Further, I/we agree to assume all risks and liabilities associated with my/our child's participation in said program(s) and to hold the Museum of Science & Industry harmless from all claims which may arise as a result of such participation. In case of emergency, the Museum of Science & Industry has permission to take my child to the nearest hospital.

Parent / Guardian Signature Date

Behavior & Discipline:

To ensure the safety and comfort of all program participants, the MOSI program has established the following expectations: 1. Students will keep their hands and feet to themselves. 2. Students will listen and follow directions. 3. Students will respect MOSI staff, property, and fellow students.

It is the policy of MOSI that all students have an educational setting that is safe, secure and free from harassment and bullying of any kind. Bullying means systematically and chronically inflicting physical hurt or psychological distress on one or more students. It includes any threatening, insulting or dehumanizing gesture that is severe enough to create an intimidating, hostile or offensive educational environment. It may involve, but is not limited to teasing, social exclusion, threats, intimidation, stalking, cyber-bullying, cyber-stalking, physical violence, theft or harassment.

If the above expectations are not followed: 1. Instructors will handle discipline problems using discussion and reason. Parents will be informed. 2. If necessary, the instructor will isolate the child from activities for a short time. 3. If the problem persists, the instructor will notify the Education Program Manager who will then talk to the child and notify the parent. 4. MOSI reserves the right to remove any child from a program with no refund or credit if the child's disruptive behavior persists. Please sign below to verify that you have read the expectations and discipline policy of the MOSI Education Program.

Parent / Guardian Signature Date

Emergency Contact Information

Parent / Guardian's Name _____

Day Phone () _____ Cell () _____ Email _____

Would you prefer that we text you if we need to contact you? ____ YES, texting is fine. ____ NO, please do not text.

Other parent/guardian: Name _____

Day Phone () _____ Cell () _____ Email _____

Emergency Contact (other than parent) _____

Relationship to child _____ Day Phone () _____ Email _____

Is your child diagnosed with Autism spectrum disorder (ASD)? ____ Autism ____ Asperger syndrome ____ PDD-NOS

If your child has a condition that needs special attention, please advise (includes behavioral conditions, allergies, dietary restrictions or conditions, and medication):

Photo Release:

Participants in MOSI educational programs are sometimes photographed or videotaped by the media, MOSI staff or professional photographers for promotional services. By signing this photo release, you give MOSI permission to photograph or film your child while your child is participating in a MOSI educational program possibly for promotional materials.

Parent /Guardian Signature Date

Registration form kept on file; please notify MOSI staff of any changes.