



ALLIANCE FOR WEEDON ISLAND ARCHAEOLOGICAL RESEARCH AND EDUCATION

# *JUNIOR ARCHAEOLOGIST SUMMER CAMPS*

WEEDON ISLAND  
PRESERVE

JULY 17 – 21, 2017

JULY 24 – 28, 2017



**Alliance for Weedon Island Archaeological Research and Education (AWIARE)**, in partnership with the **Florida Public Archaeology Network (FPAN)**, plans exciting new archaeology summer camps at Weedon Island Preserve designed for students who are interested in exploring the past. All camps are conducted by professional archaeologists, including educators from **FPAN** and allow kids to experience archaeology first-hand through activities, experiments, hikes, and even a real excavation.



**Dates: July 17 – 21, 2017 (9 am – 3 pm)  
July 24 – 28, 2017 (9 am – 3 pm)**

**Ages: Children ages 7 – 11**

**Registration: \$175.00/camper/week  
Limited to 20/week**

**Registration is on a first-come, first-served basis. Before-camp care is available from 7:45 am to 9:00 am for an additional fee (\$50.00) each week.**

# JUNIOR ARCHAEOLOGIST SUMMER CAMP

---

This summer camp is designed for children with an interest in prehistory and history as well as learning how early people interacted with their environment. Campers will learn about the importance of archaeology and will gain understanding about early natural resources that were necessary for life in the Tampa Bay region. Highlights of the camps include guest experts, tour of an archaeological site, hands-on archaeology, lab analysis, pottery making, atlatl adventure, and earning the certificate of Tommy the Tortoise, Junior Archaeologist.



## ***How to Register***

Complete registration and liability release forms are provided on the next page. Return via U.S. Postal Service along with a check or money order made out to "AWIARE" for the appropriate amount. Registration can also be completed online, with option to pay registration fee via PayPal, at [www.AWIARE.org](http://www.AWIARE.org). Once the completed paperwork and payment have been received, we will provide a confirmation and other information via email.



## ***Mailing Address***

AWIARE  
1500 Weedon Drive NE  
St. Petersburg, FL 33702

## ***Cancellation Policy***

All cancellation requests must be received in writing or email and be postmarked at least ten days prior to the start of camp. No refunds will be made for cancellations received after that date. A

\$25.00 handling fee will be charged for all processed refunds.

## ***Scholarship***

Each year through generous donations, scholarships are available for children who would otherwise not be able to attend. For more information on our scholarship program, or to fill out an application please email [awiare1@gmail.com](mailto:awiare1@gmail.com)

***For more information, or to register, please contact:*** Rebecca O'Sullivan at [rosulliv@usf.edu](mailto:rosulliv@usf.edu)

**SUMMER CAMP REGISTRATION FORM**  
**WEEDON ISLAND PRESERVE**  
**ST. PETERSBURG, FL**

Please note: Registration is limited to 20 campers and is available on a first-come basis. Registration fee is \$175.00 /camper/week. Registrations cannot be processed unless completed forms are accompanied by full payment.



Please check the desired archaeology camp:

\_\_\_\_\_ July 17 – 21, 2017 (9am – 3pm)

\_\_\_\_\_ July 24 – 28, 2017 (9am – 3pm)

---

**Child's full name** **Date of birth** **Age at start of camp**

---

**Entering grade (in fall)** **Male or Female**

---

**Parent's full name**

---

**Mailing address**

---

**City** **State** **Zip code**

---

**Home phone** **Cell phone** **Work phone**

---

**Email address**

---

**Emergency contact (please list phone numbers below)** **Relationship to child**

---

Home phone

Cell phone

Work phone

Please list all persons authorized to pick up your child. A photo ID will be required at pick-up and children will only be released to individuals listed on this registration form.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Please list special medical conditions:

\_\_\_\_\_  
\_\_\_\_\_

Allergies: \_\_\_\_\_

Medication: \_\_\_\_\_

Does your child have any special needs (physical, medical, dietary, emotional)?

\_\_\_\_\_  
\_\_\_\_\_

#### Liability Release Form

I request AWIARE/FPAN allow the minor child named above to participate in summer camp activities offered at Weedon Island Preserve. It is my understanding that such activities may include hikes, field activities and lectures, and inadvertent exposure to potentially dangerous wildlife and /or vegetation. I assume all risks and liabilities associated with my child's participation in such activities and agree not to bring suit against AWIARE/FPAN , their agents, or employees, for damages arising from any injury. In the event that my child might require medical treatment for any reason while attending a summer camp program, I authorize AWIARE/FPAN to admit my child for treatment at the nearest licensed medical facility. I give AWIARE/FPAN permission to take photographs of my child while participating in the summer camp program. It is my understanding that said photographs may be used in publicity for future programs.

---

Parent/Guardian/Legal Custodian Signature

Date

Mail completed registration and liability release forms, and check for appropriate amount made payable to AWIARE to:

AWIARE

1500 Weedon Drive NE

St. Petersburg, FL 33702