



Track Name: \_\_\_\_\_  
 Week: \_\_\_\_\_

**COC Summer Institute  
 Mail In Registration Form – Summer 2017**

**Student Information:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

\_\_\_\_\_ Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: M F

What grade is the student entering in the fall of 2017: 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup> \_\_\_\_\_

What school will the student be attending in the fall of 2017: \_\_\_\_\_

Have you previously attended COC Summer Institute? (Circle one) Yes No

**Parent Information:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent e-mail address: \_\_\_\_\_

If email is provided, Community Education will use this as the primary source of communication. Please check for announcements regularly.

**PLEASE LIST A PHONE NUMBER WHERE THE CAREGIVER LISTED ABOVE WILL RESPOND:**

Primary: \_\_\_\_\_ Secondary: \_\_\_\_\_

What ethnicity or race does the student most identify with?

*This information is not mandatory but may be used to apply for future grants*

<input type="checkbox"/> African American/Black <input type="checkbox"/> Asian <input type="checkbox"/> Filipino <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Indian	<input type="checkbox"/> Middle Eastern <input type="checkbox"/> Multi-Racial <input type="checkbox"/> Native American/Alaskan <input type="checkbox"/> Other Non-White <input type="checkbox"/> Pacific Islander	<input type="checkbox"/> White/Caucasian (NonHispanic) <input type="checkbox"/> Decline to State  Other : _____
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**COURSE INFORMATION**

<b>2017 COC SUMMER INSTITUTE</b>			
<b>Week 1: July 10, 2017 - July 14, 2017</b>	<b>Price</b>	<b>Week 2: July 17, 2017 - July 21, 2017</b>	<b>Price</b>
Photography	\$275.00	Photoshop	\$275.00
Architecture	\$275.00	Architecture	\$275.00
Robotics	\$275.00	Robotics	\$275.00
Video Game Design	\$275.00	Video Game Design	\$275.00
Special Effects & Movie Making	\$275.00	Special Effects & Movie Making	\$275.00
Welding	\$275.00	Sun, Wind & Fire	\$275.00
Sports Medicine	\$275.00	Allied Health	\$275.00

**PAYMENT INFORMATION**

<b>Date(s)</b>	<b>Name of Track</b>	<b>Tuition Fee</b>	<b>Total</b>
Week 1 July 10-14			\$
Week 2 July 17-21			\$

**We require that students wear a COC Summer Institute t-shirt each day of attendance. One t-shirt is included in the price of tuition. T-shirts will be given to students on the first day of camp. Extra t-shirts may be purchased by indicating below.**

Extra T-Shirt @ \$10.00 each	\$
<b>Total Cost of Enrollment</b>	\$

Visa/MC # \_\_\_\_\_ Exp Date \_\_\_\_\_

Card Holder Name \_\_\_\_\_

Or Check # \_\_\_\_\_ (Please make check payable to College of the Canyons)