



**WMS Full STEAM Ahead Summer  
Camp Registration**  
(Science, Technology, Engineering, Arts, and Math)

Student's Name: \_\_\_\_\_

Grade entering in the fall: \_\_\_ 6th \_\_\_ 7th \_\_\_ 8th

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Parent's/Guardian's Name/s: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

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**Emergency Contact Information (at least 2)**

#1 Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

#2 Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

Please complete back of form

Medication or any medical conditions we need to know about (Allergies, Diabetes, Seizures, etc.)

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My child will need medication administered during the day at camp

YES       NO

Food Allergies:

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**Permissions (Please circle one answer for each question)**

Do we have your permission to post pictures containing your student on our school website and social media?

YES       NO

Do we have permission for your student to use the internet for supervised STEAM Camp activities?

YES       NO

Do we have your permission for your student to travel by bus to these field trips: 8/14 to the Sage Center in Boardman and 8/15 to the Drone Testing Range in Pendleton.

YES       NO

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Parent/Guardian Signature

This form is valid for the time your student attends the 2019 WMS Full STEAM Ahead Summer Camp.

I understand it is my responsibility to contact Kerri Coffman with any changes [kerri.coffman@athwestsd.org](mailto:kerri.coffman@athwestsd.org) or 541 969 2381.

Completed registrations can be submitted by one of 3 ways:

Mail to 943 Waterman Rd, Athena

Scan and email to [kerri.coffman@athwestsd.org](mailto:kerri.coffman@athwestsd.org)

Return to Athena Elementary office