

W.A.D.E.

water activity day event

Clear Lake Park
June 14 - 16 & July 12 - 14, 2010

General Information

1. W.A.D.E. is open to students **ages 13 and up. Students must be 13 by 1st day of camp!**
2. Please use one registration packet for each teenager. If you have more than one camper, please duplicate the blank forms.
3. Included in the packet is: a) registration form; b) medical information form; c) waiver/disclaimer form.
4. Complete and sign the forms. Print legibly in ink. All signatures must be in ink.
5. **Include copy of proof of health insurance**
6. **Enclose check or money order made payable to: Houston Safe Boating Council for \$125.00 (plus cost of additional t-shirts if ordering) for each camper. W.A.D.E. T-shirt must be worn at all times during the program.** One T-shirt included.
7. Return **completed** registration forms, proof of insurance & tuition fees by the registration deadline of **May 30 (for June session) and July 5 (for July session).**
(First come, first served: limit 36 students per session) to:

Houston Safe Boating Council
c/o Clear Lake Area Chamber of Commerce
1201 NASA Parkway
Houston, Texas 77058
281-488-7676

8. W.A.D.E. hours are from 8:00 a.m. - 5:00 p.m. All day students may be dropped off **no earlier than 7:30 AM** and picked up **no later than 5:30 PM.**

9. A PARENT OR LEGAL GUARDIAN MUST APPEAR IN PERSON THE FIRST MORNING FOR A BRIEF ORIENTATION!

REFUND POLICY

- Full refund will be made if cancellation is received **10 days prior to first day of the program.** If the student's place in the class can be filled, you will receive a full refund minus \$10.00 administrative fee.
- No refund inside 10 days prior to program date.

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Dear Parent or Legal Guardian:

Enclosed is the registration packet you requested. We are pleased that your student is interested in attending W.A.D.E. Our **Water Activity Day Events (W.A.D.E.) will be held:**

June 14 - 16 and July 12 - 14, 2010, from 8:00 a.m. to 5:00 p.m. at Clear Lake Park.

Hosted by the **Houston Safe Boating Council**, **W.A.D.E. is sponsored by the American Watercraft Association(AWA) and the Clear Lake Area Chamber of Commerce.** Students will become members of the AWA. It will provide a hands on introduction to several different water sports in a day camp setting for persons ages 13 and up. Parents of registered teens may also register to attend. A team of experienced instructors will teach the basics of such water sports as sailing, kayaking, motorboating and PWCs in the water and on shore.

Our purpose is to present

- **The skills that make water recreation exciting for teens, and**
- **The knowledge which promotes safety and responsibility for a lifetime of fun on the water**

Tuition for W.A.D.E. is \$125.00 for each person. One W.A.D.E. T-shirt and all necessary equipment for the water sports are provided. Students are asked to wear their T-shirt each day and bring a towel, shoes they can wear in the water, a sack lunch and soft drink, plus an afternoon snack each day.

The proceeds from W.A.D.E. will be used for W.A.D.E. operating expenses and other **Houston Safe Boating Council** boating safety education activities.

Enrollment will be limited to 36 students per session, to ensure individual attention. Our registration deadlines are May 30 for the June 14 - 16 session and July 5 for the July 12 - 16 session.

We look forward to helping show your students how much fun water sports can be!

The Volunteer Staff of W.A.D.E.

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Registration Form

June 14-15-16, 2010 July 12-13-14, 2010 ~ Clear Lake Park

Please use one form for each student and print legibly in ink. (This form may be duplicated.)

Students's Name _____ Age _____
Must be 13 yrs by 1st day of program

Address _____

City _____ State _____ Zip _____

Phone: Day _____ Evening _____

What is Student's watersports experience?

Please circle level for each activity: (N) None (S) Some (K) Knowledgeable

Sailing N S K Kayaking N S K Canoeing N S K

Motor Boat N S K Personal Watercraft N S K Fishing N S K

Scuba N S K Wind Surfing N S K Other: N S K

Student must wear a Coast Guard approved life jacket. Check YES if you will bring your own or NO if you will not be able to bring one.

YES (I will bring one)

NO (I cannot bring one)

Student's Height _____ Weight _____

W.A.D.E. T-Shirts 1 included (must be worn daily)

Circle Size: S M L XL XXL XXXL

Would you like additional T-shirts? (Optional)

Circle Size: S M L XL XXL XXXL

S, M, L, and XL \$10.00 x _____ shirts \$_____

XXL \$10.00 x _____ shirts _____

XXXL \$14.00 x _____ shirts _____

W.A.D.E. Tuition \$125.00 \$125.00

Total Enclosed (payable to Houston Safe Boating Council) \$_____

Please complete and return:

- 1) Registration form;
- 2) Confidential medical information card with liability waiver and disclaimer;
- 3) Proof of health insurance - **photocopy of the front and back of insurance card or certificate page of medical policy**; and
- 4) Enclose your check or money order **payable to Houston Safe Boating Council** for the above total.

**Please mail to: Houston Safe Boating Council c/o Clear Lake Area Chamber of Commerce
1201 NASA Parkway, Houston Texas 77058 phone: 281-488-7676**

Signatures (must be in ink)

Student's Signature _____ Date _____

Parent/Legal Guardian's Signature _____ Date _____

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Waiver/Disclaimer

Student's Name: _____

Last

First

Date of Birth: _____ Circle One: Male Female

Address: _____

City: _____ State: _____ Zip: _____

Mother's Name:

Emergency #'s

Phone Work:

Phone Home:

Other:

Father's Name:

Emergency #'s

Phone Work:

Phone Home:

Other:

The undersigned participants on behalf of themselves and their children, agree to hold Houston Safe Boating Council, American Watercraft Association, Houston Police Department, Clear Lake Area Chamber of Commerce and/or adult staff of Texas W.A.D.E., its agents, employees and officials, while acting within the scope of their duties, harmless from all causes of action, demands, and claims, including the cost of their defense, arising in favor of the child participant or third parties on account of personal injuries, death or damage to property arising out of activities at the premises and in any way connected with the activities on the participant in Texas W.A.D.E. Programs.

Signature (in ink) _____

(Parent or Legal Guardian)

Medical Release (Optional but recommended): I authorize the adult advisors of Texas W.A.D.E. to seek medical attention for my child in the event of a medical emergency.

Signature (in ink) _____

(Parent or Legal Guardian)

Student or participant's Social Security Number _____
required by Texas Parks & Wildlife Department in order to issue Texas Basic Boater Certificate.

The W.A.D.E. participants may be photographed for publicity purposes.

I do ____ do not ____ give permission for my child to be photographed for use in area publications.

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Medical Information

Allergies: (Food, medicines, insects, plants) Yes No

If yes, list: _____

| General Information: | Check: | Yes | No | Check: | Yes | No |
|----------------------|--------------------------|--------------------------|--------------------------|---------------------|--------------------------|--------------------------|
| Asthma | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Heart trouble | <input type="checkbox"/> | <input type="checkbox"/> |
| Cancer/leukemia | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hemophilia | <input type="checkbox"/> | <input type="checkbox"/> |
| Convulsions/seizures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | High blood pressure | <input type="checkbox"/> | <input type="checkbox"/> |
| Diabetes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Kidney disease | <input type="checkbox"/> | <input type="checkbox"/> |
| ADD/ADHD | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | |

Explain: _____

List any medications to be taken during the program: _____

List any physical or behavioral conditions that may affect or limit full participation in W.A.D.E. events:

Immunizations: (give dates of last inoculations)

DPT _____ Mumps _____

Rubella _____ Polio _____

Measles _____

List equipment needed such as glasses, contact lenses, etc. : _____

Emergency Phone Number for (Parent Name): _____ Phone: _____

Notify in case of illness or accident if parent cannot be reached:

Name _____ Relationship _____

Office Phone _____ Home Phone _____

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W.A.D.E. Policy

- There will be a mandatory Parent/Guardian Orientation the first day of the program (Monday, June 14 or July 12) from 8:00 a.m. - 8:30 a.m.
- Students may be dropped off no earlier than 7:30 am and picked up no later than 5:30 p.m. each day. They are to wait inside the pavilion area until their ride arrives.

• Students must wear their W.A.D.E. T-Shirt and wristband all three days!

- Students should bring a towel, a sack lunch and soft drink, and an afternoon snack each day.
- Students must pass a simple swimming evaluation at the beginning of W.A.D.E. (Registered medical personnel will be on duty).
- Students must wear a personal flotation device (life jacket) when in or within 10 feet of the water!
- Students must wear aqua-socks when in the water (to be provided by the student).
- Students must stay with their assigned group at all times. If for some reason a student is granted permission to temporarily leave his/her group, he/she must be accompanied by a buddy.
- W.A.D.E. will not be responsible for lost or broken items a student may bring.