

Registration Form

Arts & Technology
\$35 per week

Construction Camp
(no cost – transportation not provided)

Student Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

E-mail: _____

Parent Name: _____

Sending School: _____

Grade Level in 2011/2012: _____

Transportation requested (Arts and Technology Camp only): yes no

Medical Information

Emergency Contact Name: _____

Emergency Contact Number: _____

Are there any medical issues we should be made aware of?

I hereby give permission for my son/daughter to participate in all activities associated with Summer Tech Camp/ Construction Camp. I agree NOT to hold STAFFORD TECHNICAL CENTER or its agents liable and harmless for all expenses or conditions, temporary or otherwise, which may result from an accident or treatment for an accident. In the event that my son/daughter is injured and requires medical attention and the school or its agents are unable to reach me(us) or the persons listed above, I(we) hereby authorize the School or its agents to take my(our) daughter/ son to a physician, physician's assistant, medical center or hospital for treatment.

Signature: _____ Date: _____

Please mail this completed form along with check payable to Stafford Technical Center no later than June 1, 2011.

Attention: Summer Camps
Stafford Technical Center
8 Stratton Road
Rutland, Vermont 05701

STC reserves the right to cancel or modify camp offerings. Participants are responsible for transportation to and from the camp each day. Camps open to Rutland County students on a first-come, first-serve basis.