

2020 CAREER & COLLEGE CAMP (C3) REGISTRATION FORM

Registration deadline: Wednesday, April 15, 2020



Black Hawk College East Campus
26230 Black Hawk Road
Galva, IL 61434
309-854-1720

Cost: \$75

Method of Payment:

___ Check/ Money Order

___ Cash

**Online registration
and payments can be made at
www.bhc.edu/c3ateast.**

To be completed by Parent/Guardian

All information below must be provided.

Student Social Security # _____

Student Birth Date ____/____/____ Sex ___ M ___ F

Student Name _____

Mailing Address _____

City _____ State _____ Zip _____

Student Home Phone _____

Home Email Address _____

Jr./Sr. High School _____

Hispanic or Latino Ethnicity: ___ Yes ___ No

Race: (select one or more):

- ___ (20) American Indian/Alaskan Native
- ___ (10) Asian
- ___ (30) Black or African American
- ___ (70) Native Hawaiian/Pacific Islander
- ___ (50) White
- ___ (60) Choose Not to Respond

Primary Race/Ethnicity:

(select one):

- ___ (20) American Indian/Alaskan Native
- ___ (10) Asian
- ___ (30) Black or African American
- ___ (40) Hispanic or Latino
- ___ (70) Native Hawaiian/Pacific Islander
- ___ (50) White
- ___ (60) Choose Not to Respond

Grade Entering 7 8 9

Parent/Guardian Name _____

Work Phone _____ Cell Phone _____

Parent/Guardian Name _____

Work Phone _____ Cell Phone _____

Emergency Contact Name _____

Relationship _____ Phone Number _____

Does the student have any medical condition(s) or allergies which should be known? ___ Yes ___ No

(If Yes, please explain)

Please make checks payable to Black Hawk College.
Questions? Call 309-854-1720

Mail payment and registration form to:

BHC - Career & College Camp (C₃)

Attn: Administration

26230 Black Hawk Road | Galva, IL 61434

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Parent security question: What is the middle name of your oldest child? _____

I understand that it is my responsibility as a parent to provide medical insurance for accidental injuries where no negligence on the part of Black Hawk College has been demonstrated. I give permission to Black Hawk College or its designees to photograph my child while participating in the Career & College Camp (C₃) for public relations purposes. I give my child permission to access the Internet. I give permission to verify attendance in the program to my child's school.

Parent/Guardian Signature

Date

Form must be signed by Parent/Guardian before student can be registered.

T-shirt size (youth sizes): S M L XL

T-shirt size (adult sizes): S M L XL

I understand that Black Hawk College will conduct a reference check with my K-12 administration.

I want to be considered for financial assistance and have filled out the Financial Assistance Request Form on page 14 and returned it with my completed registration form.

I understand that financial assistance will be announced by Friday, May 1, 2020, and the total balance due must be paid by 5:00 p.m. Friday, May 29, 2020, to remain registered.

OFFICE USE ONLY

Check # _____ Date _____ Amt. Paid \$ _____

Vol. Form ___ Yes F/A ___ Yes F/A Amt. \$ _____

Check # _____ Date _____ Amt. Paid \$ _____

Drop Date _____ Initials _____

Reason _____