

Young Authors' Writing Project Summer Camp Registration Form

YAWP

Deadline for Applications is June 9, 2012

Contact Information for Parent or Guardian

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Emergency Contact in case the above cannot be reached

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Please remember there is no transportation provided. You will be responsible for delivering and picking up your child each day.

Student's name _____

(Please indicate if a brother and sister are attending together; tuition rate is \$150/student if this is the case)

Grade level the student is entering _____

Student's t-shirt size _____

Have you been to this camp before? _____

Describe any allergies or health issues your student has that we should be aware of.

Is there anything else that you want us to know about your student?

For the student: Please tell us briefly why you are interested in attending the camp. You might want to tell us what you enjoy about writing, and what previous experience you have had writing?

How would this experience benefit you as a writer?

Please submit a copy of a piece of your writing with this registration form.

You will be sent an email verifying your registration.

CONSENT FOR USE OF INFORMATION AND PERSONA OF A MINOR

I hereby grant to The Ohio State University the right to publish, broadcast, webcast, or disseminate in any other form or medium any or all of the following:

- Stories and/or information about minor for use in news stories, publications, promotional materials, web features and/or any other university purposes.
- Photographs, video, audio, and other images or likenesses of minor for use in news stories, publications, promotional materials, web features and/or any other university purposes.

All photographs, video, audio, images, likenesses, stories, and other materials will remain the property of The Ohio State University.

Name of minor (please print)

Signature of parent or guardian

Date

Address

City/State/Zip

Phone

Email

Attached with this registration form are some questions for your student to answer to help us as we plan the camp. Also we are asking all parents/guardians to complete the permission form included so that we can use photographs of students as part of our website presence.

Please enclose a check for \$200 per participant. If you are interested in applying for a scholarship please contact Gerrie McManamon at gmcmanamon@att.net

Make the checks payable to: *Friends of the CAWP* and mail to:

Columbus Area Writing Project
c/o Gerrie McManamon
125 North Harding
Columbus, OH 43209