

Registration Form: Jump Into Science Saturdays

Please print clearly and fill in all information. Preregistration is required.

For online registration, visit our Web site: www.uwgbsummercamps.com

Personal Information

Name: Last _____ First _____ Middle Initial _____
Home Address _____
City _____ State _____ Zip _____
Telephone (_____) _____ E-Mail _____
 Male Female Birth Date ____/____/____
Parent's Name _____ Work Telephone (_____) _____
School Attending fall '09 _____ Grade Level fall '09 _____ H.S. Graduation Year _____
Ethnicity: White Other Spanish/Hispanic/Latino/a Filipino Cambodian
(optional) Multi-Racial Black or African-American Japanese Hmong
 Cuban American Indian Korean Laotian
 Mexican American, Chicano/a Chinese Samoan Vietnamese
 Puerto Rican Guamanian or Chamorro Other Asian or Pacific Islander Other Southeast Asian
 Other Race _____
How did you learn about UW-Green Bay summer camps? _____

Class Preference

Select the classes of choice. Each class is \$30, or \$25 each for all four classes.

Rockets - October 3rd, 2009
 Kitchen Chemistry - October 24th, 2009
 Flight Challenge - November 14th, 2009
 Electricity - December 5th, 2009

Photo Permission

I understand that the University may take photographs/video footage of class participants and activities. I agree that the University of Wisconsin-Green Bay shall be the owner of and may use such photographs relating to the promotion of future programs. I relinquish all rights to the use of photographs.

Signature of parent or guardian _____

Liability



Must be signed for registration to be accepted

The undersigned does hereby agree to hold harmless and indemnify the State of Wisconsin, the Board of Regents of the University of Wisconsin System, and the University of Wisconsin-Green Bay, their officers, agents, and employees, from any and all liability, loss, damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of the undersigned in the UW-Green Bay Summer Camps program.

Signature of parent or guardian _____ Date ____/____/____

Payment

Fees: \$30 each class, all four classes for \$100

Check (payable to UW-Green Bay)
 Credit card: MasterCard VISA Acct # _____
 Exp. date _____
 Name on card (print) _____
Signature _____

Credit card registrations may be FAXED to: (920) 465-2552.
Make checks payable to UW-Green Bay. Mail check with completed registration form to:
Jump into Science Registration, Office of Outreach and Extension
UW-Green Bay, 2420 Nicolet Dr., Green Bay, WI 54311-7001

Register online at www.uwgbsummercamps.com