

## Science Camp Registration Form July 25th-29th

Please return: 1) Completed Registration Form

- 2) Completed Waiver Form
- 3) \$75 Check made out to PWPC (10% discount for additional family members)

*Mail to:* PMB 225, 1128 Royal Palm Beach Blvd., Royal Palm Bch, FL 33411 *Or in Person at Physical Address:* 13689 Okeechobee Blvd, Loxahatchee, FL 33470

| Child's Name:                                  | Birth Date: | Grade Entering: |
|--|-------------|-----------------|
| Child's Name:                                  | Birth Date: | Grade Entering: |
| Child's Name:                                  | Birth Date: | Grade Entering: |
| Parent's Name:                                 |             |                 |
| Contact Number:                                |             |                 |
| Email Address:                                 |             |                 |
| Emergency Contact Name:                        |             |                 |
| Emergency Number:                              |             |                 |
| Email Address:                                 |             |                 |
| Home Address:                                  |             |                 |
| City and Zip:                                  |             |                 |
| Home Phone:                                    |             |                 |
| Who has permission to pick-up your child(ren): |             |                 |
| Medical Concerns:                              |             |                 |
| Other Important Information:                   |             |                 |
|  |             |                 |
| Drama and Musical Skills or Experience:        |             |                 |
|  |             |                 |
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