



Student Information Form

Student Name: _____
DOB: _____ Gender: Female Male Other
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Name of parent/guardian: _____
Museum Member? Yes No
Please list any medical conditions that the instructor should know about: _____

Emergency Contact: _____ Relationship: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone: _____

Waiver of Liability

I do for myself, my executors or administrators, heirs and assigns, waive any and all claims as may accrue for me or them against the Antique Boat Museum arising from my and or my family's participation in any and all activities including participation with any of my family's boat(s) in any or all of the Antique Boat Museum education programs and any otherwise related activities. If a participant is less than 18 years of age, a parent or guardian shall be required to sign this release.

Signature: _____ Date: _____

Photography Release

The Antique Boat Museum often takes photographs or videotapes of courses and participants for use in Museum publications and marketing.

I do not object to the Antique Boat Museum using my picture or my child's picture in Museum publications and marketing.

I do object to the Antique Boat Museum using my picture or my child's picture in Museum publications and marketing.

Signature: _____ Date: _____

ABM Course Cancellation Policy

- Should you cancel more than 2 weeks before the start of the class you will receive a full refund.
- If you cancel within 2 weeks of the class, we will issue a credit towards future class tuition.
- If you cancel within 1 week of the class, we regret that we are unable to refund or credit your payment.
- If ABM must cancel the course for any reason, we will notify you and refund your entire tuition.