

# METROPOLITAN SATURDAY ACADEMY SCIENCE AND TECHNOLOGY PROGRAM

6205 Blue Sage Lane -- Upper Marlboro, MD 20772

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Website: [www.metropolitansaturdayacademy.org](http://www.metropolitansaturdayacademy.org)

Co-sponsored by the National Aeronautics and Space Administration (NASA)

**Instructions:** Fill out form, save file as students first and last name and email as an attachment to the above email address.

## METROPOLITAN SATURDAY ACADEMY REGISTRATION FORM

NAME: \_\_\_\_\_ TELEPHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

SCHOOL NAME: \_\_\_\_\_ COUNTY: \_\_\_\_\_

AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_ SEX: \_\_\_\_\_ E-MAIL ADDRESS \_\_\_\_\_

CAREER INTERESTS: \_\_\_\_\_

My parent/guardian will provide my transportation  I am in need of transportation assistance

If you have any questions, contact a Metropolitan Saturday Academy representative **OR** e-mail us ([info@metropolitansaturdayacademy.org](mailto:info@metropolitansaturdayacademy.org)). Return applications on or before **October 24, 2009**, to the email address.

IN CASE OF EMERGENCY CONTACT:

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

PHONE NUMBER: DAY: \_\_\_\_\_ EVENING: \_\_\_\_\_

DOCTOR'S NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

### AUTHORIZATION

I give my son/daughter \_\_\_\_\_ permission to participate in the Metropolitan Saturday Academy Program at the National Air and Space Museum (NASM) located at 6<sup>th</sup> and Independence Avenue, SW, Washington, DC, beginning **October 24, 2009**, and continuing one Saturday each month for the program year ending June 2010, **UNLESS OTHERWISE INDICATED ON THE SCHEDULE AND YOU WILL BE NOTIFIED**. Please note that all students and parents must send an e mail to: [info@metropolitansaturdayacademy.org](mailto:info@metropolitansaturdayacademy.org) prior to attending any session due to the NASM Security regulations to confirm their attendance. Admittance to the sessions cannot be made without prior notification of attendance. A **\$200.00** program fee is required which includes registration, field trips (local and out-of-town), materials, snacks and science projects at the technical symposium on June 26, 2010. If paying by check, please make payable to the Metropolitan Saturday Academy. This registration form should be provided to the Metropolitan Saturday Academy on or before **October 24, 2009**. **The registration fee is due as follows: \$200 on November 21, 2009; or in two installments: \$100 by November 21, 2009, and \$100 by December 12, 2009.**

I am aware that there are transportation subsidies available for all children in need of transportation support. During the seminar, if I cannot be reached I give permission to the appropriate representative of the Metropolitan Saturday Academy organization, to contact my son/daughter's physician and/or permission to transport my son/daughter to the nearest hospital in case of a serious medical emergency, and I release Metropolitan Saturday Academy, its Board of Directors, staff, affiliates, and participants, from any liability. I further agree to indemnify Metropolitan Saturday Academy for any and all claims or causes of action brought by any person against Metropolitan Saturday Academy stemming from criminal misconduct/inappropriate behavior of my child.

**Parents will be notified in advance of any change in scheduled dates or meeting place.**

Authorizing Parent/Guardian \_\_\_\_\_

Date: \_\_\_\_\_