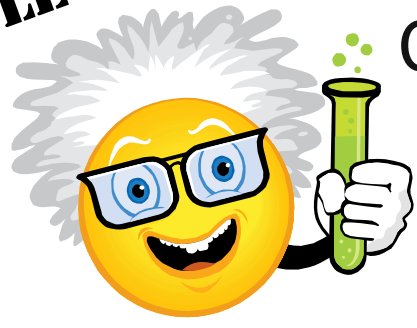


SAMPLE ONLY

SAMPLE ONLY



Our group is having an Educational Day at the

# AKRON FOSSILS & SCIENCE CENTER®

April 20, 2013  
10 a.m. - 3 p.m.  
Cost: \$18\*



For girl scout **Brownies**

Sponsored by:  
Girl Scout Troop 16890



**Some of Our Wacky Educational Science Fun for the day:**

- The Chemical Reactions with Balloon Blasting
- Surface Tension
- Color Collusion
- Toxic Goo and Ice Bubbling
- Soaping the Scientific Method
  - Motion, Propulsion, and Lots of Notions



**Approximate Schedule:**

- 10 a.m. *Check In*
- 10:15 a.m. - 12 p.m. *Learning Stations and Group Tour*
- 12 p.m. - 1:15 p.m. *Lunch*
- 1:15 p.m. - 3 p.m. *Learning Station and Group Tour*

**\*Chaperones not participating in the activities pay the regular group rate.**

**\*Siblings that participate in the activities need to be counted toward the total amount of participants and pay the full price.**

**What should we bring?**  
A packed lunch with a drink. Extra snacks and drinks may be purchased there in the gift shop.

**What should we expect?**  
A whole lot of good science fun and learning while meeting our badge requirements!



SAMPLE ONLY

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Group Name: \_\_\_\_\_  
(for quick reference)

Transaction Code: \_\_\_\_\_  
(for office staff)

# EDUCATIONAL DAY

## PARTICIPANT REGISTRATION FORM

Participant's Name(s): \_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

E-mail Address : \_\_\_\_\_

Date(s) of Birth: \_\_\_\_\_

Age(s) (while attending): \_\_\_\_\_

Grade(s) in School: \_\_\_\_\_

### PARENTS PLEASE SIGN

I, the undersigned parent/guardian of this minor child(ren), give permission for them to participate in the Educational Day. I give permission for my child(ren)'s picture(s) to be taken to be used on the website or in program publications. I hereby give permission for the adult bearer of this document or a photocopy thereof to give consent for emergency medical treatment by a licensed physician in the case of an emergency.

(Sign Here) \_\_\_\_\_ Date: \_\_\_\_\_

### EDUCATIONAL DAY



Group's Sponsor: **GIRL SCOUT TROUP 16890**



Group's Badge Goal: **SCIENCE IN ACTION**

Date: **APRIL 20, 2013**  
Contact Info: **tp16890@neo.rr.com**  
**OR**  
**SANDY Belby (330) 555-5165**



**PLEASE NOTE:**  
All registrations are final and non-refundable.

### PAYMENT

Registration Deadline: \_\_\_\_\_

- Participant(s): # \_\_\_\_\_ x \$18 = \_\_\_\_\_
- Chaperone(s): # \_\_\_\_\_ x \$ \_\_\_\_\_ = \_\_\_\_\_

Total amount enclosed:

\$

Please make checks payable to Akron Fossils & Science Center  
Payments can be made with Visa, MasterCard and Discover the day of the event or by calling the Science Center at (330) 665-DINO (3466)



### HEALTH AND PARENTS CONSENT FORM

A Parent's Name: \_\_\_\_\_

A Parent's Phone Number: \_\_\_\_\_

In case of an emergency, whom should we notify if we cannot reach you?

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Emergency phone number \_\_\_\_\_

Are there any allergies or other physical needs/limitations that we should be aware of?

\_\_\_\_\_  
\_\_\_\_\_

