

ALABAMA SOUTHERN'S KIDS COLLEGE 2015

Please indicate which activities your child wants to attend by checking the box in the lower right hand corner of each day. Cost for attendance is \$10 per day which includes the activities plus a mid-morning snack. **EXCEPTION: Cheer camp will be \$40 which includes a T-shirt.**

| JUNE: A MONTH OF FUN! | | | | |
|---|----------|---|----------|--|
| 1 iPad Reading Games Balloons | 9am-12pm | 2 iPad Math Games Cupcake Decorating | 9am-12pm | 3 iPad Grammar Games Stamp Collecting |
| | | | | 4 iPad Science Games Reading Across America |
| | | | | 5 Social Media First Aid/Ambulance |
| 8 Painting A Canvas Dance Fever | 9am-12pm | 9 Painting A Canvas Matthew The Magician | 9am-12pm | 10 Painting A Canvas Dance Fever |
| | | | | 11 Painting A Canvas Nutrition Education |
| | | | | 12 Forensic Science Gardening |
| 15 Jewelry Making AL Saves Piggy Bank Pageant | 9am-12pm | 16 Jewelry Making The Solar System | 9am-12pm | 17 Coffee Filter Art AL Saves Piggy Bank Pageant |
| | | | | 18 Safety Exploring the Library |
| | | | | 19 Wood Painting Puppet Show |
| 22 iPad Photography Youth In the Outdoors | 9am-12pm | 23 Paper Mache' Project Rush Health Systems | 9am-12pm | 24 Paper Mache' Project Watercolor Splash |
| | | | | 25 Paper Mache' Project Rush Health Systems |
| | | | | 26 Police Academy Firefighter Academy |
| 29 Cheer Camp | 9-11am | 30 Cheer Camp | 9-11am | 1 Cheer Camp |
| | | | | 2 Cheer Camp |
| | | | | Please indicate T-shirt size: |

Student's Name: _____ Date of Birth: _____

Guardian's Name: _____ Relationship: _____

Address: _____

Cell Phone: _____ Home Phone: _____ Work Phone: _____

Permission Waiver: The above indicated student has my permission to participate in the Alabama Southern Community College Kids College activities. I hereby authorize the staff of ASCC to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release the college and its staff from any and all liability for any injuries or illnesses incurred at Kids College. I have no knowledge of any physical impairment that would be affected by the above student's participation in the ASCC Kids College. I will be responsible for any medical or other charges in connection with his/her attendance at Kids College. I have read the descriptions of the courses he/she is participating in and my child is fit to participate in the activity.

Signature: _____ Date: _____

Media Consent Waiver: During Kids College, photos and video may be taken of your child by ASCC or news media for promotional purposes of the event. Please read the media consent statement below and indicate your permission for your child's image and name to be used in this manner.

_____ I give my consent to the use of any photos/video taken of my child, which may or may not include his/her name, by ASCC or the new media during Kids College for the purpose of advertising or publicizing the event in newspapers, newsletters, ASCC website or other advertising media.

_____ I decline media consent for my child. Please do not use any photos of my child for the purposes stated.

Signature: _____ Date: _____

| | | | | | |
|---|---|------|---|----|--|
| Number of days checked above: (June 1-26) | x | \$10 | = | \$ | |
| Cheer Camp (June 29-July 2) | x | \$40 | = | \$ | |
| Total: | | | | | |

Date Paid: _____

Check #: _____

Cash Payment: \$ _____