Alameda Recreation and Park Department
(510) 747-7529

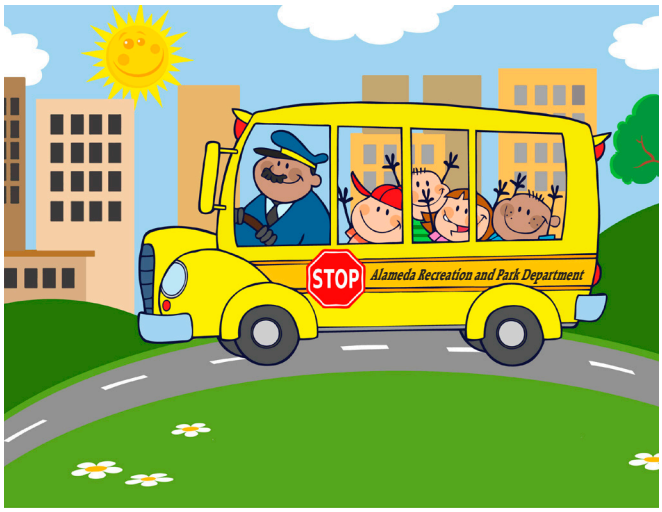
ROCK 'N ROLL TRIPS

For Boys and Girls Currently In Kindergarten to 5th Grades on Alameda Unified School District Non-School Days

Join your friends from ARPD as we hit the road and explore San Francisco's hands-on, innovative and engaging exhibits at the **Exploratorium** and the **California Academy of Sciences**!

Participants should apply sunscreen, wear comfortable walking shoes and bring a bag lunch and a jacket. Morning and afternoon snacks will be provided. Field trips will be off-site between the hours of 9:00 a.m. to 4:00 p.m.

There will be a $15 administration fee charged for any cancellations or changes.



EXPLORATORIUM IN SAN FRANCISCO

The Exploratorium is a 21st century learning laboratory, an eye-opening, always-changing, playful place to explore and tinker. Discover what the Exploratorium is all about.

Friday, October 11, 2013

Drop Off/Pick Up Point:
Harrison Center, Lincoln Park
1450 High Street at Santa Clara Ave
Cost: $60 per person
Class #12781

- Harrison Center Doors Open at 7:30 a.m.
- We will leave for the field trip at 9:00 a.m.
- We will return by 4:00 p.m.
- All children must be picked up by 5:30 p.m.

CALIFORNIA ACADEMY OF SCIENCES IN SAN FRANCISCO

Home to an aquarium, natural history museum, planetarium and world-class research and education programs, all under one living roof. Exhibits include a four-story living rainforest, live coral reef, state-of-the-art space show, interactive activities and programs for all ages, exhibits on climate change and evolution, thousands of live animals and more.

Monday, October 14, 2013

Drop Off/Pick Up Point:
Harrison Center, Lincoln Park
1450 High Street at Santa Clara Ave
Cost: $60 per person
Class #12782

- Harrison Center Doors Open at 7:30 a.m.
- We will leave for the field trip at 9:00 a.m.
- We will return by 4:00 p.m.
- All children must be picked up by 5:30 p.m.

Alameda Recreation and Park Department
2226 Santa Clara Avenue, Alameda, CA 94501
(510) 747-PLAY • FAX (510) 523-4071 – TAX ID#: 94-6000288
www.alamedaca.gov/recreation • E-Mail: arpd@alamedaca.gov
Online Registration: www.arpdeplay.com • Like us on Facebook: playARPD

ROCK 'N ROLL TRIP REGISTRATION FORM – KINDERGARTEN TO 5TH GRADES

• Full payment is due at the time of registration • Please make checks payable to ARPD; Discover, MasterCard, Visa Cards accepted	• All registrations receive confirmation • Activity cancellations or changes will be charged a $15 processing fee.

PARENT/GUARDIAN/MAIN CONTACT INFORMATION

Last Name _____ First Name _____

Address _____ City _____ Zip _____

Phone _____
Home Work Cell

Email Address _____

Emergency Contact Name _____ Relationship _____ Phone (____)_____

Secondary Contact Name _____ Relationship _____ Phone (_____)_____

ROCK 'N ROLL TRIPS:

Check All That Apply:
- ❑ **EXPLORATORIUM (Fri, Oct 11th - $60 per person) - #12781**
- ❑ **CALIFORNIA ACADEMY OF SCIENCES (MON, Oct 14th - $60 per person) - #12782**

Child/Children's Name(s)		Birthdate			Age	Grade	INSURANCE NAME & POLICY NUMBER
1.	❑ Boy ❑ Girl						
Medical Information/Allergies/Dietary Restrictions:							
2.	❑ Boy ❑ Girl						
Medical Information/Allergies/Dietary Restrictions:							
LIST FIRST AND LAST NAME(S) OF PERSON(S) AUTHORIZED TO PICK UP CHILD/CHILDREN:							

LIABILITY WAIVER

1. Undersigned hereby releases, waives and discharges the city of Alameda, its directors, employees, agents and independent contractors from all liability to the undersigned and/or his/her personal representatives, assignees, heirs, and next of kin for any loss or damage and any claim or demands accruing or resulting from injury to the person or property or death of the undersigned, whether or not caused by the negligence and/or property of the City of Alameda, its directors, officers, employees, agents, and independent contractors.
2. Undersigned hereby assumes full responsibility for and risk of bodily injury, death or property damage, whether or not it is due to the negligence of the City of Alameda, its directors, employees, agents and independent contractors or otherwise while in, upon or about the premises of the City of Alameda and/or while using the premises or facilities or equipment or program transportation thereon.

PHOTO CONSENT: Undersigned authorizes the City of Alameda to use your (or child's/ward's) photograph in any future educational and/or community informational purposes, (including, but not limited to the website, Activity Guide or social media) produced by the City of Alameda.

☐ Check here if you do not give photographic consent.

CONSENT TO TREAT: I hereby give my consent for the City of Alameda staff to take me (or my child/ward) to the appropriate medical services and give appropriate medical authorization in the event that I cannot be immediately contacted. It is understood that the cost thereof will be at my expense.

☐ Check here if I do not consent to treat and I request that medical or surgical services be withheld.

Undersigned has read and voluntarily signs the release and waiver of liability and indemnity agreement, and further agrees that no oral representation, statements or inducement apart from the foregoing written agreement has been made.

_____ ☐Parent/Guardian
Signature Date

Amount Enclosed: $_____

☐ Check (payable to ARPD) ☐ Discover/VISA/MasterCard (Circle One) Credit Card #_____ Exp Date_____

Name on Card_____ Signature_____

Address on Card_____

By signing, I authorize the City of Alameda to charge my credit card for the activity costs listed above