

Mommy and Me Program
Circle Date You will be Attending

Date: Wednesday, April 7, 2010

Theme: Dolphins

Time: 10:00 am- 12:00 pm

Child's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Age: _____ Parent's Name: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ E-Mail: _____

Payment Information

Select Payment: \$12 (parent/child combo- class only)

\$30 (parent/child combo- class and park admission)

\$6 (additional parent or child- class only)

\$15 (additional parent or child- class and admission)

___ Cash (paid the day of class)

___ Credit Card: VISA MC AMEX DISC

Card Number: _____ EXP: _____

Signature: _____

Fax to: 305-365-0075 **OR** Mail to: Education Department, Miami Seaquarium
OR Call: 305-361-5705 ext. 207 4400 Rickenbacker Causeway, Miami, FL 33149