



**CISD and Amarillo College *Kids'*  
College are proud to work together to  
offer summer camps for G/T students  
attending CISD!**



**Child's Information:**

School Attending: \_\_\_\_\_ Grade \_\_\_\_\_ Gender: ( ) Male ( ) Female

Social Security #: \_\_\_\_\_ Date of Birth (MM/DD/YY): \_\_\_\_\_

Name (last, first, middle initial): \_\_\_\_\_

Current Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Parent/Guardian's Information:**

Name(s): \_\_\_\_\_

Phone #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Parent email address: \_\_\_\_\_

Camps fill quickly, so please give us the top 3 choices of camps that you would like to attend. We will do our best to honor your 1st choice. We will call you when we have your student registered for a camp. If you have any questions about a camp please call (806)371-2929.

**Course ID#:**  
**(Example: 123456)**

**Course #:**  
**(Example: CHILD 1065-1001)**

**Course Title:**  
**(Example: Mad Science)**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS COMPLETE AND CORRECT.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_