



SCHOOL PROGRAMS REGISTRATION FORM

To register for school programs, please complete the forms and submit

Mail the form to: Dolphin Quest
Education Department
425 Waikoloa Beach Dr.
Waikoloa, HI 96738

Fax the form to: 808.886.7030

Contact Teacher's Name: _____

E-mail: _____



I'd like to receive lessons and waivers electronically.

School: _____

School Phone: _____

School Fax: _____

School Mailing Address: _____

Program Type



Interactive Demonstration (\$5/student, tax included) # of Students _____



Touch (\$20/student, tax included) # of Students _____



Class Photo Option: Each class will have a group photo taken with the dolphins. Photos are available to purchase at a discounted rate of \$9 each (tax included). Amount _____

Proposed Program Dates (Mondays, Wednesdays, and Fridays ONLY):

Please list three dates in order of preference.

1st Choice: _____ **2nd Choice:** _____ **3rd Choice:** _____

Contact us if you are interested in having two classes participate on the same day.

What major concepts/standards do you have planned to cover in your curriculum for your 5th grade students this year?
