SUMMER DAY CAMP FOR NATIVE AMERICAN GIRLS

Sponsored by Southeastern Oklahoma State University, Choctaw Nation of Oklahoma, StarBase OK, OK National guard, Dept. of Defense, OK Aeronautics Commission and OK Space Grant Consortium

Four days of fun STEM educational based activities for the students:

- Rockets
- Engineering design with Eggbert
- Aeronautics
- Flight
- Careers
- and lots more!

Camp Information

Date: July 13th – 16th, 2015
Who: Girls who have completed 4th or 5th grade
Time: 9:00 a.m. – 12:00 p.m.
    Drop off at 8:45 a.m.
    Pick up by 12:15 p.m.
Cost: $50 per child
    Assistance available for Choctaw Nation Tribal Members
Location: Southeastern Ok State Univ
    McCurtain County Campus
    2805 NE Lincoln Rd
    Idabel, OK 74745
General Information: Kendra Gross
    (888) 286-9431 ext. 5206
Registration: SE Continuing Education
    By Phone (800) 435-1327 ext. 2858
    By Fax (580) 745-7486
    By Email continuingeducation@SE.edu

Enrollment is on a first enrolled, first accepted basis. Registration and Permission forms required.

Other Information

Dress must be school appropriate at all times.
Children need to wear sturdy shoes for walking and playing games – no flip flops or sandals.

www.SE.edu/mccurtain/continuing-ed/

Please contact SE’s McCurtain County Campus at (580) 286-9431 to request assistance due to a disability. Accommodations cannot be guaranteed without adequate advance notice.
Southeastern Oklahoma State University
McCurtain County Campus
Continuing Education
SE/STARBase Registration Form

PLEASE USE ONE FORM PER CHILD. Payment info, with fee total, can be on one form.

Date: ____________________  Student ID: ____________________

Student’s Full Name (first, middle, last): __________________________________________

Entering Grade for 2015-2016 School Year: ____________________  Date of Birth: ____________________

Parent or Guardian: ________________________________________________________________

Permanent Mailing Address: _________________________________________________________

City: ____________________  State: ________  Zip: ____________________

Home Phone: ____________________  Cell Phone: ____________________

Work Phone: ____________________  Email: ____________________

List any food allergies: _____________________________________________________________

Course # 0215-1659  Course Title: StarBase Day Camp  Fee: $50.00

Total: $50.00

Payment (circle one): Cash, Check, Money Order, PO, Credit Card

☐ *Cash: $ ________  ☐ Check Number: ________

☐ *Credit Card:  #: ________-______-______-______

Expiration Date: ________/_____  Security Code: ________

☐ Choctaw Nation of Oklahoma
   (Students name and date of birth will be submitted to the Choctaw Nation of Oklahoma to confirm eligibility.
   Choctaw Nation CDIB/Membership required)

*For security reasons: Do Not Send Cash by Mail; Do Not fax credit card info.

Rermit Payment with Registration form to:
Southeastern Oklahoma State University
Office of Continuing Education
1405 N. 4th Street, PMB 4239
Durant, OK 74701-0609
580-745-2858
Fax: 580-745-7486
continuingeducation@SE.edu

Call 1-800-435-1327, ext. 2858
to pay via Visa or Mastercard

Call 1-888-286-9431, ext 5206
For general questions

www.SE.edu/conted

Please contact Continuing Education at (580)745-2858 to request assistance due to a disability. Accommodations cannot be guaranteed without adequate advance notice.
Southeastern Oklahoma State University’s Office of Continuing Education Presents

Student Information/Release
Please print clearly and return all forms to SE Continuing Education: fax: 580-745-7486

Child’s Name: __________________________________________ Name child goes by: _______________

Parent/Guardian Name________________________________________ __________________________

Street Address: __________________________________________ Mail Address: _______________________

City: __________________ State ______ Zip________________________ Home Phone: _____________________

Email: ______________________________________________ Work Phone: ___________________________

Summer Camp Dates – __________________________

Circle Grade finished in 2015:  4   5   Birthday___________________

In case of an emergency contact: ______________________________

Emergency Phone ______________________________

Please note any MEDICAL PROBLEMS (prescription drugs, illnesses, asthma, allergies, etc.) other special issues which chaperone/STARBASE personnel should be aware of:

________________________________________________________________________________________

________________________________________________________________________________________

In case of an emergency, I give authorization for medical treatment and care necessary to correct the injury or illness. This treatment may include transporting of my child to a medical facility. If such a situation should occur, it is my understanding that all reasonable effort will be made to notify me immediately. I agree the cost of such medical care is my responsibility.

RELEASE OF LIABILITY

I understand that my child, unless warranted by medical reasons, will participate in physical, recreational, and outdoor activities as well.
I agree and promise to hold completely harmless and totally indemnify the Oklahoma National Guard and those acting under its permission and upon its authority for any and all losses or damage to property or bodily injury or death.
I grant permission for my child to participate in the SE/STARBASE program and its affiliated activities, including permission for photography and video for promotional and advertising purposes and I waive any monetary or other rights that I or my child may have in connection with such photography.

_________________________________________   _________________________
SIGNATURE OF PARENT OR GUARDIAN       DATE

Southeastern Oklahoma State University Office of Continuing Education, 1405 N. 4th St, PMB 4239, Durant, OK 74701-0609, 580-745-2858.