



NORTH CAROLINA  
**MARITIME  
MUSEUMS**  
SOUTHPORT

## Children Seasonal Registration

*Please complete one application per child. Be certain to include sales tax.*

Make checks payable to *Friends of the NC Maritime Museum at Southport.*

I/We are members of the Friends of the NC Maritime Museum at Southport

I/We are interested in volunteer opportunities for: Child (over 12) / Adult

**PLEASE COMPLETE THE INFORMATION BELOW TO REGISTER:**

*Form must be completed and returned in order to reserve a seat for your participant; availability is first come/first served. Confirmation is via email.*

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Permanent Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email Address (**REQUIRED**): \_\_\_\_\_

Emergency and Health Information Food/Environmental/Drug Allergies: \_\_\_\_\_

Preferred Hospital:  Doshier  Novant Health  No Pref

Any conditions that should be shared for educational/health purposes: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Contact phone: \_\_\_\_\_ Relation: \_\_\_\_\_

- I understand the North Carolina Maritime Museum at Southport staff/volunteer will contact 911 in the event of an emergency. I give permission to the North Carolina Maritime Museum staff to give first aid treatment in the case of a minor injury. I know that I or my emergency contact will be notified immediately via phone. The museum will follow up with an incident report.
- I understand that images of me or my child/participant will be taken during class for promotional purposes: Newspaper, electronic media (internet), social media, newsletter, calendar, and/or flyer. They will not be identified without parental consent.
- I give permission for museum staff to transport myself and/or my child/participant via the museum van during field trips.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Total # of classes: \_\_\_\_\_ Fees + NC Tax 6.75%: \_\_\_\_\_ Method of payment: Cash Check CC

Museum staff only:

Total amount paid: \_\_\_\_\_ NCMM Staff: \_\_\_\_\_ Date: \_\_\_\_\_

## Children Seasonal Registration



NORTH CAROLINA  
**MARITIME  
MUSEUMS**  
SOUTHPORT

Please return your application with payment to:  
NC Maritime Museum  
at Southport  
204 E. Moore St  
Southport, NC 28461

For specific class information related to your participant please call the Curator of Education:  
910.477.5153

For space availability and class descriptions, please call the program registrar:  
910.477.5151

Interested in donating or volunteering? The Friends of the Museum are a 501(c)(3) nonprofit group that help the museum fulfill their mission! Call the friends to find out how you can help! 910.477.5154

FRIENDS OF



NORTH CAROLINA  
**MARITIME  
MUSEUMS**  
SOUTHPORT

### Please check the corresponding box for registration

*Registration form must be completed and returned to reserve a seat. See the museum calendar for class descriptions. Confirmation will include a checklist of items to take to class. Call for details: 910-477-5151. [Family Membership and above receives discounts on ANY class below.](#)*

#### Seasonal Programs

\$10 per person for all ages from 1 - 3 p.m. *Registration and payment due the day prior by 5pm.*

- February 14: Maritime Valentines
- April 11: Springtime Sloop **NEW**
- October 31: Scary Schooner
- November 28: Harvest Yawl **NEW**
- December 5: Sea-Sons Snow

#### School Year Day Camps **NEW**

\$30 per person. Single day camps for children 5-17 from 9 a.m.-5:30 p.m. Registration and payment due the day prior by 5 p.m.

- April 14: Seaside Spring
- April 15: Turtl-ey Awesome
- April 16: Captain's Cuisine
- April 17: Reduce, Reuse, Recycle
- December 29: Navigation
- December 30: Pirates in Port
- December 31: Cape Fear Cyphers