

**Camp XPLORE! Filmmaking, Video Editing & Visual Media Arts Camps
for Sr. High & Jr. High – Summer 2009 Registration Form**
(Please print clearly)

Student Name	<input type="checkbox"/> Male <input type="checkbox"/> Female
Student Social Sec. # *	
Birthdate *	
CLC ID (if known)	Email Address:
Parent/Guardian	Relationship to Student:
Address	
City/State/Zip	County:
Phone Number, home	() -
School Attended	Grade Level Fall 2009:
Emergency Contact Name	Ph:() Relationship to Student:
Emergency (optional)	<input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black, Non-Hispanic <input type="checkbox"/> White, Non-Hispanic <input type="checkbox"/> Non-Resident, Alien

**Please check classes requested.
GLC-Grayslake**

Class #	Class Title	Location	Date	Time	Fee
___ 9284	Dig. Filmmaking Sr. High	GLC	June 15-26, M-F	9:30AM-12:30PM	\$ 299
___ 9285	Video Editing Sr. High	GLC	June 15-26, M-F	1:00PM- 4:00PM	\$ 299
___ 9286	VDO Editing Ext. Sr. High.	GLC	June 29-July 2, M-R	1:00PM- 4:00PM	\$ 119
___ 9288	Dig. Filmmaking Jr. High	GLC	June 15-26, M-F	9:30AM-12:30PM	\$ 299
___ 9289	Visual Media Arts Jr. High	GLC	June 15-26, M-F	1:00PM- 4:00PM	\$ 299
___ 9290	Visual Media Arts Ext. Jr. High	GLC	June 29-July 2, M-R	9:30AM-12:30PM	\$ 119
	Total				\$

Parental agreement: I have provided an emergency contact name and phone number. I understand that payment is due at time of registration. I agree to pay the fees for the classes for which I've registered my child *unless I formally withdraw my student by faxing a note of cancellation to 847-543-3653 by noon, 7 days before the camp start date.*

Parent's Signature (required) _____ **Date** _____

Credit Card Information:

Name as it appears on card: _____

Type of Card: Visa MC Amer. Express Card Number _____

Cardholder's Signature _____ **Exp. Date** _____

Submit registration form & fees by Fax or Mail
(Please allow at least one week for mail-in registration.)
Mail to: College of Lake County
 Ctr. for Personal Enrich. - Camp Xplore!
 19351 W. Washington St.
 Grayslake, IL 60030
Or Fax to 847-543-3653

Camp XPLORE!
 at College of Lake County
Where Kids Go to College



OFFICE USE ONLY: PS: ___ No match ___ No service ind. ___ Serv. Ind. Date Enrolled _____ Comments: _____
 DIVISION: Late Registration approved: _____ Section change from _____ to _____
 Date Rec'd: _____ Time: _____ By: _____ Phone Conf: _____ By: _____ Sent to Admissions: _____