



## NIHERST Christmas Workshops Registration Form 2017

(PLEASE PRINT IN **BLOCK LETTERS**)

### PARTICIPANT'S INFORMATION

NAME OF PARTICIPANT: \_\_\_\_\_  
(First Name) (Middle Name) (Last Name)

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ SEX: Male  Female   
(dd / mm / yyyy)

MAILING ADDRESS: \_\_\_\_\_

	Name of Workshop	Venue	Date	Cost	✓
<b>Innovation: Parent and Me Christmas</b>	3Doodler Christmas <small>(9yrs – adult)</small> <b>10:00am – 12:00pm</b>	National Science Centre (Computer Lab)	19 <sup>th</sup> December, 2017	\$100	
			20 <sup>th</sup> December, 2017	\$100	
			3 <sup>rd</sup> January, 2018	\$100	
			4 <sup>th</sup> January, 2018	\$100	
			5 <sup>th</sup> January, 2018	\$100	
	Santa's Workshop <small>(9yrs – adult)</small> <b>9:00am – 12:30pm</b>	National Science Centre (Fab Lab)	18 <sup>th</sup> December, 2017	\$100	
			20 <sup>th</sup> December, 2017	\$100	
			3 <sup>rd</sup> January, 2018	\$100	
	Rudolph's Robots <small>(9yrs – adult)</small> <b>9:00am – 12:30pm</b>	National Science Centre (Robotics Lab)	19 <sup>th</sup> December, 2017	\$100	
			20 <sup>th</sup> December, 2017	\$100	
3 <sup>rd</sup> January, 2018			\$100		
4 <sup>th</sup> January, 2018			\$100		
<b>Science Education: Santa STEM Village</b>	Elves' Factory <small>(5-9yrs)</small> <b>9:00am – 3:00pm</b>	National Science Centre (Techno Theatre)	18 <sup>th</sup> December, 2017	\$80	
	Santa's Garage <small>(5-9yrs)</small> <b>9:00am – 3:00pm</b>	National Science Centre (Techno Theatre)	19 <sup>th</sup> December, 2017	\$80	
	Oh Chemis-tree <small>(5-9yrs)</small> <b>9:00am – 12:00pm</b>	National Science Centre (Techno Theatre)	20 <sup>th</sup> December, 2017	\$50	
	Santa's Co-pilots <small>(5-9yrs)</small> <b>9:00am – 3:00pm</b>	National Science Centre (Techno Theatre)	21 <sup>st</sup> December, 2017	\$80	
	Paper Ma-Sleigh <small>(5-9yrs)</small> <b>9:00am – 3:00pm</b>	National Science Centre (Techno Theatre)	22 <sup>nd</sup> December, 2017	\$80	

### PARENT/GUARDIAN INFORMATION - \*(For participants under 18 years of age)\*

NAME: Ms./Mr./Mrs. \_\_\_\_\_  
(First Name) (Last Name)

HOME #: \_\_\_\_\_ CELL #: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

### PARTICIPANT DROP OFF/PICK UP INFORMATION - \*(For participants under 18 years of age)\*

	First Name	Last Name	Tel. Contact No.	ID or DP No.
1				
2				

Please indicate in the table above person(s) assigned to drop off/pick up your child to/from the workshop venue.

### **\*For Official Use Only\***

Total Fee: \$ \_\_\_\_\_ Payment Method: Cash  Cheque  (CHQ # \_\_\_\_\_ /Bank \_\_\_\_\_)

Receipt #: \_\_\_\_\_ Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**EMERGENCY CONTACT AND MEDICAL INFORMATION**

Participant's Name:

**Alternative Emergency Contacts**

Name (Emergency Contact #1)		Name (Emergency Contact #2)	
Home Phone No.	Cell Phone No.	Home Phone No.	Cell Phone No.
Home Address		Home Address	

**Medical Information**

- Allergies/Special Health Considerations (including respiratory illness/asthma):
  - Has your child ever been hospitalized? If yes, for what? **\*FOR PARTICIPANTS UNDER 18 YEARS OF AGE\***
  - Please specify and state if any medication\* is to be administered during workshop hours.  
**\*FOR PARTICIPANTS UNDER 18 YEARS OF AGE\***
- \*(Medications must be labelled and directions clearly stated)*

**IMPORTANT: PLEASE PLACE CHECK MARK AS HAVING READ EACH STATEMENT**

**WORKSHOP DISCLAIMER**

- Parent/Guardian of Participant/Participant agrees that the Participant shall comply with all instructions, guidelines, rules, procedures and requests by NIHERST, its employees and Workshop Officials, and agents for the safety, management and operation of the workshop.
- NIHERST reserves the right to suspend or expel, without any liability or refund of workshop fees, any Participant from the workshop for failure to comply with any instruction, guidelines, rules, procedures or request of NIHERST or its employees and Workshop Officials/agents or for any misbehaviour.
- Parent/Guardian of Participant/Participant understands that NIHERST has arranged for video recording and photographs to be taken of the workshop in action and agrees that the image and participation of the Participant in the workshop, including any project the Participant may be engaged in, may be recorded, filmed and used by NIHERST for educational and promotional use.
- Parent/Guardian of Participant/Participant hereby waives any claims against NIHERST, its employees, Workshop Officials or any other entity associated with NIHERST in the management and operation of the workshops for any injury, damage or loss whatsoever, except where such injury, damage or loss is caused by willful misconduct of an employee of NIHERST or a Workshop Official engaged by NIHERST.

**REFUND POLICY FOR CANCELLATIONS**

- FULL REFUND – No less than seven (7) working days before the start date of the workshop.
- NO REFUND – Less than three (3) working days before the start date of the workshop.

**\*All refund requests MUST be made in writing and submitted with the original receipt to Workshop Officials by stipulated periods\***

I have read the **NIHERST WORKSHOP DISCLAIMER** and the **REFUND POLICY FOR CANCELLATIONS** and agree to the terms/consequences/actions that may be undertaken.

**\*FOR PARENT/GUARDIAN OF PARTICIPANTS UNDER 18 YEARS OF AGE\***

Parent/Guardian's Name

Parent/Guardian's Signature

**\*FOR ADULT PARTICIPANTS 18 YEARS AND OVER\***

Participant's Name

Participant's Signature

**How did you hear about NIHERST workshop?**

- Website    Email    Flyer    Word of Mouth    Social Media