



FOR OFFICE USE ONLY

Program Date: _____

Confirmation date: _____

Staff Initials: _____

IN-CLASSROOM EXPERIENCE REGISTRATION

SCHOOL NAME: _____

CONTACT NAME: _____

ADDRESS: _____

PHONE#: _____ ALT#: _____ FAX#: _____

EMAIL (REQUIRED): _____

(Program confirmations and reminders are sent via e-mail)

ADDITIONAL INFORMATION: _____

IN-CLASSROOM INFORMATION

NUMBER OF STUDENTS: _____ GRADE(S): _____

DESIRED PROGRAM DATE: _____ 2ND DATE OPTION: _____

TIME FRAME: _____

PROGRAM ACTIVITY SELECTION: _____

Multi-Sensory Experience

Recycle Relay (outside)

Understanding Florida's Turtles

Sea Urchin Lab

Shark Bites (outside)

Habitat Conservation (outside)

ADDITIONAL INFORMATION / SPECIAL REQUESTS:

(Please note special conditions i.e. allergies, physical or mental limitations, etc.)

Outreach Fee: \$2 per camper or a flat rate of \$100

PROGRAM & SCHEDULING INFORMATION:

River Center

805 N. U.S. Highway 1

Jupiter, FL 33477

Phone: 561-743-7123 Fax: 561-743-6314

Education@lrcd.org

www.loxahatcheeriver.org



*A Program of the
Loxahatchee River District*