

GVS Robotics Camp
Summer 2009
Registration Form

Student Name: _____

Parent Names: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact information: _____

Please indicate the week you would like your child to attend.

_____ July 20 to July 24, 2009 Ages 9 and up 9:00 am – 3:00 pm

_____ July 27 to July 31, 2009 Ages 9 and up 9:00 am – 3:00 pm

_____ Both Weeks

\$200 per week

Please make checks payable to GVS and mail to:

**Green Valley School
389 Pembroke Street
Pembroke, NH 03275**