# Young Authors’ Writing Project

# Summer Camp Registration Form

**Deadline for Applications is May 31, 2014**

|  |  |
| --- | --- |
| 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?**

**Attached with this registration form is a question 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 Melissa Wilson at wilson.370@osu.edu

## Make the checks payable to: *Writing Ohio* and mail to:

**Melissa Wilson**

**Columbus Area Writing Project**

**60 Ramseyer Hall**

**29 West Woodruff Avenue**

**Columbus, OH 43210-1172**

***You will be sent an email verifying your registration.***

## 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? What are you hoping for from this camp experience?

**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.

Name of minor (please print)

Signature of parent or guardian Date

Address

City/State/Zip

Phone

Email