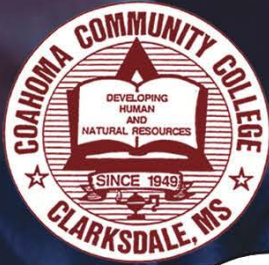


# COAHOMA COMMUNITY COLLEGE CTE S.T.E.M SUMMER



# CAMP JUNE 5-9



# 2023



**Career Technical Education**  
**2023 STEM Camp**  
(Science, Technology, Engineering, and Math)  
June 5 -9, 2023  
Grades 7th, 8th & 9th

**Career Technical Education**  
**2023 STEM Camp**  
Foundations of Mechatronics  
(Industrial Maintenance Technology)  
June 5 -9, 2023  
Grades 11th & 12th

## CAMPER AND PRIMARY CONTACT INFORMATION

Name of Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age(at the time of Camp): \_\_\_\_\_  
Name of School: \_\_\_\_\_ Grade: \_\_\_\_\_  
T-Shirt Size (circle one): **Youth:** XS SM MED LG *or* **Adult:** SM MED LG XL XXL XXXL  
Name of Parent/Guardian/Primary Contact: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone \_\_\_\_\_  
Email address you check frequently: \_\_\_\_\_  
Best way to contact you? (circle one) **Home Phone** **Cell Phone** **Email**

**EMERGENCY CONTACTS** (please provide two additional people, different from the parent/guardian listed above, who would automatically be the first person we contact)

First Contact's Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext \_\_\_\_\_

Second Contact's Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ext \_\_\_\_\_

**SAFETY INFORMATION** (please list all known conditions so we can accommodate your camper's needs)

Does your camper have any medical conditions, allergies, food allergies, or special needs the staff should know about? \_\_\_\_\_

**SPECIAL NOTE: Participants must have transportation to and from Coahoma Community College.**

*For more information, please contact Dr. Tony Newson at (662) 621-4202*