

The Uni High Summer Enrichment Camp is open to all students who are entering grades 5, 6, or 7 in the fall. We support diversity and welcome students from all backgrounds and ethnicities, including those from populations typically underrepresented at the university/college level.

Camper/Student Information

Last Name _____ First Name _____ Date of Birth ____/____/____
MM DD YYYY

Grade level in Fall 2017 (circle one): 5 6 7 Gender: Male Female Other _____

Ethnicity (check any/all that apply): African American/Black Asian Caucasian/White
 Hispanic/Latino(a) Native American/Pacific Islander Other _____

Address _____ City _____

State _____ Zip Code _____ Home phone # (____) _____

Current (2016-2017) school _____ Location _____

To help Uni better market our summer enrichment camp, please tell us how you heard about it (be specific: Uni Parent, Uni website, etc.): _____

Parent/Guardian Contact Information

We communicate primarily through e-mail* except in the case of an emergency.**

Parent/Guardian 1

Parent/Guardian 2

Name _____
Relationship to camper ___Mother ___Father ___Other _____
Address (if different from camper's) _____ _____
*Email address _____
Cell phone # (____) _____
Work phone # (____) _____

Name _____
Relationship to camper ___Mother ___Father ___Other _____
Address (if different from camper's) _____ _____
*Email address _____
Cell phone # (____) _____
Work phone # (____) _____

Camp Class Preferences

For class descriptions and meeting times, visit the camp website: <https://uni.illinois.edu/camp>.

Week 1, Monday-Friday, June 5-9, 2017 — \$175 for both sessions; \$87.50 for morning or afternoon only

Rank morning session preferences on a scale of 1-7 (1 – First Choice, 7 – Last Choice); afternoon preferences 1-6

Morning Session (7):

- ___ The Odyssey of Captain America
- ___ Detective Training
- ___ Life Lessons through Disney
- ___ Sports and Fitness
- ___ Aerospace Engineering
- ___ Architectural Drawing
- ___ Robotics

Afternoon Session (6):

- ___ Illinois Adventures
- ___ Magical and Medieval Beasts
- ___ Costume Accessories: Masks, Crowns, Shields and Scepters
- ___ Summer Camp Activities and Games
- ___ Fun with Japanese
- ___ Intro to Arabic Language and Culture

Camper's Name _____

Week 2, Monday-Friday, June 12-16, 2017 — \$175 for both sessions; \$87.50 for morning or afternoon only

Rank morning session preferences on a scale of 1-5 (1 – First Choice, 5 – Last Choice); afternoon preferences 1-3

Morning Session (5):

- ___ Robotics
- ___ Painting and Printmaking
- ___ Aerospace Engineering
- ___ Our Amazing Illinois Parks (all day)
- ___ Boys' and Girls' Basketball

Afternoon Session (3):

- (FULL) Photography Challenge (FULL)
- ___ Leadership in Group Work
- ___ Our Amazing Illinois Parks (all day)
- ___ How to Write a Paper while Walking your Dog

Scholarships

Need-based scholarships are available for students who are eligible for free or reduced lunch programs. If this applies to you, please check the appropriate box below. Special circumstances and other questions regarding scholarships may be directed to Dr. Karl Radnitzer, 217-333-5867 or radnitze@illinois.edu. Reduced lunch (fee reduced by half) Free lunch program (full fee waiver)

Official Registration

Camp registrations are considered completed when both registration form and payment are received. Your canceled check **made out to "University of Illinois"** is your official receipt. *Session placement is first come, first served.* Completed registrations are prioritized by date received in Uni High Main Office or by the postmark date on the mailing envelope. Campers may register or cancel registration through the Friday before camp begins: June 2 for Week 1 or June 9 for Week 2. Cancellation refunds take at least six weeks to process. Completed registrations may be mailed to or dropped off at the following address:

**University Laboratory High School
Attn: Dr. Karl Radnitzer/ Uni Camp
1212 West Springfield Avenue
Urbana, IL 61801**

Questions? Contact Uni High Student Services Office (SSO) at 217-333-2873 or unihighsso@illinois.edu.

Parent/Guardian Consent

Your signature below indicates that you voluntarily acknowledge that you are the parent or guardian of the child whose name is listed on this form; you are at least 18 years old at the signing of this form; you approve of your child's participation in this camp; you understand what constitutes a complete registration; and you agree to the following three paragraphs.

****Emergency Procedures:** Your signature below indicates that you understand and agree that in case of a medical emergency, an ambulance or University Laboratory High School staff member will take your child to the nearest hospital or trauma center. You will assume the responsibility of all medical fees. The University Laboratory High School staff has your permission to act on your behalf in the case of a medical emergency. In the event that your child receives medical treatment while he/she is attending the University Laboratory High School Program, you request that medical records regarding treatment be released to the University Laboratory High School Office, 1212 West Springfield Avenue, Urbana, IL 61801. You understand that every effort will be made to apprise you of any emergency situation. Please list your child's medical concerns, allergies, carries Epi Pen, etc. (Attach a separate sheet if necessary.) _____

Field Trips: Your signature below indicates that you understand and give permission for your child to go on walking field trips to locations in close proximity to University Laboratory High School as part of the Summer Program. You give permission for your child who participates in the class "Our Amazing Illinois Parks" to ride a van to the park locations.

Photo Release: Your signature below authorizes the University Laboratory High School and the University of Illinois to include photos and video footage of your child in our publicity materials and on our website.

Parent/Guardian Signature _____ **Date** _____

FOR OFFICE USE ONLY:			5417
Date Rcvd/Pstd _____	Initials _____	Confirmation sent to _____	Notes:
FFW HFW Check # _____	Amount _____	Initials _____ Date _____	