

WELCOME TO THE CATALINA ISLAND ECOLOGY SAFARI PROGRAM

Dear Parents,

Your student is about to embark on a unique program!

During the two days spent on the Catalina Island Ecology Safari program, your child will have the opportunity to explore the Catalina Island ecosystem through a series of outdoor educational experiences that supports classroom science curriculum. The program incorporates earth science concepts as students look at geological evidence on the way to and on the island and investigate how the island was formed. An introductory course on snorkeling and catch-and-release fishing allows the students to explore subtidal communities in the shallow protected waters of the island. Night program activities include plankton and food web observations with a squid light and a discussion on bioluminescence of nocturnal organisms. All of our instructors are well-trained biologists and teachers whose intent is to engage students in a series of enjoyable educational activities.

The Catalina Island Ecology Safari curriculum is aligned with the Science Content Standards for California Public Schools. Students will develop and exercise their scientific skills such as observing, communicating, inferring, interpreting data, identifying, and classifying.

In order to help you prepare your child for the upcoming journey, we have provided this **Parent Information Package**, which includes the following information and forms:

- Student Guidelines
- Student Clothing and Supply List
- Acknowledgement of Risk and Waiver form
- Student Medical form
- Administration of Medication forms
- Snorkel Information form

Each child must arrive the first day with a completed **Student Medical Form**, a signed **Acknowledgement of Risk and Waiver**, and a **Snorkel Information form**. If your child requires any prescription or over-the-counter medication during the program, you must have the Administration of Medication form(s) completed by your doctor. The medication must be in the original container, labeled with the student's name and with clear instructions on both schedule and dosage.

If you have any questions, please contact your child's classroom teacher. We are looking forward to working with your child!

STUDENT GUIDELINES

All teachers, chaperones, parents, and students must understand these safety rules before the start of the program. Please review these rules with the students before the program begins.

- Remain within visual sight of an adult at all times.
- Never go anywhere alone...always stay with your hiking/snorkeling group.
- Always walk on designated trails; follow behind the instructor(s).
- Never pick leaves, flowers, or stems from any plant unless otherwise told.
- Do not skip or throw rocks.
- No gum allowed.

While onboard the vessel...

- Wear shoes on board the vessel at all times.
- Do not enter any bunk other than your own.
- Always walk—no running on deck, keep both feet on the deck at all times, do not sit on the rails.
- Do not operate or touch any onboard equipment unless otherwise told.
- Report any illness or injury to an instructor or chaperone immediately.

While Snorkeling, Chaperones Should...

- Assist students with fitting of masks, fins, and wetsuits
- Supervise students not participating in the snorkeling activity
- Assist instructors with snorkeling groups in the water
- Assist instructors in helping students that need to return to the beach
- Assist instructors with the enforcement of all safety rules during the snorkeling activity

While Snorkeling, Students Should...

- Stay with the group
- Follow all safety rules outlined by the instructors

In the event of a student injury, a chaperone may be asked to supervise a hiking group, or to accompany a student back to either Wrigley Marine Science Center or Isthmus Cove for help.

STUDENT CLOTHING AND SUPPLY LIST

For safety reasons, students participating in the Island Ecology Safari program need to have and/or wear the following clothing:

Please pack the following in a backpack to be used throughout the first day:

- 1 Sack lunch for first day (avoid sweets and greasy foods!)
- 1 pair of shorts
- 1 swim suit (please wear under clothes for the first day)
- 1 towel
- 1 sweatshirt or jacket
- 1 hat (must block the sun)
- sunscreen (waterproof is best)
- 1 water bottle or canteen (these can be filled on the boat)

Optional Items:

- Wetsuit, mask, fins, and snorkel with carrying bag
- Sunglasses
- Book
- Camera
- Motion sickness medication (taken the night before or a minimum of 30 minutes before the trip)

Please pack the following in an overnight bag. These items will not be accessible until the evening of the first day:

- 1 sleeping bag in waterproof bag or plastic bag
- 1 pair pajamas (Sweats/attire that can be worn outside recommended)
- 1 pair of long pants
- 2 shirts / 1 long sleeved, 1 short sleeved
- 1 pair of underwear
- 1 pair of tennis shoes (closed toed)
- 2 pairs of socks
- 1 washcloth
- 1 toiletry kit (soap, toothbrush and paste, comb and brush, etc.)

Optional Items:

- Day pack
- Mittens
- Bag for wet swimsuit, gear
- Rain gear (ponchos work well)
- Stocking cap

Do Not Bring:

- candy, gum
- radios, walkman, or electronic games
- curling irons or blow dryers
- hairspray

Remember:

You will be getting dirty and wet! Pack only the necessities...all gear must be stowed on your own bunk. Mark all items with your name!

AVOIDING SEASICKNESS

There are several things that you and your students can do to avoid seasickness:

- Eat a good breakfast or lunch before the cruise--make sure that you avoid sweets and greasy foods!
- Take anti-motion medication the night before or at least 30 minutes before boarding the vessel (these medications generally last 24 hours so taking them the night before allows for the drowsiness to wear off)

ACKNOWLEDGEMENT OF RISK AND WAIVER FOR ALL PARTICIPANTS

Welcome to the Ocean Institute! We want you and everyone to have a memorable and safe experience.

The Ocean Institute's environment, vessels, facilities, and activities are unique and different from your usual surroundings and activities. There are many inherent risks, dangers, and hazards and everyone must exercise caution at all times in order to avoid or minimize the risk of damage, injury, and death.

Examples of these risks, dangers, and hazards include, without limitation: (a) walking and standing surfaces that may be wet, slippery, moving, irregular, unstable, and rough; (b) open areas such as hatches into which someone could fall; (c) low or irregular lighting, or no lighting at all; (d) objects and equipment that could fall on someone; (e) low ceilings; (f) ropes, chains, and other items that could strike or entangle someone; (g) extreme and variable physical, weather, and ocean conditions, including darkness, sun glare, storms, and hot and cold temperatures; (h) vessels, docks, buildings, ladders, and stairs from which someone could fall; (i) vessels and docks that could pitch, roll, capsize, flood, collide, and sink; (j) gaps between a vessel and a dock that could open or close suddenly and unpredictably; (k) possible encounters with wildlife and plants; and (l) unavailability of medical attention and treatment.

If you attend and Ocean Institute activities, then you must exercise caution at all times to protect yourself and others from these risks, dangers, and hazards. If children or other persons under your care attend any Ocean Institute activities, then discuss these risks, dangers, and hazards with them as they too must exercise caution at all times.

Program Name:

Program Date:

Participant Name:

Last:

First:

Birth date:

Guardian Name:

Last:

First:

Home Phone:

Cell Phone:

Work Phone:

Address:

City:

State:

Zip:

Email:

If you attend any Ocean Institute activities, and/or if others under your care attend any Ocean Institute activities, then by checking the box below you, on behalf of yourself and such other persons, shall be deemed to have read and understood this document and to have irrevocably waived any and all claims against the Ocean Institute and its directors, officers, employees, contractors, volunteers, agents, and insurers for damage, injury, accident, illness, or death occurring during or by reason of such activities.

Additionally, I authorize the use of photos taken of me and others under my care by the Ocean Institute for its promotional purposes.

As the Parent/Guardian, I have read and agree to the statements made on this document.

Today's Date:

STUDENT MEDICAL FORM

PLEASE PRINT CLEARLY

I/We, the parent(s) or guardian(s) of the participant named below, wish to register my/our child in the Ocean Institute's Program.
Dates attending _____ to _____.

Participant's Name (Last) _____ (First) _____

Home Phone (____) _____ Cell Phone(____) _____ Birth date ____ / ____ / ____

Address _____ City _____ State ____ Zip _____

In case of emergency, please notify: Parent(s)/Guardian(s) Name _____

Address _____ City _____ State ____ Zip _____

Daytime Phone Number (____) _____ *Business Number (____) _____

*Employer _____ *Social Security Number _____

Alternate Person in case of emergency, please notify: _____ at (____) _____

Name/Phone number of Family Physician _____

Name/Number of family medical insurance carrier _____

* For Medical Insurance Claims only

PARTICIPANT HEALTH INFORMATION

1. Does the participant have any physical or medical conditions or restrictions? Yes ____ No ____

If so, please describe: _____

If your child has a special medical or physical condition, your physician should understand that the participant will be away from home for two full days. Please have your physician write a note indicating agreement that the participant is fit enough to fully participate in the program and to also include any special instructions.

2. Is your child subject to any of the following? Please circle:

Homesickness Sleepwalking Bed wetting (send extra bedding) Car/motion sickness

3. Does your child have any dietary requirements or restrictions? Yes ____ No ____

If so, please describe: _____

4. Does your child have any allergies that may be of concern? Yes ____ No ____

If so, please describe the severity: _____

5. Has the participant recently been ill or exposed to any communicable diseases? Yes ____ No ____

If so, please explain: _____

ADMINISTRATION OF MEDICATION, PAGE 1

Name of Participant _____

Dates Attending _____

The nature of the program requires that all children participate in a variety of learning and social activities involving vigorous walking and hiking. Standardized, well-balanced meals are provided.

It is understood that the Ocean Institute is not legally obligated to administer medication to my/our child, and therefore, I/we agree to hold the Ocean Institute and its personnel free from any and all responsibility for the results of such medication, or the manner in which it is administered and to indemnify each of them against the loss of reason of any civil judgement arising out of these arrangements which may be rendered against them.

INSTRUCTIONS

No one is to administer medication to any child without authorization of the parent(s) or guardian(s). If you wish your child to receive medication you must fill out Part I: Prescription Medication and/or Part II: Non-Prescription Medication. These forms will be kept with the medication. **A parent/ guardian and physician's signature is required for each of these sections.**

Part I: Prescription Medication

MEDICATION 1

Diagnosis _____ Date of Examination _____

Medication Prescribed _____ Dosage _____

Schedule and Method of Administration _____

Comments _____

Physician's Signature _____

Parent(s)/Guardian(s) Signature _____

MEDICATION 2

Diagnosis _____ Date of Examination _____

Medication Prescribed _____ Dosage _____

Schedule and Method of Administration _____

Comments _____

Physician's Signature _____

Parent(s)/Guardian(s) Signature _____

ADMINISTRATION OF MEDICATION, PAGE 2

Name of Participant _____

Dates Attending _____

Part II: Non-Prescription Medication

MEDICATION 1

Medication _____ Dosage_____

Reason for Administration on Medication _____

Schedule and Method of Administration _____

Comments _____

Physician's Signature _____

Parent(s)/Guardian(s) Signature _____

MEDICATION 2

Medication _____ Dosage_____

Reason for Administration on Medication _____

Schedule and Method of Administration _____

Comments _____

Physician's Signature _____

Parent(s)/Guardian(s) Signature _____

MEDICATION 3

Medication _____ Dosage_____

Reason for Administration on Medication _____

Schedule and Method of Administration _____

Comments _____

Physician's Signature _____

Parent(s)/Guardian(s) Signature _____

SNORKELING INFORMATION FOR CATALINA ISLAND ECOLOGY SAFARI

The Ocean Institute conducts safe and enjoyable snorkeling during the Island Ecology Safari program. We will make an assessment of surf conditions and will substitute other activities in the event of unsafe conditions. Snorkeling activities will vary according to each student’s skill level. Weak swimmers may not be permitted to snorkel.

Personal snorkeling equipment is not required. Masks and snorkels will be provided by the Ocean Institute. However, we do not guarantee the equipment will properly fit your child. If your child owns his/her own equipment, please have them bring it.

We request your help in assessing your child’s swimming ability. Please complete the form below.

If you do not want your child to participate in snorkeling activities, please note below.

Thank you for your assistance.

Student Name _____

Please circle the category that applies to your child:

Competitive Swimmer (swim team participant)

Has completed 2+ years of swimming lessons

Has completed 1 year of swimming instruction

Non-swimmer

Has your child ever snorkeled? Yes No

Please comment briefly on swimming experience, ocean experience, endurance, and expectations from a snorkeling course.

Signed

Date