



## SeaLab Information Request Form

---

### School/Group Information:

School/Group Name: \_\_\_\_\_

Group Leader Name(s): \_\_\_\_\_

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

School Phone: \_\_\_\_\_ Ext: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

Approximate Group Size: Students \_\_\_\_\_ Adults \_\_\_\_\_ Age/Grade Level: \_\_\_\_\_

### Program Date Information:

Desire Program for the:  2018-2019 School Year  2019-2020 School Year

Desired session date(s) or time frame: \_\_\_\_\_

Date(s) or time frame are flexible?  Yes  No

Restricted days and dates are: \_\_\_\_\_

### Program Interest:

- Outreach program at my school or facility
- Outreach program at my school or facility paired with water activity
- Lab circuit at SEACAMP San Diego's Fiesta Island Facility *(for up to 100 participants)*
- Marine science program including one or more of the following labs/activities:
  - Fish Adaptations Lab  Kayaking & Seining
  - Invertebrate Lab  Snorkeling & Seining
  - Marine Biology Lab  Boogie Boarding & Physical Oceanography
  - Tidepool Exploration  Other: \_\_\_\_\_  
(Low tide dependent)

Please fax, email, or mail this page back to us at  
SEACAMP San Diego ♦ PO Box 711310 ♦ San Diego, CA 92171  
(800) SEACAMP ♦ Fax: (858) 268-0919 ♦ [seacamp@seacamp.com](mailto:seacamp@seacamp.com) ♦ [www.seacamp.com](http://www.seacamp.com)