

AYER SHIRLEY REGIONAL SCHOOL DISTRICT
Summer STEM Week Registration Form, July 16-20, 2018

Register by June 29, 2018. To register, please send this completed **registration form** and a **\$175 check** made out to "ASRSD" with "Robotics – Summer STEM" in the memo to: Christine Miska Attn: Summer STEM Week, 9 Madigan Lane, Ayer, MA 01432

**Early registration
special, register by
May 1st and pay \$150**

STUDENT NAME _____ **2018-2019 Grade** _____

Home Address _____ **Home Phone #** _____

Mother/Guardian #1 _____ **Day Time Phone #** _____

Father/Guardian #2 _____ **Day Time Phone #** _____

Emergency Contact

Name/Relationship _____ **Phone** _____

Please check if applicable:

_____ It is **NOT** necessary for my child to take ANY medication during the program

_____ My child carries an EpiPen for _____ allergy.

_____ My child will need to carry an inhaler.

Health issues we need to be aware of: _____

Medical Waiver: I hereby authorize the personnel in charge of this program to obtain medical care and/or hospitalization should illness or accident occur while my child is engaged in this program. I accept the responsibility for payment of any medical expenses. We release and hold harmless the Towns of Ayer & Shirley, its agents, servants or employees from any liability and/or responsibility for any damages or injuries sustained by our child while under your care, not caused by the lack of due care by the Towns of Ayer & Shirley, its agents, servants or employees duly authorized.

Liability Waiver: As parent/guardian of the above named individual, I hereby absolve all coaches, administrators and participants in this program from all liability and will not hold them responsible for any injury incurred during session. I also understand Summer STEM Coordinators have the authority to suspend or remove any participant from the program for detrimental behavior at their discretion.

Photo/Video Waiver: By registering your child for Summer STEM you are giving permission to Andromeda One and ASRSD to use images and video clips on their websites, in newspaper articles, FIRST award entries, and/or on social media accounts. Participant names will not be used without express permission from parents/guardian.

Parent/Guardian Signature _____ **Date** _____

Email (print clearly) _____

Bring a lunch daily and be prepared for outdoor activities (sunblock, proper attire).

You will receive an email confirmation once your registration is received. Unfortunately, we do not have the ability to offer scholarships or sibling discounts; we attempted to set cost as reasonable as possible.

Email coachayershirlevfirst@gmail.com if you have any questions.