



*PARENTS: Please keep this page and return the rest of the application.*



## Background & Application

The Anacostia Watershed Society's Saturday Environmental Academy (SEA) offers a **FREE** outdoor educational opportunity for 7th and 8th graders who live in and near the Anacostia River watershed. Through this unique, fun, educational experience, students learn about their river and local environment, while developing skills in team building, critical thinking, and scientific investigation.

SEA offers free 10-week Saturday programs each fall and spring. Each Saturday of a semester program, we meet from 8:45 a.m.-1:00 p.m. at 745 8<sup>th</sup> Street, SE. The one exception is for our one overnight trip where we generally meet at 8:45 on a Saturday and return at 1:00 the next day. From our meeting location, we venture out together on various environmental activities in our local environment. Activities increase environmental awareness and give students the opportunity to take positive action to improve their environment. Activities may include boating trips, hikes, tree plantings, visits to community gardens and parks, and overnight camping trips. Students must commit to coming each Saturday if accepted into a semester program. Some exceptions (e.g., SSAT testing, etc.) granted. Students from DC wards 5, 6, 7, & 8 and MD students within the Anacostia Watershed are strongly encouraged to apply.

Go to [www.environmentalacademy.us](http://www.environmentalacademy.us) or visit us on Facebook at <http://www.facebook.com/pages/Saturday-Environmental-Academy/126372900707256> to learn more about SEA. If interested in applying for the **2017 Spring Program (March 11 – May 20)**, please complete the following forms. If you have any questions, please contact Catherine Estes, SEA Program Director, at [cestes@anacostiaws.org](mailto:cestes@anacostiaws.org) or 202-368-1169.

**Meet new friends, build your resume for high school & college, and help the environment by joining SEA!**





## Guidelines for Participation

We have found that in order for the Saturday Environmental Academy to be a positive experience for all involved, some basic guidelines are necessary. Accordingly, each student is expected to:

- Commit to attending every Saturday session. Limited exceptions allowed. Catherine Estes, Program Director, must be notified in advance and can be reached at 202.368.1169 if a student is unable to attend a session. A staff person will be at the meeting place by 8:30 am on the Saturdays the Academy is in session.
- Arrive on time for each session (at 8:45 a.m. unless otherwise told), ready to participate fully. Pick-up is promptly at 1:00.
- Follow teachers' instructions, for the safety of self and others.
- Dress appropriately to be outdoors with the possibility of getting dirty and possibly wet. Closed-toe shoes are required for every class.
- Be respectful of themselves and of others. No hitting, name calling, use of inappropriate language is allowed.

In addition, the use of cell phones, IPODS, or any other electronic devices during the Saturday sessions and overnight is not permitted. We suggest that all such items be left at home. The students will be asked to leave any electronics they bring with them on Saturdays in the office. If students do use them without permission while the Academy is in session, they will be confiscated by staff and returned at the end of the session. If parents/guardians need to reach the students during a session, they can call Catherine at 202.368.1169.

For the parents: All necessary forms must be received prior to a student participating in an event. If we do not have them, the student will be sent home.

In the event of a repeated failure to follow these rules, the staff will contact the student's parent or guardian. In extreme cases the student may be expelled from the program.

We have read the guidelines and agree to follow them.

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Parent or Guardian

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Student

Date \_\_\_\_\_



## Student Information and Release Form

(Please print clearly.)

Name \_\_\_\_\_ DOB \_\_\_\_\_ Grade: 7 or 8 Sex: M F  
 Parent or Guardian \_\_\_\_\_  
 Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 School \_\_\_\_\_ Parent E-mail \_\_\_\_\_  
 Health Insurance Carrier \_\_\_\_\_ ID# \_\_\_\_\_

**Health Concerns:** Please complete the accompanying Medical Form. No student will be allowed to participate in the Saturday Environmental Academy without the completed medical form on file.

**In case of emergency, notify:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
 Check here if same as above (    )  
 Phone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**In order for SEA staff to work effectively with our students, we like to learn about any areas that may be challenging for them. Please check the following area(s) in which your child has some difficulty. Check all that apply.**

Relating to other students	
Relating to adults	
Keeping temper under control	
Understanding and following directions	
Communicating effectively with others	
Other:	

Please explain any area(s) that you checked above.

\*Please see next page.\*





***PERMISSION FOR PHOTOGRAPHING***

I grant AWS-SEA permission to use my child's photo, image, or likeness and statements for the limited purpose of describing, promoting, or publicizing their efforts and for fundraising.

Student's name: \_\_\_\_\_

\_\_\_\_\_  
Parent or Guardian Signature (for participant under 18)

\_\_\_\_\_  
Date

**\*Please see next page\***



## Medical History Form

**\*ALL ITEMS MUST BE FILLED OUT BY A PARENT/GUARDIAN. NO ONE WILL BE ALLOWED TO PARTICIPATE IN THE SATURDAY ENVIRONMENTAL ACADEMY WITHOUT A COMPLETED FORM ON FILE.**

Name: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

### ***General Questions (You MUST explain "yes" answers below)***

**Has/does the participant:** **Yes**      **No**

1. Had any recent injury, illness or infectious disease?		
2. Have a chronic or recurring illness/condition?		
3. Take medication (prescribed or over the counter)?		
4. Ever been hospitalized?		
5. Ever had surgery?		
6. Have any emergency allergic reactions (e.g., bee stings, food, etc.)?		
7. Have frequent headaches?		
8. Ever had head injury?		
9. Ever been knocked unconscious?		
10. Ever had frequent ear infections?		
11. Ever passed out during or after exercise?		
12. Ever had seizures?		
13. Ever had chest pain during or after exercise?		
14. Ever had high blood pressure?		
15. Ever been diagnosed with a heart murmur, or other heart conditions?		
16. Ever had back problems?		
17. Ever had problems with joints (e.g., knees, ankles, etc.)?		
18. Have any skin problems (e.g., itching, rash, acne, etc.)?		
19. Have diabetes?		
20. Have asthma?		
20 a. If yes, does the child carry an inhaler?		
21. Had mononucleosis in the past 12 months?		
22. Had problems with diarrhea/constipation?		
23. If female, have an abnormal menstrual history?		
24. Have a history of bed-wetting?		
25. Have any dietary restrictions (e.g., seafood, pork, vegetarian, etc.)?		
26. Have problems with sleepwalking?		

Please explain any "Yes" answers, noting the number of the questions. Use the back if needed.

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Health History for \_\_\_\_\_ continued

Complete the following:

A) During the overnight camping trip and other field trips, I authorize a Saturday Environmental Academy staff member to administer the following over-the-counter medications or generic equivalent (i.e. for a headache, stomach ache, allergic reaction, etc.) to the participant. Please check all you allow:

- \_\_\_\_ Tylenol
- \_\_\_\_ Ibuprofen
- \_\_\_\_ Pepto Bismol
- \_\_\_\_ Anti-diarrhea
- \_\_\_\_ Benadryl

B) I give permission for my child to be administered the following as needed for minor discomfort while on Saturday Environmental Academy field trips: (check all that apply)

\_\_\_\_ Tylenol    \_\_\_\_ Ibuprofen    \_\_\_\_ Cough drops    \_\_\_\_ Sudophin    \_\_\_\_ Antacid    \_\_\_\_ other \_\_\_\_\_

C) Are there any specific activities to be encouraged, limited or avoided?    \_\_\_\_ yes    \_\_\_\_ no

If yes, please

explain \_\_\_\_\_

D) Does the participant have a current tetanus shot?    \_\_\_\_ yes    \_\_\_\_ no    Date of shot: \_\_/\_\_/\_\_

E) Please provide any other important health related information about your child:

**Please read and sign the following:**

This health history provided in this document is correct as far as I know.

\_\_\_\_\_  
Parent or guardian signature

\_\_\_\_\_  
Date

**Submitting Application**

Please scan and email it to: Catherine Estes, SEA Program Director, at [cestes@anacostiaws.org](mailto:cestes@anacostiaws.org)

If you need an alternate way to submit it, please contact Catherine at 202-368-1169.