

SUMMER CAMP 2007 Registration Form

How to Register

Step 1: Complete the following registration form.

Step 2: Fax or mail it to the Address mentioned below.

Step 3: You will receive confirmation of your registration.

If you have any questions or concerns, please call Olivia Ibrahim at (973) 353-1014

Camper's Information

First Name: _____ Last Name: _____ Date of Birth(yyyy-mm-dd): _____

Home Phone: _____ Email: _____

Address:

Street: _____ Apt#: _____ City: _____

State: _____ Zip: _____

School Attending:

School Name: _____ School District (City): _____

Grade Completed: _____

Parent's Contact Information

Mother/Father/Guardian's Full Name: _____

Mother/Father/Guardian's Phone: _____

Emergency Contact

Emergency Contact's Full Name: _____ Relationship to Camper: _____

Emergency Contact's Phone: _____

Informed Consent Agreement

By submitting the form, I/we agree that THE GOVERNING COUNCIL OF RUTGERS UNIVERSITY or THE CIMIC SCIENCE AND TECHNOLOGY OUTREACH, their directors, officers, employees, agents, and volunteers, shall not be liable for any injury to my child or loss or damage to my child's personal property arising from, or in any way resulting from, his/her participation in those activities, UNLESS such injury, loss or damage is caused by the SOLE NEGLIGENCE of the University, Cmic Science and Technology Outreach, their directors, officers, employees, agents, and volunteers, while acting within the scope of their duties.

By submitting the form, I/we declare having read and understood the above INFORMED CONSENT AGREEMENT in its entirety and hereby consent to participate acknowledging all the foregoing.

Applicant's Signature: _____

Date: _____

**For more information on the camp, please contact [Olivia Ibrahim at \(973\) 353-1014](tel:9733531014) or at olivia@cimic.rutgers.edu.
Fax: (973) 353-5808**