



**Arkansas Outdoor School
SEEK 2012-13 Registration Form**
(Please fill out a form for each student)

Registration is \$50.00 per child - make check payable to Cooperative Extension Service

Parent/Guardian Names _____

Circle one: My child will bring lunch My child will buy lunch (\$82.50 for 12 weeks)

Grade for 2012-13 (circle) 1st 2nd 3rd/4th 5th/6th 7th/8th Biology (Tuesday only)
Nature Mapping (Grades 8 – 12, Friday only)
The SEEK Squad (Grades 5 & 6, Thursday only Technology class)

Day attending SEEK: (circle one) Tuesday Wednesday Thursday Friday

Student Name _____
(Last) (First) (Middle Initial)

Age and Date of Birth _____ **Male** **Female**

Mailing Address _____

County _____

E-mail Address _____

Home Phone Number (please include area code) _____

Cell phone number (please include area code) _____

A copy of our insurance card is attached (front & back) YES NO

_____ **Date** _____

PARENT/GUARDIAN SIGNATURE

4-H Center Programs
Arkansas 4-H Center, #1 Four-H Way
Little Rock AR 72223, 501-821-6884