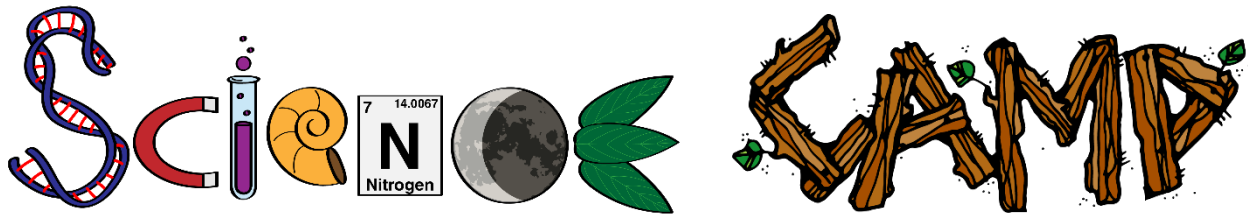


6th Annual Bishop McDevitt



Program Description

Bishop McDevitt High School is proudly hosting its 6th Annual Science Camp during the 2017 summer! Camp will run for four days. Students eligible to attend the camp must be currently enrolled in 4th grade through 7th grade (students that will be entering grades 5-8 this fall). Our Science Camp is designed to improve the science, technology, engineering, and mathematics (STEM) in young students by creating challenging academic lessons and projects in an environment that is fun and exciting. The camp will run each day from 9am – 3pm. Transportation will not be provided, and children attending must bring their own lunch and drink. Due to the popularity of camp, we ask that you please register early since camp is limited to the first 100 campers to register.

- 1.) Camp will run **June 12-15** from 9am – 3pm. Each day will focus on a different field of science: biology, earth and space, ecology, and physical science. Projects and activities will cover a broad range of concepts from these fields and will teach students to use the engineering design process on various projects.
- 2.) The cost of the camp is \$100 dollars.
- 3.) Checks should be made payable to Bishop McDevitt High School.

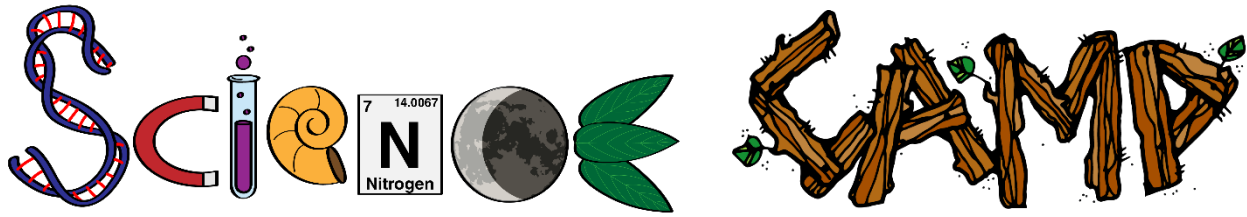
If you have any questions, feel free to contact Michelle Corrigan at Bishop McDevitt High School via email using the following address: mcorrigan@bishopmcdevitt.org

**Please return this form to Bishop McDevitt High School by
June 2nd, 2017.**

Bishop McDevitt High School
Attn: Mrs. Michelle Corrigan
1 Crusader Way
Harrisburg, PA 17111

Any registrations received after June 2nd will be subject to a \$10 dollar late registration fee and will not guarantee a T-shirt.

6th Annual Bishop McDevitt



June 12-15, 2017 (9:00am-3:00pm)

Bishop McDevitt High School

1 Crusader Way

Harrisburg, PA 17111

\$100 Registration Fee

Registration Deadline is June 2nd 2017

Student Information		
Student Last Name	First Name	Middle Initial
Permanent Home Address		
City	State	ZIP Code
Date of Birth	Name of School	
Academic level as of fall 2016: 4 th ___ 5 th ___ 6 th ___ 7 th ___ 8 th ___		
Has the student previously attended this camp? Yes ___ No ___		
Gender: Male ___ Female ___		T-shirt Size: _____
Parent Information		
Parent/Guardian Last Name		Parent/Guardian Last Name
Telephone Number		Alternate Telephone Number
e-mail address		
Emergency Contact (other than parent) Last Name		First Name
Telephone Number		Alternate Telephone Number
Relationship to student		
Special Needs or Accommodations		
Please list any physical, academic, or other accommodations that your child may require in the classroom or lab.		
Please list any known health problems your child has.		
Please list any prescribed medication that your child may require in the classroom or lab.		
Please list any dietary needs or restrictions for your child.		

remember to print and submit your registration form