



Dear Returning N.I.T.,

Thank you for signing up for classes for 2011! Please print and fill out the **last three pages** (this includes the Medical Release and Photo Release form) of this document and return them to the address listed below. Please make sure to put “Attn: N.I.T. Program” on the envelope.

Forms received before June 1, 2011 will be given the highest priority, but all forms will be considered throughout the summer as space is available. Send this in any time! There are 15 N.I.T. positions open each week. You may request to participate in as many classes as you would like, limited to two per week.

Please remember that this is a selective training program. If we feel you are not performing up to expectations we reserve the right to dismiss you from a class without reimbursement.

If you have any questions please contact Andrew Mckenna-Foster at [amckennafoster@mmo.org](mailto:amckennafoster@mmo.org).

Sincerely,

Andrew Mckenna-Foster  
Director of Natural Science Education and Programs

Cheryl Beaton  
Program Manager

Mail Application to:

Attn: N.I.T. Program  
Maria Mitchell Association  
4 Vestal Street  
Nantucket, MA 02554

## CLASS DESCRIPTIONS

The N.I.T. Program consists of week long N.I.T. classes. Any class can be taken at any time as long as space is available. Each class balances volunteering at MMA facilities and completing activities to strengthen naturalist abilities. Specific activities for each class will differ over the summer and will be tailored for each N.I.T. Each class includes 3 built in volunteer hours.

### **Orientation Class**

Suggested as first class. N.I.T. will attend all regularly scheduled field trips and programs during the week: Open Night at Loins Observatory, Vestal Street Observatory Tour, Mitchell House Tour, Natural Science Museum Tour, Bird Field Trip, Marine Ecology Field Trip, Beach Discovery Field Trip, Tour of MMA Science Library, and Tour of MMA Administrative Offices, Aquarium Tour.

### **Astronomy Class**

Astronomy Basics – Assist astronomy interns during observatory tours, build a celestial navigation instrument, and make observations with a telescope.

### **Education Classes**

Environmental Education for Children- Assist MMA Education Interns teaching Discovery Classes for children 4-9 yrs.

Activity Design and Implementation- Work with an MMA Education Intern to design and test a new activity that connects children with nature.

### **Aquarium Classes**

Care of Aquariums and Aquarium Grounds – Learn about filters, lighting and designing and cleaning aquariums

Marine Biodiversity - Create a Personal Field Guide – Learn the fish and invertebrates of Nantucket Waters

Feed Aquarium Fish/Feeding Frenzy – Feed fish and help run the daily Feeding Frenzy

Care of Special Collections (Jellies, Crustaceans, Tropicals) – Learn about and take care of the special fish on display at the aquarium.

Marine Ecology & Beach Discovery Field Trips – Assist in these field trips and learn identification and field methods, including data collection and data entry.

Aquarium Tour Guide/Docent – Guide visitors through Aquarium giving interesting facts about animals and plants.

### **Museum Classes**

Animal Care- Care for frogs, fish, turtles, snakes, insects and spiders in the Natural Science Museum. Help with carnivorous critter events and build terrariums for new animals.

Animal Tour- Learn interesting facts about Museum animals and take visitors on a tour of the animal room. Learn all the vertebrate animals on island.

Research- Help Museum interns with field work on several research projects and help staff within our lab and collections facility.

## SELECT DESIRED TIME SLOTS

Please note your preference. If you do not remember what you took last year we can email you a copy of your transcript. Generally, morning classes run 9:30-12:30 and afternoon classes run 1-4. We will try to accommodate your schedule as much as possible but some classes may not be available for the weeks you choose.

### Dates Offered:

Week 1	June 20 <sup>th</sup> -24 <sup>th</sup>	Week 6	July 25 <sup>th</sup> - 29 <sup>th</sup>
Week 2	June 27 <sup>th</sup> - July 1 <sup>st</sup>	Week 7	August 1 <sup>st</sup> -5 <sup>th</sup>
Week 3	July 4 <sup>th</sup> - 8 <sup>th</sup>	Week 8	August 8 <sup>th</sup> -12 <sup>th</sup>
Week 4	July 11 <sup>th</sup> -15 <sup>th</sup>	Week 9	August 15 <sup>th</sup> -19 <sup>th</sup>
Week 5	July 18 <sup>th</sup> -22 <sup>nd</sup>	Week 10	August 22 <sup>nd</sup> -26 <sup>th</sup>

Please mark an "X" for the week and time you would like to attend as well as a location (Aquarium, Natural Science, Education, or Orientation). We will call you to confirm your choices and select specific classes that fit with your time selections. **Please do not write in specific classes- the availability of these depends on the weeks selected.**

Note: To receive a Junior Naturalist Certificate, each N.I.T. needs to complete the orientation and at least one class from each location: Aquarium, Natural Science, and Education. Two classes can be taken in one week.

	Morning (X)	Location	Afternoon (X)	Location
WEEK 1 June 20 <sup>th</sup> -24 <sup>th</sup>	_____	_____	_____	_____
WEEK 2 June 27 <sup>th</sup> - July 1 <sup>st</sup>	_____	_____	_____	_____
WEEK 3 July 4 <sup>th</sup> - 8 <sup>th</sup>	_____	_____	_____	_____
WEEK 4 July 11 <sup>th</sup> -15 <sup>th</sup>	_____	_____	_____	_____
WEEK 5 July 18 <sup>th</sup> -22 <sup>nd</sup>	_____	_____	_____	_____
WEEK 6 July 25 <sup>th</sup> - 29 <sup>th</sup>	_____	_____	_____	_____
WEEK 7 August 1 <sup>st</sup> -5 <sup>th</sup>	_____	_____	_____	_____
WEEK 8 August 8 <sup>th</sup> -12 <sup>th</sup>	_____	_____	_____	_____
WEEK 9 August 15 <sup>th</sup> -19 <sup>th</sup>	_____	_____	_____	_____
WEEK 10 August 22 <sup>nd</sup> -26 <sup>th</sup>	_____	_____	_____	_____

**TOTAL NUMBER OF CLASSES:** \_\_\_\_\_ **TOTAL COST:** \_\_\_\_\_

*Cost is \$120 per class. Please send payment by check (made out to MMA) with application. If for any reason a week requested can not be scheduled, a reimbursement check will be mailed. Thank you. (The cost of classes was increased this year to partially support the cost of the program).*

Has your contact information changed in the last year?

New phone: \_\_\_\_\_

New email: \_\_\_\_\_



# Medical Release Form

## Information

Child's Name: \_\_\_\_\_

Age: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Nickname: \_\_\_\_\_

Parent/Guardian Names: \_\_\_\_\_

Island Address: \_\_\_\_\_

Island phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

## Medical Concerns

Please list any medical issues including allergies, emotional and/or behavioral issues your child may have in order to allow our staff to provide the best possible experience for your child.

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## Medication

Please list all medications and dosage your child is currently administered. Please indicate below if your child may need to take any medication (including Epi-Pens and inhalers) while participating in the N.I.T. program. If this is the case we will ask you to fill out an *Authorization to Administer Medication* form on or before your child's first day.

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

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

## Permission to Participate and Medical Release

Being a parent or legal guardian of the above-named minor, I do hereby appoint the Maria Mitchell Association and the Emergency Contact listed above to act in my behalf in authorizing emergency medical, dental or surgical care and hospitalization for the above-named minor in the vent that I cannot be reached. This document will be presented to a physician, dentist or appropriate hospital representative at such time as emergency medical, dental or surgical care or hospitalization may be required.

The undersigned hereby agrees to indemnify and hold harmless the Maria Mitchell Association, its agents and employees, from any and all liability, loss, damage, expense, causes of action, suits, claims or judgments for injury to the above mentioned child or other persons or the property resulting from or arising out of the participation of the above mentioned child as a Naturalist In Training or a volunteer, and shall at his/her own cost and expenses defend any and all actions or suits which may be brought against the Maria Mitchell Association, either alone or in conjunction with others, upon any such liability, claim, or claims and shall satisfy, pay and discharge any and all judgments, and fines that may be recovered against the Maria Mitchell Association in any such action or suit, provided, however that the Maria Mitchell Association shall give to the undersigned written noticed of any such claim or demand.

Printed Name of Parent/Guardian: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Photo Release Form

\_\_\_\_\_ By initialing here, I agree that photos and video of my child may be used in Maria Mitchell Association (MMA) publications and on the MMA website.