

# APPLICATION

Send application with check payable to  
**University of Hawai'i**  
 Curriculum Research & Development Group  
 Summer Programs  
 1776 University Avenue, UHS #3-115  
 Honolulu, HI 96822

## FOR OFFICE USE ONLY

\$ \_\_\_\_\_ # \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ R \_\_\_\_\_  
 \$ \_\_\_\_\_ # \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ R \_\_\_\_\_  
 \$ \_\_\_\_\_ # \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ R \_\_\_\_\_  
 \$ \_\_\_\_\_ Balance

**Non-refundable deposit of \$100 or full fee is required with each application. Full payment is due by April 24, 2009.**

Student's first name	Middle name	Last name
Permanent mailing address		Home phone
City	State	Zip Code
Student's summer address if different from above		Phone
Present school		Grade in fall, 2009
Present age	Date of birth	Gender <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE

Check box to indicate choice of classes in each program.

MORNING PROGRAMS (8:00 A.M. 11:45 A.M.)	Grade	Price	Total
<input type="checkbox"/> Plants & Animals	3	\$475	_____
<input type="checkbox"/> Sea	4	\$475	_____
<input type="checkbox"/> Sky & Space	5	\$475	_____
<input type="checkbox"/> Drama, June 15–July 17, (5-weeks only)	5–7	\$525	_____
<input type="checkbox"/> Physical & Environmental Science	6–8	\$475	_____
<input type="checkbox"/> Marine Science	6–8	\$475	_____
<input type="checkbox"/> Driver's Education, June 15–26, 8:30 a.m.–12:00 p.m., (Must be 15½ yrs. or older)	10–12	\$425	_____

AFTERNOON PROGRAMS (12:30 P.M. 3:15 P.M.)	Grade	Price	Total
<input type="checkbox"/> Graphics & Design, 12:30–3:15 p.m.	3	\$475	_____
<input type="checkbox"/> Robotics I, 12:30–3:15 p.m.	4	\$475	_____
<input type="checkbox"/> Robotics II, 12:30–3:15 p.m.	5	\$475	_____
<input type="checkbox"/> Japanese, 12:30–3:15 p.m.	4–6	\$475	_____
<input type="checkbox"/> Digital Media, 12:30–3:15 p.m.	6–8	\$475	_____
<input type="checkbox"/> Electronics & Engineering, 12:30–3:15 p.m.	7–8	\$475	_____
<input type="checkbox"/> Engineering Music, 12:30–3:15 p.m.	9–12	\$475	_____

SPECIAL PROGRAMS	Grade	Price	Total
<input type="checkbox"/> Summer Adventure, Session 1, 8:00 a.m.–3:15 p.m.	3–7		_____
<input type="checkbox"/> Option A, June 9–19		\$270	_____
<input type="checkbox"/> Option B, June 15–19		\$180	_____
<input type="checkbox"/> Summer Adventure, Session 2, July 20–24, 8:00 a.m.–3:15 p.m.	3–7	\$180	_____
<input type="checkbox"/> After-School, 3:15–5:30 p.m., <b>Please indicate which weeks</b>	3–7	\$35 per week	_____
<input type="checkbox"/> Summer Adventure 1, Option A			
<input type="checkbox"/> Summer Adventure 1, Option B			
<input type="checkbox"/> Core Program, June 16–July 11			
<input type="checkbox"/> Summer Adventure 2			

Each child will receive a Summer Programs T-shirt.  Check box to indicate T-shirt size  
**Child Size** M  / L  **Adult Size** S  / M  / L  / XL  / XXL

**Subtotal** \_\_\_\_\_

## ADDITIONAL T-SHIRTS

**Child Size** M  / L  **Adult Size** S  / M  / L  / XL  / XXL

Qty. \_\_\_\_\_ @ \$7 \_\_\_\_\_

**TOTAL** \_\_\_\_\_

# EMERGENCY INFORMATION

Father's or guardian's name	Home phone	Cell phone
Place of business	Work phone	
Mother's or guardian's name	Home phone	Cell phone
Place of business	Work phone	
Physician's name	Phone	
Health plan		

Does your child have any chronic illness, allergy, or sensitivity to medication or food?

YES  NO

If so, please list:

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In case of emergency, if we are unable to contact you, may we take your child for emergency care? YES  NO

Please list two other people to be called in case parents cannot be reached.

Name	Phone	Relation
Name	Phone	Relation

## PERMISSION FOR THE CRDG SUMMER PROGRAMS

\_\_\_\_\_ has my permission to attend and participate in the activities of the CRDG Summer Programs 2009. I understand that such consent does not waive any legal rights, nor does it release the University of Hawai'i at Mānoa or any employee or agent from liability for negligence.

Signature of parent or guardian

Date