<table>
<thead>
<tr>
<th>STUDENT INFORMATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student last name:</td>
</tr>
<tr>
<td>Mailing address (will be sending letters out):</td>
</tr>
<tr>
<td>City, State ZIP code:</td>
</tr>
<tr>
<td>Date of birth Month/Date/Year (e.g., 11/23/1985)</td>
</tr>
<tr>
<td>Gender: [ ] Female  [ ] Male  Adult T-Shirt Size: [ ] X-Small [ ] Small [ ] Medium [ ] Large [ ] XL</td>
</tr>
<tr>
<td>Name of school 2012-2013:</td>
</tr>
<tr>
<td>Academic level [ ] 5th [ ] 6th [ ] 7th [ ] 8th</td>
</tr>
<tr>
<td>Has the student previously attended SEMAA? [ ] No [ ] Yes If yes, how many previous sessions?</td>
</tr>
</tbody>
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✓ Please Check only one (one camp per applicant) Camps are FREE!

- Camp 2: June 3-7 FULL
- Camp 3: June 10-14 FULL
- Camp 4: June 10-14 6-8th FULL
- Camp 5: June 17-21 7th-8th FULL
- Camp 6: June 17-21 6-8th grades FULL
- Family Camp: Saturday, June 22 FULL

- Camp 7: June 24-28 5th Grade Only/completed by May 2013 WEDO Robotics (8:30 am-11:30 am)
  Students develop team building skills as they work to build and program a LEGO zoo: flapping birds, roaring lions, hungry alligators, drumming monkeys, and a whole lot more. Students must have completed the 5th grade.

- Camp 8: June 24-28 5th Grade Only/completed by May 2013 Reverse Engineering
  Have you ever wanted to take things apart? You will learn how to take wind-up toys apart and put them back together. You will also be opening up all sorts of broken electronics to see what is inside. Bring broken electronics so we can dissect them!
**PARENT INFORMATION**

<table>
<thead>
<tr>
<th>Parent/guardian last name:</th>
<th>Parent/guardian first name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone no.: ( )</td>
<td>Alternate telephone no.: ( )</td>
</tr>
<tr>
<td>Permanent e-mail address (optional):</td>
<td>Alternate e-mail address (optional):</td>
</tr>
</tbody>
</table>

**Emergency contact (other than parent)**

<table>
<thead>
<tr>
<th>Last name:</th>
<th>First name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Telephone no.: ( )</td>
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</tr>
</tbody>
</table>

**Relationship to student:**

**SPECIAL NEEDS or ACCOMMODATIONS (Use back of page if more room needed)**

Please list any physical, academic, or other accommodations that your child may require in the classroom or lab.

Please list any known health problems (allergies, diabetes, asthma, epilepsy, heart trouble, etc.) your child has.

Please list any dietary needs or restrictions for your child.

**ADDITIONAL INFORMATION (Optional)**

To determine which members of each ethnic/racial group are reached by this program, NASA requests the information below. Submission of this information is **VOLUNTARY** and is not a criterion for acceptance into the program.

**Student ethnic background** (check appropriate box)

- [ ] American Indian/Alaska Native
- [ ] Asian
- [ ] Black/African-American
- [ ] Hispanic/Latino(a)
- [ ] Native Hawaiian/Pacific Islander
- [ ] White (Non-Hispanic)
- [ ] Other

**Does the student qualify for free or reduced price lunch?** [ ] Yes [ ] No

**How did you hear about SEMAA?** (check all that apply)

- [ ] Classroom visit
- [ ] Flyer/brochure
- [ ] Magazine
- [ ] Newspaper
- [ ] Radio
- [ ] Religious Institution
- [ ] Student’s school
- [ ] Television
- [ ] Word of mouth
- [ ] Other (please specify):

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I, ____________________________________________________________, (Parent/Guardian), do hereby release and discharge National Aeronautics and Space Administration (NASA), the National SEMAA Office, this SEMAA site, members, administrators and agents from any and all claims, present and future, known and unknown, due to, or arising in any manner from, my child’s participation in the project or related activities sponsored by SEMAA. I have read or someone from the SEMAA project has read and explained the information contained in this form to me. I willingly agree and give my consent to let SEMAA enter data about my child and me into its computer information system. I hereby grant to the National Aeronautics and Space Administration (NASA) and others acting on its behalf, the right to record my child and his/her voice using audio, photographic, video, or other such techniques; to include my child’s name, likeness, voice and biographical material in connection with these recordings; to use, reproduce, distribute, and exhibit such recordings in any and all media throughout the world without limitation; and to authorize others to do so, for any purpose which NASA and those acting pursuant to its authority, deem appropriate. I hereby waive all rights of any nature in such recording(s) and the exhibition thereof. It is understood that this grant is provided at no cost to the Government and that no compensation of any kind shall be due or expected.

In case of an emergency, consent is granted to the staff of SEMAA to provide medical services through the appropriate medical facilities and/or medical service providers to my child, ____________________________________________________________

Parent/guardian name (print): ____________________________________________________________

Parent/guardian signature: __________________________ Date: __________________________

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Please **FAX, MAIL or Email** the completed summer application to the SEMAA Office.

Ligia Ford, NMSU Box 30001, MSC 3R, Las Cruces, NM 88003 ligios@nmsu.edu Tel. 646.7524 Fax: 646-7304