

## 2018 STUDENT REGISTRATION FORM

Your daughter is invited to register for the 22<sup>nd</sup> annual *Open Minds, Open Doors* STEM+ conference for 7<sup>th</sup> and 8<sup>th</sup> grade girls, to be held on **Thursday, October 11<sup>th</sup>** at Coe College in Cedar Rapids. The *Open Minds, Open Doors* conference is intended to encourage middle school girls to pursue future career fields with foundations in science, technology, engineering and math (STEM). **Spaces are limited!**

### Student & Parent Information

Student Name \_\_\_\_\_ Grade \_\_\_\_ T-Shirt size (based on adult sizes):    S            M            L            XL

School District \_\_\_\_\_ School \_\_\_\_\_

Student has health conditions or allergies: \_\_YES \_\_NO (If yes, please explain: \_\_\_\_\_)

Please indicate student's racial or ethnic heritage below (check one):

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Non-Hispanic White          | <input type="checkbox"/> East Asian or Asian American   | <input type="checkbox"/> Middle Eastern or Arab American |
| <input type="checkbox"/> Black or African American   | <input type="checkbox"/> South Asian or Indian American | <input type="checkbox"/> Native American                 |
| <input type="checkbox"/> Latino or Hispanic American |   |  |

Parent/Guardian Name \_\_\_\_\_ Email \_\_\_\_\_

Home or Cell \_\_\_\_\_ Emergency Contact Name/Number \_\_\_\_\_

If you are willing to be contacted after the conference regarding your experience, please indicate your preference below:

- via phone     via email     either way     I am not interested in being contacted

### Student Network Access Form (Required)

Please sign below to grant your child network (internet) access during the conference, and to acknowledge that you have read our Acceptable Use Policy found at <http://bit.ly/gwaeaoopenmindsopendoorsconference>

Parent or Guardian's Signature \_\_\_\_\_

Please also have your child sign below, indicating that she understands, with your guidance, the following statements:

- I have read the expected network etiquette and agree to abide by these provisions. I understand that violation of these provisions may constitute suspension or revocation of Internet privileges.
- I agree to be responsible for payment of costs incurred by accessing any Internet services that have a cost involved.

Student Signature \_\_\_\_\_

### Video/Photo Release for Public Information (Optional)

*Note: This section is required for children 18 and under whom Grant Wood AEA wishes to photograph or videotape, either individually or in group settings, for publicity or informational purposes of Grant Wood AEA and its programs. A release from the child's school is not sufficient.*

I, \_\_\_\_\_, parent/guardian of \_\_\_\_\_ give permission for Grant Wood Area Education Agency to photograph or videotape my child(ren), myself and/or my family for use by Grant Wood AEA in its publications, websites or promotional literature. I also agree to allow my child's work to be published by Grant Wood AEA in its publications, websites or promotional literature. I give this consent and will make no further claim of any nature.

I understand that I have the right to revoke this authorization at any time, and that I have the right to request and obtain a copy of the recording or photograph. I acknowledge that I have read the foregoing release and authorization, that I understand its terms, and that I am voluntarily signing this release and authorization.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_ Child's Birth Date \_\_\_\_\_

### Payment

Attach your (non-refundable) **\$14.00 registration fee** to this form and return to your child's school ASAP. Checks should be made payable to *your school*. If you need financial assistance, let your teacher know. Conference scholarships are available. **Amount Enclosed: \$ \_\_\_\_\_ Check #: \_\_\_\_\_**

### Workshop Selection

Workshop list will be posted online on September 1st at: <http://bit.ly/gwaeaoopenmindsopendoorsconference>

Please list five (5) workshops, in preference order, in which you are interested. Please make sure the workshop number matches the workshop title.

You will be placed in at least **one** of the following workshops and, if necessary, one alternate determined by the planning committee.

	Workshop #	Course Title
1st		
2nd		
3rd		
4th		
5th		