

Clearwater Marine Aquarium Summer Camp Scholarship Application

Sponsored by Ron Jon Surf Shop and Surfing's Evolution & Preservation Foundation

Applicant Information

Child Full Name: _____
FirstLast

My Child Prefers to be Called: _____ Child Age: _____

Child Date of Birth: _____ Does your child have any allergies? _____

Camper Qualifications: ☐ My child has a passion for science, conservation, marine life, and the ocean.
Select all that apply. ☐ I will arrange transportation for my child to be dropped off at 8:15 am and picked up by 4:15 pm daily.
☐ My child will come to camp hydrated and ready to spend time outside in the hot summer weather and high temperatures.

Preferred Camp Session Dates(s):
(Select one or more based on the applicant's grade level)

Eco Explorers Camp

For 10-11-year-old Applicants

- ☐ June 22–26, 2026
☐ July 6–10, 2026

Eco Leaders Camp

For 12-14-year-old Applicants

- ☐ June 15–19, 2026
☐ June 29–July 3, 2026
☐ July 13–17, 2026

Guardian Information

Guardian Full Name: _____
FirstLast

Address: _____
Street AddressApartment/Unit #

CityStateZIP Code

Contact Phone Number: _____ Contact Email: _____

How did you hear about this scholarship? ☐ Email Newsletter ☐ CMA Website ☐ Flyer ☐ Social Media ☐ Friend/Family
☐ School/Teacher ☐ Local Event ☐ Community Organization ☐ Other: _____

Proof of Financial Need: ☐ I am including a copy of our 2025–2026 tax return, with private information redacted (such as Social Security numbers), showing a household income of less than \$50,000.
Select one. ☐ I am including documentation showing that my camper qualifies for the free or reduced lunch program for the 2025-2026 school year.

Registration Information

If selected for the scholarship, this information will be used to complete your camp registration.

Child Shirt Size: ☐ Youth Small ☐ Youth Medium ☐ Youth Large ☐ Adult Small
☐ Adult Medium ☐ Adult Large ☐ Adult X-Large ☐ Adult 2X-Large

Emergency Contact/Authorized Pick-up #1 Full Name: _____
FirstLast

Emergency Contact/Authorized Pick-up #1 Phone Number: _____

Authorized Pick-up #2 Full Name: _____
FirstLast

Authorized Pick-up #2 Phone Number: _____

Authorized Pick-up #3 Full Name: _____
FirstLast

Authorized Pick-up #3 Phone Number: _____

Authorized Pick-up #4 Full Name: _____
FirstLast

Authorized Pick-up #4 Phone Number: _____

Required Acknowledgments and Consents

All boxes below must be checked for this application to be considered for the Clearwater Marine Aquarium Summer Camp Scholarship.

- ☐ I consent to the collection and storage of the information submitted in this scholarship application for the purpose of reviewing and administering the Clearwater Marine Aquarium Summer Camp Scholarship.
- ☐ I understand that if I am awarded the scholarship, I will receive an email notification in mid-May with a deadline to confirm acceptance. If I do not confirm by the stated deadline, the scholarship will be forfeited and offered to the next applicant on the waitlist.
- ☐ I will ensure my child(ren) bring closed-toe water shoes and a bathing suit to camp each day so they are ready for a snorkeling or kayaking trip.
- ☐ I give permission to Clearwater Marine Aquarium or its officers or employees or instructors and supervisors to provide first aid and administer prescribed medication and seek medical treatment if an accident arises for my camper.
- ☐ I understand that Clearwater Marine Aquarium protocols and planned camp schedules are subject to change based on the COVID-19 recommendations issued by the Centers for Disease Control, Pinellas County Government, and the Florida Department of Health
- ☐ I understand that the scholarship covers the following:
 - Tuition for either Eco Explorers Camp (4th–5th grade) or Eco Leaders Camp (6th–8th grade)
 - One free camp t-shirt
 - A camp gear pack, including a Clearwater Marine Aquarium camp bag, mask and snorkel, towel, reusable water bottle, sunscreen, and sunglasses
 - Daily catered lunches, including an entrée, drink, side, and dessert
- ☐ I understand that airfare, lodging, and transportation to and from Clearwater Marine Aquarium are not included in the scholarship package.
- ☐ I understand that anyone who will be picking up my child — **including parents and guardians** — must be listed on the Authorized Pick-Up list above. My child will not be released to anyone not listed, and a valid photo ID is required at pick-up. The name on the photo ID must match a name on the Authorized Pick-Up list. I understand that one Emergency Contact/Authorized Pick-Up person is required, up to three additional Authorized Pick-Up contacts are optional, and that additional authorized pick-up names with phone numbers may be submitted on a separate sheet of paper with this application or by emailing camps@cmaquarium.org.
- ☐ Clearwater Marine Aquarium Registration Terms & Conditions: In my individual capacity as parent or guardian of the named camper above, being a minor child, hereby release and hold harmless Clearwater Marine Aquarium, its officers, employees, instructors and supervisors from any and all liability or damages, both personal and property, arising out of or as a result of said minor child's attendance at summer camps. I assume all risks incident thereto with respect to myself and to any other individuals from whom the registration is made. I give permission for Clearwater Marine Aquarium, its officers, employees, instructors and supervisors to provide routine health care, administer prescribed medication and seek medical treatment if an accident arises.

Additionally, I acknowledge that Clearwater Marine Aquarium may capture photographs and videos of my child, myself, and members of my family during our participation in Clearwater Marine Aquarium activities. I hereby grant Clearwater Marine Aquarium, its officers, employees, instructors and supervisors the irrevocable and unrestricted right to produce, publish, and use such photographs and videos for any lawful purpose, including but not limited to publication, promotion, illustration, advertising, trade, or historical archive, in any manner or medium. Also, on occasion, local news media may visit our facilities in covering various events. By signing this permission slip, I acknowledge awareness that my child's photograph may be taken at times for promotional or news coverage purposes. In addition, I understand that my child may appear in photos taken by fellow campers during Clearwater Marine Aquarium activities. I consent to the use of such photos within the camp community for non-commercial purposes. I release Clearwater Marine Aquarium, its officers, employees, instructors and supervisors from any liability arising from the use of the images or videos, and I waive any claims or rights to compensation related to the use of these materials. Furthermore, I grant permission for the use of statements made by my child, myself, or my family members during interviews or evaluations, with or without our names, for advertising and publicity purposes without any restrictions on time or geographic area.

☐ **I understand that I must submit this completed application with proof of financial need, including either:**

- A copy of our 2025–2026 tax return, with private information redacted (such as Social Security numbers), showing a household income of less than \$50,000, **OR**
- Documentation showing that my camper qualifies for the free or reduced lunch program for the 2025–2026 school year

All materials must be **received by the scholarship deadline** at:

**Clearwater Marine Aquarium
ATTN: Education Summer Camp Team
249 Windward Passage
Clearwater, FL 33767**

Alternatively, applicants may scan and email this completed application and required materials to camps@cm aquarium.org, or they may complete the application online at www.cmaq uarium.org/summer-camp-scholarship.

By signing below, I confirm that the information provided is accurate and complete, and that I have read and agreed to all acknowledgments above.

Guardian Signature: _____ Date: _____