



Engineering & Technology School

REGISTRATION FORM

STEM SUMMER CAMP 2019

Student's Name (First, Last) : _____

Grade (2019-20) : _____

Parent's Name : _____

Home Address : _____

Parent's Email : _____

Phone Number : _____

Photo Release Permission (Circle one) :

Yes / No, I do / don't grant permission to K-Rockets, LLC to use my child's image for advertisement purposes (such as brochures, or internet marketing)

T-shirt size:

_____ Youth Small _____ Youth Medium _____ Youth Large

Alternate Pick-up : _____

Medical concerns : _____

I have read, and agree to the terms and conditions of K-Rockets, LLC.

Parent's Signature

Date

Registering For (Check One):

☐ **Half day Camp - AM / PM (Circle one)**

\$160 per week (Before May 31)

\$170 per week (After May 31)

☐ **Single Day Camp - M / Tu / W / Th / F (Circle) , Number of Days = _____**

\$65 per day

Extended Care Hours

Before Care - 7:00 - 8:00 AM - \$10 per day

After Care - 4:00 - 6:00 PM - \$20 per day

___ STEM Camp - Wk 1 (Jun 17-21)	___ Before care	___ After care
___ STEM Camp - Wk 2 (Jun 24-28)	___ Before care	___ After care
___ STEM Camp - Wk 3 (Jul 1-5)	___ Before care	___ After care
___ STEM Camp - Wk 4 (Jul 8-12)	___ Before care	___ After care
___ STEM Camp - Wk 5 (Jul 15-19)	___ Before care	___ After care
___ STEM Camp - Wk 6 (Jul 22-26)	___ Before care	___ After care
___ STEM Camp - Wk 7 (Jul 29-Aug 2)	___ Before care	___ After care
___ STEM Camp - Wk 8 (Aug 5-9)	___ Before care	___ After care
___ STEM Camp - Wk 9 (Aug 12-16)	___ Before care	___ After care
___ STEM Camp - Wk 10 (Aug 19-23)	___ Before care	___ After care

Payment Due \$ _____ (To be filled by K-Rockets staff)

Payment Method: ___ Check* ___ Cash

*Checks payable to: K-Rockets LLC

Parent's Signature

Date