

Dear Parents and Guardians,

Executive Committee of Onna x
OIST Children's School of Science

Information Regarding The 16th Onna Village x OIST Children's School of Science
Open Class

Thank you very much for applying for The 16th Onna x OIST Children's School of Science Open Class.

Please review the following information prior to attending the program.

1. Program Details

Schedule: August 18 (Tues) to August 20 (Thurs), 9:30 AM to 11:00 AM

Venue: Day 1, OIST Auditorium

Days 2–3, Onna Village Fureai Taiken Gakushu Center

2. Regarding Check-In on the First Day

Date/Time: August 18 (Tues), from 9:00 AM

Items to be Distributed: Program T-shirt for participants

Documents to be Submitted: Health Waiver Form

Participation Fee: 2,000 yen (Please pay on check-in)

3. Items to Bring Each Day

Writing utensils, water bottle

*Please note that beverages will not be provided to participants by the organizers.

4. Closing Ceremony

Date/Time: August 20 (Thurs), 11:00AM to 11:15 AM

Venue: Onna Village Fureai Taiken Gakushu Center, Open Class Classroom

*Parents and guardians are warmly invited to attend the closing ceremony.

5. Parent and Guardian Volunteers

Parents and guardians who have volunteered are kindly asked to arrive at the venue at least 30 minutes before the start of the class. Volunteers will be asked to assist with the preparation of teaching materials and supplies, help with experiments and other classroom activities during the session, and assist with cleanup for approximately 30 minutes after the class ends. Further details will be provided during the class on the day of the event.

6. Notes

Please note that during the program, the staff members will be filming and taking photos of all the participants for publicity purposes. Photos will be used for OIST website and social media. If you do not wish to be filmed, please inform us **upon check-in on the first day.**

7. Emergency Contact on Program Days

If an emergency or unforeseen situation arises during the program, please contact the following number:

Executive Committee of Onna x OIST Children's School of Science
Cell: 090-9784-3513

8. Attachments

- 1) Typhoon Policies
- 2) Health Waiver Form (Please hand in at check-in)

If, for any reason, you need to cancel your participation, please contact us **by August 10 (Monday)** using the contact information below.

Thank you for your cooperation.

Kind regards,

OIST Outreach Section

(Executive Committee of Onna x OIST Children's School of Science)

Tel: 098-966-218

E-mail: community-relations@oist.jp

The 16th Onna x OIST Children's School of Science (OOCSS) Typhoon Policies

If a typhoon approaches Okinawa, please follow the actions described below.

1. If a storm warning is issued: **All classes will be cancelled on that day.**
2. If there is a possibility that a storm warning will be issued:
 - 1) During morning time: **All classes will be cancelled on that day.**
 - 2) If the warning is expected to be issued after 12:00 p.m.: Classes will be conducted as usual.
3. If Japanese Meteorological Agency cancels the warning:
 - 1) Before 8:00 am: Classes will proceed (considering bus schedules).
 - 2) After 8:00 am: **Classes will be cancelled.**

*If a typhoon approaches, we will post information on the OOCSS website about class schedules.

*Unfortunately, we cannot set up a substitute date for canceled classes and the participation fee will not be refunded.

Thank you for your understanding.

Onna x OIST Children's School of Science (OOCSS) Executive Committee Contact: Okinawa Institute of Science and Technology Outreach Section TEL: 098-966-2184 E-mail: community-relations@oist.jp
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Health Waiver Form

In case of an emergency during the OOCSS, we may need the student's health information.

Please print answers to all questions below. This personal information about the student will only be used for emergency purposes.

Student's Name	Class Name	Age	Blood Type								
Does your child have a health problem? • YES • NO If yes, please specify the name of disease, medication, and anything else you think is important for us to know about the student.											
Does your child have allergy? • YES • NO If yes, please specify. Food Allergy () Drug Allergy () Animal Allergy () Others ()											
Emergency Contact <i>*During the program hours (9:30–11:00), please ensure that you are available to take phone calls. We may contact you in the event of an emergency.</i> <table border="1"> <tr> <td>Name</td> <td>Relationship to child</td> <td>Phone Number</td> <td>Mobile Phone</td> </tr> <tr> <td colspan="4">Address</td> </tr> </table> Special Note				Name	Relationship to child	Phone Number	Mobile Phone	Address			
Name	Relationship to child	Phone Number	Mobile Phone								
Address											

I give permission to use the information above for emergency care.

Signature :

Date / / /