

S.T.E.M. Merit Badge Registration Form

3400 Walsh Parkway Suite 228, Fayetteville, N.C. 28311 (910-363-0198)

Student Name			
Name of School	Town:	Grade Level:	
Home Address			Home Phone
Parent/Guardian Name	e		
Work#	Cell#	Email	
Emergency Contact Na	ame		
Cell#	Phone		
*****	*****	*****	*****
Please check if applica	ıble:		
	sary for my child to take A		
My child carrie	s an EpiPen for eed to carry an inhaler.		allergy.
My child will n	eed to carry an inhaler.		

Health issues we need to be aware of: Include all allergies

Medical Waiver:

I hereby authorize the personnel in charge of this program to obtain medical care and/or hospitalization should illness or accident occur while my child is engaged in this program. I accept the responsibility for payment of any medical expenses. We release and hold harmless the staff and volunteers of STEMERALD City LLC from any liability and/or responsibility for any damages or injuries sustained by our child while under your care, not caused by the lack of due care by the STEMERALD City LLC, its agents, volunteers or employees duly authorized.

Liability Waiver:

As parent/guardian of the above named individual, I hereby absolve all coaches, administrators and participants in this program from all liability and will not hold them responsible for any injury incurred during session.

Photo Release Form for Minors (if under 18)

_____STEMERALD City LLC has my permission to use my or my child's photograph publically to promote STEM programs by STEMERALD City LLC. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Photo Release Form for Adults

_____STEMERALD City LLC has my permission to use my photograph publically to promote STEM programs by STEMERALD City LLC. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

STEM Merit Badges

_____I understand that the STEM Merit Badge sessions are instructor led group sessions. Sessions can only be cancelled with at least a 24 hour written notice. There are no refunds once payment has been received. Each session will last 4 hours.

My Child will attend the following camp(s): Circle the applicable Badge(s).

Animation | Chemistry | Composite Materials | Digital Technology | Drafting | Electricity | Electronics | Energy | Engineering | Environmental Science Exploration | Fish and Wildlife Management | Game Design | Gardening | Geocaching | Geology | Graphic Arts | Inventing Mining in Society | Model Design and Building | Nature | Nuclear Science | Plant Science | Programming | Reptile & Amphibian Study | Robotics Soil & Water Conservation | Sculpture | Space Exploration | Sustainability | Weather

Parent/Guardian /Student Signature_____

Date____

Email (print clearly)_____