

The Huntsman Marine Science Centre Summer Institutes

OPEN Application/Medical Form 2011

I am applying for Active Researchers Institute July 11th to July 15th Fee: \$590
 Marine Biodiversity Institute July 25th to July 29th Fee: \$590

Name: _____ Telephone: _____

Address: _____

City/Town: _____ Province/State: _____ Postal Code: _____

Email: _____

BACKGROUND INFORMATION What grade/subjects do you teach? _____

OR What grade are you in? _____ **OR** Other _____

Which marine topics are you interested in? _____

EMERGENCY INFORMATION - CONFIDENTIAL

Please give the name and contact information of a person who can be reached in an emergency during the course.

Name: _____ Relationship: _____

Address: _____

Home Telephone: _____ Business: _____

MEDICAL INSURANCE Health Insurance Number: _____

Insurance Company: _____ Coverage Number: _____

Family Physician: _____ Telephone: _____

HEALTH INFORMATION Dietary Restrictions: _____

Vegetarian: No _____ Yes _____, but will eat _____

Allergies: _____

Any Serious Health Conditions? _____

Please give any drug sensitivities, regular medication and other information that might be of significance to a physician or hospital treating you in an emergency situation. Use the back of this form.

I do hereby assume all risks of loss and injury that may be incurred, directly or indirectly, during the Huntsman Marine Science Centre's Summer Program. The Huntsman Marine Science Centre reserves the right to cancel the program and refund all monies in the event that enrolment is inadequate.

DATE: _____ **SIGNATURE:** _____

Complete form and mail with \$250 non-refundable deposit to: Education Department,
Huntsman Marine Science Centre, 1 Lower Campus Road, St. Andrews, New Brunswick E5B 2L7:
OR fax application to 506-529-1212 and call in credit card number to Huntsman main desk 506-529-1200.