Fernbank Science Center
Science Night Out Registration Form

Please print or duplicate this brief form (a separate one for each child, please) and include a check payable to "Fernbank Science Center LINKS" in the amount of $20 per child.

Date of Science Night Out Program (Please circle a date below):

- January 20
- February 17
- April 14
- May 5

Child’s Name: ____________________________________________________________

Grade Level: ____________________  School: ________________________________

Parent’s Name: __________________________________________________________

Contact Information (for evening of event):

E-mail address (for confirmation of registration): _____________________________

Home Phone: ________________  Cell Phone: _______________________________

Amount Included: ____________  Zip Code of Child’s residence: ______________

I give permission for my child, __________________________________, to be photographed during Science Night Out Activities at Fernbank Science Center. Photographs may be used by Fernbank to promote its educational programs and activities.

____________________________________________

Parent Signature