



STEAM Programs 2024-2025

Look what's new! For the first time ever The Mobile STeAM Lab is offering a pop-up science program designed to be educational, hands-on, project-based, **S.T.E.A.M.** - based and fun. These science programs are learning experiences intended to help minimize social, emotional, and academic setbacks known as the "Summer Slip."

The youth of our country have always been important to MSL. We pride ourselves in bringing so much more to the communities we serve. MSL invests in your community through programs that help children grow to be healthy, drug-free, and prepared.

The Mobile **STeAM** Lab is offering a variety of educational science programs covering science, technology, engineering, art, and mathematics with a focus on environmental stewardship and sustainability and real-world applications by teaching conceptual understandings of life science content. We're creating a place where kids get to explore and discover the natural world around them.

Take a look at our program descriptions and dates to choose which is just right for you and your child. Spaces will fill up quickly, so please send in your registration application with proof of tuition payment as soon as possible. Thank you for choosing The Mobile **STeAM** Lab for your year-round fun.

Please review the following policies and procedures to ensure everyone has a positive experience.

Overview

The Mobile **STeAM** Lab offers original educational science programs that will run throughout the academic school year as well as the summer months. Each program is a unique experience for children aged **7-9 and 10-12**. We strive to provide a positive and fun atmosphere for all our students in which they safely explore, learn, and make friends and memories.

Risk Factors

The _____Venue_____ and Patricia Perri (Miss Triscia)/The Mobile STEaM Lab educational science programs are ideal for children interested in aspects of science, technology, engineering, art, mathematics as well as local wildlife and natural environments. Part of the activities will allow participants to be in contact with wild animals and explore the outdoors (solely the grounds of said venue). This experience can be quite fun and rewarding. Even though many safety precautions exist, there is always the potential to be injured, bitten, or scratched when working with live animals and exploring nature. It is important that you understand and accept these risks before registering your child for this summer program. It is also important that you and your child understand that appropriate behavior is required at all times.

Waiver for Minors

I accept all risks inherent to the educational science programs at _____Venue_____ with Patricia Perri (Miss Triscia)/The Mobile STEaM Lab, including the additional risks that exist when working with or around wild animals and exploring the outdoors, and do hereby release _____Venue_____ and Patricia Perri (Miss Triscia)/The Mobile STEaM Lab, its third-party vendors, as well as their directors, officers, agents, employees, and members from all liability for injury during the summer education program activities.

It is further understood that _____Venue_____ with Patricia Perri (Miss Triscia)/The Mobile STEaM Lab are not responsible for the loss of personal property, and I understand that the daily drop off is no earlier than 8:30 a.m. and I must pick up my child no later than 4:00 p.m.

I understand that my child is expected to maintain appropriate behavior. If my child is having difficulty in this area, I understand I will be notified and may be asked to remove my child from the educational science program. No refund will be given. I have read the risk factors listed above, and this waiver, and fully understand its contents. I am aware that this is a release of liability and have signed it of my own free will.

Full Name of Parent/Legal Custodian/Guardian

(Print)

(Signature)

(Date)

Permission to Participate

Science Programs held at _____Venue_____
and led by Patricia Perri (Miss Triscia)/Mobile **STeAM** Lab

NOTICE TO THE MINOR CHILD’S PARENT/LEGAL CUSTODIAN/AND OR GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY. YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, EVEN IF _____Venue_____
AND PATRICIA PERRI (Miss Triscia)/MOBILE **STeAM** LAB, ITS DEPARTMENTS, EMPLOYEES, OFFICIALS, COACHES, CONTRACTORS, VOLUNTEERS, SPECIALISTS, AND AGENTS (HEREINAFTER REFERRED TO AS “RELEASED PARTIES”) USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED. BY SIGNING THIS FORM, YOU ARE GIVING UP YOUR CHILD’S RIGHT AND YOUR RIGHT TO RECOVER FROM ANY OR ALL OF THE RELEASED PARTIES IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS THAT ARE A NATURAL PART OF THE ACTIVITY. YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND THE RELEASED PARTIES HAVE THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

Full Name of Parent/Legal Custodian/Guardian

(Print)

(Signature)

(Date)

Participants Release and Waiver of Liability Agreement

Read Completely and Carefully Before Signing

I, the undersigned, as the parent/legal custodian/guardian of the minor child (“my child”) named below, do hereby give my full consent and approval for my child to participate as a member of the Science Programs at _____Venue_____ and led by Patricia Perri (Miss Triscia)//Mobile STEaM Lab (Released Parties). I understand that there are certain risks of damages and injuries, including death, inherent in the Science Programs at _____Venue_____ and led by Patricia Perri (Miss Triscia)//Mobile STEaM Lab and in other related activities incidental to my child’s participation, and I am willing to assume these risks on behalf of myself and my child. These risks include, but are not limited to, those hazards associated with weather conditions, travel, playing conditions, both inside and outside of its buildings and to use its facilities, equipment, machinery, and other participants. Further, I understand that there is inherent risk in the Science Programs and that inherent risk means those dangers or conditions, known or unknown, which are characteristic of, intrinsic to, or an integral part of the activity and which are not eliminated even if the activity provider acts with due care and includes failure by the activity coordinator to warn me or my child of an inherent risk or the risk that the participant or another participant in the activity may act in a negligent or intentional manner and contribute to the injury or death of my minor child. I understand that leisure activity programs may actually be organized, directed, and presented by an individual(s) performing those duties as an independent contractor or specialist using the _____Venue_____ property. I hereby give permission for my child to receive necessary medical treatment. Further, I agree that in consideration for my child’s participation in the Science Program that I shall hold harmless and fully indemnify and defend the _____Venue_____ and Patricia Perri (Miss Triscia)//Mobile STEaM Lab, its departments, employees, officials, coaches, volunteers, contractors, specialists, and agents (Released Parties) from any and all causes of action, claims, damages, costs including but not limited to attorney’s fees and costs, which may arise from any cause of action made by me or by, through or on behalf of my child, even if the damages, injuries or death are caused in whole or in part by the negligence of the Released Parties. I hereby waive, release, discharge and agree not to sue the Released Parties for any and all causes of actions, claims or damages arising out of or resulting from my child’s participation in the Science Program activities, including but not limited to damages, injuries, or death arising out of risks that are a natural part of these activities. I agree that in consideration for my child being permitted to participate in the activity, I assume full responsibility for any loss of property, accident, bodily injury, or death as a result of my child’s participation in this activity.

I expressly agree the Release and Waiver of Liability Agreement is intended to be as broad and inclusive as is permitted by the laws of Kansas/New York and that if any portion thereof is held invalid, I agree that the balance shall, notwithstanding, continue in full legal force and effect.

I acknowledge that I have read (or have had read to me) each and every one of the provisions in this waiver, release of liability and indemnification agreement, and that I understand each of the provisions in this agreement and that I agree to abide by them.

Please print the science program(s) your minor child is participating in based on the 2024-2025 schedule.

Name of Minor Child (Under age 18)

Participants DOB

Full Name of Parent/Legal Custodian/Guardian

(Print)

Address

City _____ State _____ Zip _____

Signature

Date _____ Phone _____

Witness (Venue Representative or Patricia Perri (Miss Triscia)

Contact Info

Full Name of Parent/Legal Custodian/Guardian

Address

City _____ State _____ Zip _____

Parent(s) Name(s)

(Mother) _____

(Father) _____

(M) Daytime Phone

(F) Daytime Phone

Full Name of Emergency Contact

Emergency Contact's Relationship to Child

Emergency Contact's Daytime Phone

Drop-Off/Pick-Up Info and Permission List

- Please do not drop your child off at the front door and let them walk in by themselves.
- If your child is ill, running a fever, and/or suspected to be contagious, please **DO NOT** bring him/her to the class. Please call us and let us know if your child will be absent.
- A parent/ legal custodian/guardian must sign their child in and out each day.
- Drop-off and sign-in begins at 8:30 am
- Children must be picked up on time between 3:00 - 3:30 pm each day.
- A \$25 late fee will be charged if a child is retrieved up to 10 min late, \$35 up to 20 min late, and \$50 up to 30 min late. Payment must be made at time of pick up or child cannot return to program's remaining days.
- If you anticipate arriving late for pick-up, call to let the _____ Venue _____ and/or The Mobile **STeAM** Lab staff know (Miss Triscia at WhatsApp 772.521.0351).

- Children will only be permitted to leave the program/venue with individuals on your Pick-Up Permission List.
- All individuals picking up a child **MUST** show identification, sign child out and make sure The Mobile **STeAM** Lab staff knows the child is leaving the premises.

Below, list the people who have permission to pick up your child if you are unable to. Please ensure that these individuals understand that they will be required to show identification. Because you have granted us permission to do so, your child **WILL** be released to any of these individuals who present the proper identification whether or not you have notified staff at the _____ Venue _____ or Patricia Perri (Miss Triscia)/The Mobile **STeAM** Lab and in advance. The _____ Venue _____ or Patricia Perri (Miss Triscia)/The Mobile **STeAM** Lab will **ABSOLUTELY NOT** release your child to any person who is not listed on this form, other than the parent/legal custodian/guardian listed on the first page of this application.

Pick-Up Permission List

Full Name: _____ Phone: _____

Full Name: _____ Phone: _____

Full Name: _____ Phone: _____

Full Name: _____ Phone: _____

Photo Release

I hereby permit the _____ Venue _____ and Patricia Perri (Miss Triscia)/The Mobile **STeAM** Lab to photo-document my child’s science program activities. I give permission for photographs of my child to be used in articles, promotional fliers, and advertisements.

 Signature of Parent/Legal Custodian/Guardian Date

Child Information

Full Name of Child: _____ Gender: M / F
Birthdate (Mo/Dy/Yr.) _____ Child's Preferred Name: _____

Age Requirements

- These science programs are designed for children from 7–9 and 10-12 years of age.
- Children must be at least 7 years old by the start of each science program and not be older than 9 years old by the end of each program.

Science Program Selection

- Please select program(s) for which you are registering your child. A \$300 deposit for EACH program must accompany your application unless otherwise noted.
- Programs run from 9:00 am – 3:30 pm and are based on a theme. Descriptions of each educational science program can be found at themobilesteamlab.org.

Science Programs	Tuition
_____ Week 1 (Dec 20 – Dec 24) Bioeyes (7-9 yrs) Session AM	\$ 199.99 KS only
_____ Week 1 (Dec 20 – Dec 24) Bioeyes (10-12 yrs) Session PM	\$ 199.99 KS only
_____ Week 2 (Dec 26 – Dec 30) Bioeyes (7-9 yrs) Session AM	\$ 199.99 KS only
_____ Week 2 (Dec 26 – Dec 30) Bioeyes (10-12 yrs) Session PM	\$ 199.99 KS only
_____ Week 3 (Jan 01 – Jan 04) Bioeyes (7-9 yrs) Session AM	\$ 189.99 KS only
_____ Week 3 (Aug 05 – Aug 09) Bioeyes (10-12 yrs) Session PM	\$ 189.99 KS only
_____ Week 4 (Feb 15) Artrageous (7-9 yrs)	\$ 375.00
_____ Week 5 (Feb 16) Artrageous (10-12 yrs)	\$ 375.00
_____ Week 6 (Feb 17 – Feb 21) Bioeyes (7-9 yrs)	\$ 1075.00
_____ Week 7 (Feb 22) A Simple Task (7-9)	\$ 425.00
_____ Week 8 (Feb 23) A Simple Task (10-12)	\$425.00

Note: Programs will be cancelled if the minimum # of students has not been met.

Science Programs	-	Tuition
_____ Week 9 (Apr 12) Artrageous (7-9 yrs)		\$ 375.00
_____ Week 10 (Apr 13) Artrageous (10-12 yrs)		\$ 375.00
_____ Week 11 (Apr 14 – Apr 18) Bioeyes (7-9 yrs)		\$ 1075.00
_____ Week 12 (Apr 19) A Simple Task (7-9 yrs)		\$ 425.00
_____ Week 13 (Apr 20) A Simple Task (10-12 yrs)		\$ 425.00

Note: Summer Science Programs will be listed soon! Check back at end of January 2025 for class list!

Registration

- Registration is on a first-come-first-served basis.
- Applications are accepted in the order in which they are received.
- All registration applications must be completely filled-in and submitted with the required \$300 non-refundable deposit(s) / full payment to confirm your child’s enrollment.
- All deposits will be applied towards tuition.
- Proof of Payment with Completed Registration Application can be e-mailed to: themobilesteamlab@gmail.com with **Subject Line: Registration Application**

Program Fees and Payment Procedures

- A non-refundable \$300 deposit / full payment is due at time of registration for each program your child is enrolled in. Deposit(s) will be applied towards tuition.
- Full tuition for each program is due no later than **April 15, 2024.**

Cancellations and Refunds

- Cancellations must be made by **telephone** to Patricia Perri (Miss Triscia) on **WhatsApp** 772.521.0351.
- Cancellations requested by **January 1, 2024**, for **February programs**, will be refunded full tuition payments made **minus** a \$100 per program cancellation fee and **minus** the \$20 registration fee.
- Cancellations requested by **March 1, 2024**, for **April programs**, will be refunded full tuition payments made **minus** a \$100 per program cancellation fee and **minus** the \$20 registration fee.
- Cancellations made after **January 1 or after March 1, 2024 (February & April Programs Only)**, will **NOT** be refunded any money.
- Requests for the exchange of tuition from one weeklong program to another may be granted based on availability and at the discretion of Patricia Perri (Miss Triscia)/The Mobile **STeAM** Lab staff.
- Days missed will not result in a refund or credit applied for another week.
- In the event a program is canceled by The Mobile **STeAM** Lab for insufficient enrollment, a full refund will be issued **minus** \$20 registration fee.

Waitlists

As a courtesy, we will maintain 'waitlists' for weeklong programs that are fully registered only. In the event of cancellations, wait-listed children will be offered the opportunity to register on a first-come-first-served basis. The tuition and registration fee must be paid in full within 48 hours of accepting the offer to register.

Health Information

Does your child have any special needs: Yes ___ No ___ If yes, please list anything we should be aware of: (physical limitations, special medications, etc.)

Does your child have any allergies: Yes ___ No ___ If yes, please explain below:

First Aid

- The _____ Venue _____ and Patricia Perri (Miss Triscia)/The Mobile STEaM Lab require that all medications be administered at home **before** the start of the program’s day on a daily basis. Staff are not trained or qualified to administer medication or make medical decisions.
- Do not send inhalants for asthma or an EpiPen for allergies with your child without proper documentation or without informing staff.
- Patricia Perri (Ms. Triscia) is trained in CPR and First Aid. She will treat minor injuries with soap, water, and ice and contact emergency medical personnel in the event of a significant injury. A parent/legal custodian/guardian will be notified in the event of an emergency.

Food and Snacks

- All lunches, snacks, and drinks must be provided by the parent/legal custodian/guardian. Label lunch boxes/bags with the child’s full name.
- Children should arrive with adequate amounts of water (preferably chilled). Even if you send another drink with your child, also provide a water bottle filled with water.
- Food will be not stored in refrigerators and so we recommend sending food that will not spoil and/or is packed in an insulated container with cold packs.
- Do not include food that requires heating.
- Notify staff in advance if your child has a food allergy and the severity of the allergy.
- Sharing of food is not allowed.

Note: Do not pack any food that contains nuts or food products containing nuts of any kind. Food items that do not contain nuts but that are “made in the same facility” as nuts are acceptable.

On occasion, The Mobile STEaM Lab will provide a “special snack.”

Clothing and Footwear

At times, children will be engaged in outdoor activities. We ask that they be dressed in appropriate clothing and footwear.

- Sneakers or comfortable closed-toe shoes should be worn. No flip-flops or open-toed sandals.
- Children should dress in clothing that you don't mind if they get soiled from being active outdoors or working with paint.

Cell Phones

- Cell phones are not permitted during class.
- If a cell phone is sent with a child, the phone must remain put away with the child's personal items and the phone may not be used during program hours.
- Staff are not responsible for lost or damaged cell phones.

Note: Cell phones are encouraged during "Bioeyes" as an additional microscope source.

Sunscreen and Bug Spray

The Summer Science School is predominantly indoors. However, at times, children will be engaged in outdoor activities. Sunscreen and insect repellent are recommended. Please apply sunscreen or sprays to your child daily prior to arrival or provide them for staff to apply. Label all products with your child's full name.

Ticks

Ticks are found across Long Island. It is advised that a tick repellent be applied to campers prior to arrival and for parents to check their child(ren) for ticks every single evening.

Behavior Agreement

The _____Venue_____ and Patricia Perri (Miss Triscia)/ The Mobile STEaM Lab strive to create a safe and caring community where individual differences are valued and where everyone can have fun. Because creating this environment requires the commitment of all participants, we ask everyone to agree to these behavior expectations. Children and parents/legal custodians/guardians should review and discuss these guidelines together. We have an expectation that all children respect each other, staff, and others who are part of the learning experience. It is important that all children recognize the need to be kind, respectful, and thoughtful. Such interactions create a fun and enriching experience for everyone.

I Will Show Respect for Others

- I will respect other people's ideas, even if they are different from my own.
- All my actions and language will exhibit kindness and respect.
- I understand that any behavior that could harm or be hurtful to another person, or which is disrespectful, is unacceptable.

I Will Show Respect for Myself

- I will try new things, participate fully in activities, and bring a positive attitude to class every day.
- I will be open to making new friends and I will help to include others in activities and conversations.

I Will Show Respect for The Environment and Facilities

- I will not bring my cell phone or other electronics to class. If I do, I agree to put them away during class. They detract from the learning experience.
- I will pick up litter, stay on trails, and not damage or remove anything from the environment.
- I will take care of the venue's facilities, program supplies, and equipment.

I Will Show Respect for Everyone's Health and Safety

- I understand that fireworks, pocketknives, matches, etc. are not allowed. I will not bring these to class.
- I will abide by all safety standards explained by the staff.

I Will Receive Respect from Staff, Volunteers and Other Children

- I understand that staff and volunteers will be respectful of my thoughts, ideas, and feelings and that they will ensure that my fellow classmates treat me with kindness.

If a child has difficulty following the behavior expectations, staff:

- will remind the child of expected behavior and review the Behavior Agreement will discuss with the child ways to improve their behavior.
- may have the child sit out activities for repeated behavior problems and discuss such instances with a parent/legal custodian/guardian.
- may suspend or expel a child who engages in violent, destructive, or unsafe behavior.

****No refunds are given for students dismissed for behavioral reasons****