



MYSTIC  
AQUARIUM  
INSTITUTE FOR  
EXPLORATION

## Group Leader Contract

To be filled out by the program's Group Leader and returned to the Aquarium prior to the event.

Has your group been on overnights at other educational/cultural institutions? Where?

In the space provided, please let us know of any special requirements (dietary, physical, etc.) that your group may have. We will make every attempt to accommodate these needs.

### Please read the following statements and initial each one.

\_\_\_\_\_ I understand that I have signed up for the Mystic Aquarium Overnight program, and that the program begins at 7:00 pm and ends at 8:30 am the following morning.

\_\_\_\_\_ I understand that free admission to the aquarium is non-transferable and is only available on the day following the overnight.

\_\_\_\_\_ As a group leader, I understand that no one in my group, be it chaperones or kids, shall go outside to the exhibits or through any unopened doors unless accompanied by Aquarium staff.

\_\_\_\_\_ As a group leader, I am certain that all chaperones understand that they are responsible for the participants in their group, and take responsibility to account for these participants throughout the overnight program.

\_\_\_\_\_ As a group leader, I understand it is my duty to communicate clearly about the program to all students and chaperones. I will distribute all necessary information to my group.

\_\_\_\_\_ As a group leader, I understand it is my duty to collect program fees and submit them to the scout council by the designated deadlines.

\_\_\_\_\_ I understand that overnight activities are subject to change due to group needs, animal needs, or aquarium program and policy needs.

\_\_\_\_\_ I understand that if the aquarium cancels the overnight due to weather or other circumstances, a full refund will be issued. However, no refunds will be given for groups that cancel inside of 30 days prior to the program, or for individual or group 'no-shows.'

I accept the terms of the Mystic Aquarium Overnight Program. I have thoroughly reviewed all materials in this packet and have distributed the 'overnight expectations,' 'what to bring list' and related materials to the group chaperones.

Date of Program: \_\_\_\_\_

Program Leader's Signature: \_\_\_\_\_ Date: \_\_\_\_\_