SUMMER SCIENCE CAMP FOR KIDS
AUGUST 11 - AUGUST 14
WHEELOCK PRIMARY SCHOOL
FREDONIA
Summer 2008 Camps
8:30 – 11:00
FEE: $75.00
Wheelock Primary School

Animals and Their Young
Some animal babies ride on their mother's back, some sit on their father's feet, and some never see their parents at all. From a 300-pound baby elephant, to a nest of tiny newborn mice, to a tadpole that turns into a frog, animals and their young are truly amazing. Join us as we explore some interesting parenting behaviors in the animal world through stories, games, dramatic play, craft projects, and by holding live animals.

Entering Grades K-2

The Giving Tree
Tree Homes encourages appreciation for trees and for the animals that live in tree homes. It introduces different parenting and nestling strategies, and compares the characteristics and behaviors of various tree-home animals and learn the role that trees play in all our lives.

Entering Grades K-2

Vanishing Materials
Young children have their own ideas about the "disappearance" of solid into liquid (say, sugar into tea)...that's just magic, right? Make it reappear, and that's BIG magic. But dissolving isn't really disappearing—and that may be the best magic of all. Join us as we look beyond the obvious in this series of highly involving activities on dissolving, evaporation, and crystallization in this early experience with chemistry.

Entering Grades K-2

The Outdoor World
Student scientists will examine a variety of things in the world right outside their windows. From the insects that live in and above their gardens to animals that we see (or don’t see!) around our houses this session will help these young scientists learn about the natural world. Children will collect and identify common insects, study the life cycles of nature, and examine the world around them.

Entering Grades 3-6

Crime-Fighting Super-Hero
Become a crime-fighting hero in our crime camp for junior detectives. We will analyze evidence such as footprints, fingerprints, and ink stains to solve puzzling crimes. Each day's mystery includes a story, mysterious evidence and clues to be examined. It is your chance to be a detective. Sherlock Holmes never had it this good!

Entering Grades 3-6

Roller Coasters to Rockets
What makes things go or stop? Fly or fall? Campers will learn the concepts of energy, force, and motion, and experiment with using different forces to make things go. After experimenting they will apply their knowledge by building gadgets such as roller coasters, rockets, trebuchets (rock hurlers), and other projectile-launching devices.

Entering Grades 3-6
REGISTRATION

Summer 2008 Summer Science Camps for Kids Application

Please make additional copies of the application as needed.

An * indicates required information.

___________________________________________
Student (last name, first name)*

_________________________________________________
Parent/Guardian (name)*

_________________________________________________
Address*

_________________________________________________
City*

_________________________________________________
Email*

_________________________________________________
Student Age*        Birth Date*     Grade (Fall 2008)*    Sex*

_________________________________________________
Parent/Guardian (name) Home Phone*

_________________________________________________
Parent/Guardian (name) Work Phone*

_________________________________________________
Parent/Guardian (name) Work Phone

*Required Information

- PHOTO CONSENT -
From time to time, the Institute for Research in Science Teaching (IRST) takes photographs and/or video of activities in or related to LHS. These photographs and videos are used solely in support of IRST and its educational mission. Their uses include, but are not limited to, brochures produced by IRST, our Website, and press kits sent to media outlets to promote programs at IRST. We would appreciate your cooperation in signing the following consent to all and any images of your child appearing in these photographs or videos to be used by the Institute for Research in Science Teaching.

___ I (Parent/Guardian) give my permission to have

___ I (Parent/Guardian) do not give my permission to have

(Child’s full name)

Appear in IRST publications and promotional materials. I understand (a) the images and/or recordings will be used exclusively to promote the activities of the IRST, (b) the images and/or tape recordings will be the sole property of IRST, and there will be no wages or payment of any kind for this appearance.

_____________________________________________________________
Signed     Date

Please use only ONE method of registration to avoid duplicate enrollments and charges.

Incomplete or illegible applications cannot be processed. Please use black ink: medium point pens are the most legible.

FIRST CHOICE:

Class Title* ________________________________

SECOND CHOICE:

Class Title* ________________________________

Cost $ 75.00

Please enclose appropriate remittance.

Make checks payable to:

Institute for Research in Science Teaching

Mail application to: Dr. Michael Jabot
SUNY Fredonia
21 Houghton Hall
Fredonia, NY 14063

For office use only:

Rect. # _____________   Date: __________

Amount $ _________________    By _________________
Please fill out form completely. Thank you!

Child’s Name ______________________    Date of Birth_____           Age _________ Sex ____
Name of parent/guardian ______________________________
Daytime Phone __________________

If person named above is not available in the event of an emergency, notify:
Name________________________________________
Relationship _____________________________ Phone _______________

Name of physician ______________________________________________________  Phone ____________
Insurance Carrier _______________________________________________________  Policy #

Circle all items that apply, past OR present. Explain any you check.

ALLERGIES: (Food, medicine, insect bites, plants, latex, hyper-sensitivities, etc.)

Do you have any allergies?   o No     o Yes                                              Explain _______________________

GENERAL INFORMATION: Do you suffer from any of the following conditions? Check all that apply. Explain.

Asthma                                Diabetes
Cancer/Leukemia                 Heart Trouble
Convulsions / Seizures         Hemophilia

List any medications to be taken while at camp:

List any physical or behavioral conditions that may affect or limit full participation in camp session activities:

PERMISSION: I understand that every effort will be made to contact the adults listed above in the case of an emergency. In the event no one can be reached, I hereby give permission to the physician selected by the adult leader in charge to secure proper treatment, including hospitalization, anesthesia, surgery or injections of medication for my child (or for me, if an adult).

Signature of parent/guardian or adult ____________________________  Date ________________