Kid College Registration

Student's Printed Name _____

Note: Registration must be received no later than two business days prior to first class day. Lego Engineering Camp is \$98.

Complete the three sections below. A parent/guardian signature is required. Submit forms and payment to the Victoria College Career & Technical Education-Continuing Education in the Emerging Technology Complex located at 7403 Lone Tree Road, Victoria, TX 77905. For questions, call (361) 582-2528.

Withdrawal must be completed at least two business days before the course begins. No refunds are issued after course begins.

If special accommodations are needed, please call (361) 582-2528 at least one week prior to beginning of the course.

Dogistration Form

Camp NameCamp Time		Child's Date of Birth		
Child's Last Name	First	MI	Gender: Male or Fem	nale
Mailing Address	City	Sta	ateZip	County
Child's Age	Grade:			
Parent Name(s)		Emergency Contact: (I	f different from Parent)	
Parent Phone Number(s)		Name		
Home		Phone		
Work	Cell			
Email				
Does your child have any known foo	od allergies? If yes, please list:			
Disruptive, harassing, or reckless Possession of illegal drugs, alcoh Defacing, disfiguring, damaging, The threat or commission of phys Theft or attempted theft; or Failure to comply with directions of agree that I, or another parent or g (initials) according to the scheduled camp beginning time (ending time	nol, firearms or weapons on College prope or destroying public or private property on sical violence against any person present of College officials acting in the performance uardian, will be responsible for transportinuled camp beginning and ending times. uardian, will accompany the Student and remaining initials). I also agree that I, or another property of the student and remaining initials.	rty; College property; on College property; ce of their duties. g the Student to and from the emain with the Student if the sarent or guardian, will pick up	assigned classroom (Student arrives more than the Student within 10 mini	initials) or off-site location 10 minutes prior to the utes of the scheduled camp
	oick up the Student:			
Names of individuals unauthorized t	o pick up the Student:			
harmless and forever discharge Vicexpenses, personal injury or death, limited to liability and claims arising any hospitalization or medical insura	r heirs, executors, administrators and assig toria College (the "College") and its officer which may arise in the future, related to, co from the negligence or gross negligence ance to cover the Student for hospital or n and all hospital and/or medical bills. I cons provide any such care.	is, agents and employees, of a connected with, or growing out of the parties hereby released nedical expenses incurred rela	and from any and all liabilit of participation in the Prod d. I understand that the Co ated to participation in the	y and claims, for damages, gram, including, but not illege does not provide Program, and I am solely
Parent or Guardian's Signature		Parent or Guardian's Printed	d Name	

Date ____

3. Photo and/or Video Authorization I, ________, do hereby give Victoria College permission to use my child's photo, video, or likeness for

publicity and advertising purposes.	,,
Parent or Guardian's Signature	Date

Victoria College does not discriminate on the basis of race, color, religion, national origin, gender, pregnancy, age, disability, genetic information, marital status, amnesty, Veteran's status or limited English proficiency. It is our policy to comply, fully, with the nondiscrimination provision of all state and federal rules and regulations.

