

## S.T.E.M. Engineering and Design Camp August 18-20, 2017

Inspired teaching and learning in the fields of science, technology, engineering, and mathematics

Summer 2017 S.T.E.M. Engineering and Design Camp Registration

## **Personal Information**

Last	First			
Date of Birth				
Email Address (Please choose an a	address you check	often)	Phone Number	
Permanent Mailing Address	City	State	Zip Code	
School/Organization with Whom	You Currently Wo	rk		_
Position at School/Organization (i	e. teacher, grade le	evel, subject)		
Number of students with which yo	ou work?			
Will you be attending with a vertice	cal team from your	district?	_YesNo	
If so, with which district do you w	ork?			_
Shirt Size				

## **Health History**

Do you have any allergies?		
Do you have any special dietary needs?		
Do you have any medical conditions or any other import	ant health information that you would lik	e us to be
aware of in the case of an emergency? (optional)		
Emergency Cont	act Information	
Emergency Contact #1:		
Name:		
Daytime Phone Number:		
Evening Phone Number:		
Emergency Contact #2:		
Name:		
Daytime Phone Number:		
Evening Phone Number:		
Signature	Date	
Remit payment of \$800 by Wednesday, August 9 to:	HATponics PO Box 8113 Chattanooga, TN 37414	

Email registration and any questions to Emily Holmes by Wednesday, August 9: <a href="mailto:emily@hatponics.com">emily@hatponics.com</a>