

**Section 1: Camper Information**

Student Name: \_\_\_\_\_ Parent Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_

Mother's Cell: ( ) \_\_\_\_\_ Father's Cell: ( ) \_\_\_\_\_

Mother's Work: ( ) \_\_\_\_\_ Father's Work: ( ) \_\_\_\_\_

Email (parent): \_\_\_\_\_ School: \_\_\_\_\_

Age: \_\_\_\_\_ Grades: 9 10 11 12 Dietary Restrictions (if any): \_\_\_\_\_

The following persons should be contacted in case of emergencies:

1. Name (Print): \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

2. Name (Print): \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

T-shirt Size: Adult Child S M L XL XXL

Registration will not be accepted without a signed waiver form (see second page).

Mail this form with a non-refundable check of \$185 payable to:

Methodist University  
Forensic Science Program  
5400 Ramsey Street  
Fayetteville, NC 28311  
(ATTN: Professor Dave Pauly)

\_\_\_\_\_  
Signature of Child

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

