

# Sacajawea Interpretive, Cultural & Educational Center

## 2017 Program Registration Information



**Registration for Summer 2017 programs will begin mid-May. Once programs begin call 756-1188 to check for openings – classes fill up fast so register early!**

<b><u>Programs:</u></b>	<b><u>Fees (Lemhi County):*</u></b>	<b><u>Fees (all others):*</u></b>
Outdoor School Classes	\$6.00 per person (or as listed)	\$6.00 per person (or as listed)
1805 Living Experience	\$300 per person/\$600 per family+	\$350 per person/\$650 per family+
Kid's Garden Club – Hosted by the Salmon School Garden this year – see their flyer for information!		

\*All class fees must be paid in full at the time of registration.

+ This rate is for those who register before June 30. Cost increases with later registration.

**Scholarships:** Through generous donations from local service organizations and individuals we are able to offer full and partial scholarships to students who complete an application. Applications will be available at sign-ups and later at City Hall, the Sacajawea Center, and electronically at [www.sacajaweacenter.org](http://www.sacajaweacenter.org).

### **NOTE:**

- ☐ All classes are filled on a first-registered, first-served basis.
- ☐ Full payment is required at the time of registration.
- ☐ Complete one registration form for each individual registering for a class/classes.
  - ☐ You can mail your registration form to: Sacajawea Center/City of Salmon; 200 Main Street; Salmon, ID 83467
  - ☐ Or deliver it to City Hall at 200 Main Street. Office hours are 8:00am- 4:45pm, Mon.–Fri. unless closed for holiday.
  - ☐ Payment may be made by check or money order payable to *City of Salmon*, or by MasterCard or Visa.
  - ☐ For credit card transactions up to \$60.00 add a \$1.95 transaction fee; over \$65.00 a 3% convenience fee will be charged.

### **Registration Confirmation:**

An email will be sent confirming the classes, dates, and times that you/your child signed up for. A class reminder will not be sent. Our staff will attempt to reach students via email and/or telephone if a class is full or canceled.

**Please keep a copy of your submitted registration form and schedule your class(es) on your calendar!**

### **Refunds & Insufficient Funds Charges:**

- A refund of class tuition will be given only if the class is full or is cancelled by the Sacajawea Center.
- Payment for one class can be transferred to another as long as there is still space available.
- A non-sufficient fund (NSF) check will be charged a \$25.00 service fee.
  - If a NSF check is received or a credit or debit card is declined, a student may not participate in a class until both the NSF charge and the registration fees are paid by cash or money order to the City of Salmon staff.

## **SACAJAWEA CENTER REGISTRATION FORM**

\* indicates information is required

Please complete one registration  
form for each participant.

Student Name (print)\*: \_\_\_\_\_ Age\*: \_\_\_\_\_ Sex\*: M / F

Parent/Guardian Name (print)\*: \_\_\_\_\_ Today's Date\*: \_\_\_\_\_

Address\*: \_\_\_\_\_  
Street City State Zip

What's the best way to contact you? \_\_\_\_\_ Email\*: \_\_\_\_\_

Cell Phone\*: \_\_\_\_\_ Work/Home Phone: \_\_\_\_\_

Class/Program Title*	Date(s)*	Fee*
(use another form if signing up for more than 5 classes) <b>GRAND TOTAL*</b>		

By signing below I give permission for my child (named above) to attend the programs listed above at the Sacajawea Center. Classes and workshops may involve outdoor activities and the use of potentially harmful equipment. I voluntarily elect to assume all risks of loss, damage, or injury that may be sustained by myself and/or my daughter/son, or any personal property, in the course of participation in this program.

I herby knowingly, freely and voluntarily release, indemnify, and hold harmless the Sacajawea Center, the City of Salmon, and any of its agents from liability, claims, demands, or course of action arising out of any loss to me or my child due to or related to participation in programs or the use of equipment supplied to myself and/or my daughter/son in connection with the programs.

\_\_\_\_\_  
Parent/Guardian or Participant's Signature Date

**NOTE: PLEASE ATTACH ADDITIONAL EMERGENCY CONTACT INFORMATION AND ALL BEHAVIORAL/ALLERGY/MEDICAL CONDITIONS THE SACAJAWEA CENTER STAFF SHOULD BE AWARE OF BEFORE ATTENDING PROGRAMS.**

☐ Please check the box if you **DO NOT WANT YOUR CHILD PHOTOGRAPHED** during our 2017 Sacajawea Center Summer classes. It will be you and your child's responsibility to alert the camera operator or stay out of photos.

(Make checks payable to City of Salmon – Call to pay with credit card (208)756-3214)

**Mail or return completed registration form and payment to:**

**City of Salmon, 200 Main Street, Salmon, ID 83467**