



New Mexico Space Academy Summer Camp Registration Form



Session/ Grade Next Fall	Cost per cadet	Week 1 Space Camp	Week 2 DINO Camp	Week 3 Space Camp	Week 4 Magic Camp	Week 5 Space Camp	Week 6 DINO Camp	Week 7 Space Camp	Week 8 Magic Camp
Half Day 9:00-noon or 1:00-4:00 Full Day 9:00-4:00		June 7-11	June 14-18	June 21-25	June 28- July 2	July 12-16	July 19-23	July 26-30	August 2-6
Pioneer K (full day)	\$150								
Pioneer K (half day)	\$100								
Pathfinder 1st-3rd	\$150								
Voyager 4th-6th	\$190	OV*		OV*		OV*		OV*	
Navigator 7th-9th	\$220	OV		OV		OV		OV	
Explorer 10th-12th	\$220	OV	Closed	OV	Closed	OV	Closed	OV	Closed

10%
Military
Discount!

Cost for all OverNight programs is \$475 per cadet.

OverNight camps begin on the Sunday afternoon prior to actual class start.

OV designates available OverNight session.

**OverNight programs are available ONLY for cadets entering the 6th grade in the fall.*

We reserve the right to cancel a session date if participation numbers are not adequate.

Please refer to our brochure for more information OR visit our web site at www.nmspacemuseum.org

METHOD OF PAYMENT

CHECK (Payment to NM Space Academy) \$ _____

PLEASE NOTE: A \$25.00 returned check fee will be charged for insufficient funds.

AMEX/MASTERCARD/VISA/DISCOVER \$ _____

EXP DATE ____ - ____

CARDHOLDER'S SIGNATURE

Would you like to support the Academy Scholarship program?

\$10 \$25 \$50 \$100 Other

Camp Week Choice

Space Camp: _____

DINO Camp: _____

Magic Camp: _____

Mail Registration Forms to:

NM Space Academy

POB 5430

Alamogordo, NM 88311-5430

FAX TO: 575-437-7722

Download forms: www.nmspacemuseum.org

For more information, call 1-575-437-2840 ext 41132 or toll free 1-877-333-6589 ext. 41132.

New Mexico Space Academy Summer Camp Form

REGISTRATION INFORMATION

Cadet name: _____
Address: _____
City, State, Zip: _____
Sex: ____ Age: ____ Date of Birth: _____
Grade Next Fall: _____
Nickname (for name tag): _____
Parent/Legal Guardian: _____
Home Ph#: _____
Business Ph#: _____
Cell Ph#: _____
Email Address: _____
Emergency Contact: _____
(In the event we are unable to contact you.)
Home Ph#: _____
Cell Ph#: _____
Have you previously attended this camp? _____

Permission Statement

This section must be completed and signed by the parent/guardian to insure acceptance into the program.

I believe that my child is physically and mentally capable of participating in the NM Space Academy Program. He/she is in good health and does not have any injury, illness or disability that will prohibit activity.

I verify that you have my permission to take my child to the nearest medical facility for emergency treatment.

I verify that my child has permission to participate in swimming activities, field trips and to be photographed for promotional purposes.

Parent/Guardian Signature

Date Signed

SHIRT INFORMATION

Please indicate size:

Child's Small _____ Adult Medium _____

Child's 10-12 _____ Adult Large _____

Adult Small _____ Adult X-Large _____

Other: _____

Would you like to purchase additional shirts? (\$15 ea.)

If yes, how many? _____ Size? _____

Would you like to purchase additional caps? (\$8 ea)

If yes, how many? _____

Health Information

Physician: _____

Phone #: _____

Address: _____

Health Insurance: _____

Name of Insured: _____

Policy #: _____

Group #: _____

Important: Please list ALL DIETARY restrictions, medical problems (medications, epilepsy, asthma and disabilities) that our staff should be aware of in order to assure special attention. Attach additional sheets if necessary.

Food allergies: _____

Medications: _____

Other: _____

Date of last immunization: _____

Are immunizations current? _____

Registration opens March 1, 2010. Classes are filled on a first come, first served basis. All fees must accompany registration form. Please allow 3-4 weeks to receive your confirmation packet.

A separate application is required for each cadet.

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