

In Association with

other children:

ADVANCED STEM CAMP 2018 STEM OPPORTUNITIES FOR ALL



REGISTRATION FORM—Only 1 Student per Form

Completed Registration Form includes: 1. \$25.00 2. Registration form 3. Permission form. 4. Photo Release form. 5. Transportation Request form. (if transportation is requested)

Please return all completed forms AND PAYMENT to Chris Jones, Oklahoma Baptist University, 500 W University, Shawnee, OK 74804.

You may email forms to Christopher.Jones@okbu.edu. However, registration forms are not complete unless returned with payment.

Only completed registration forms WITH PAYMENT will be processed in the order that they are received

To ensure your placement in order, please return directly to Oklahoma Baptist University at the address above. Do NOT return to your child's school.

| Date of Session: June 4-8 | (9:00 am—3:0 | 00 pm daily) | | | | | |
|---|-------------------------|---|-------------------------|-------------------|-----------|----------|---|
| Age Group: For Students completing | | • | 18 | | | | |
| My child will need transportation: (If yes, please complete Transportation Requ | Yes est Form and ret | No turn with Registration | | | | | |
| Student Information: Student Name: | | | | Gender | : N | Л | F |
| Home Address: | | | | | | | |
| City: | | | | | | | |
| School: | | | | Grade: | | | |
| Ethnicity African American Native American <i>Trib</i> | | | | Hispanic Other | (Just Co. | mpleted) |) |
| Parent/Guardian Information: | | | | | | | |
| Parent/Guardian Name: | | | | | | | |
| Address: Same as above, or: | | | | | | | |
| City: | | | | | | | |
| Phone: | | | work | | | | |
| Email: | | | | | | | |
| Emergency Contact information in co | ise the parent/ | guardian cannot i | be reached: | | | | |
| 1. Name | | 2. Name | | | | | _ |
| Phone | | | | | | | |
| Relationship to Student | | Relations | Relationship to Student | | | | |
| Payment Information: \$25.00 per st no cost. Cash or Check. Please make | - | | * | | | | |