### APPLICATION FOR THE ENTREPRENEURSHIP SUMMER CAMP

#### Application takes 5-10 minutes to complete.

The **Entrepreneurship Summer Camp** is open to all Bradford County High School students wanting to learn and practice entrepreneurship skills.

The participants will be selected on a first come first served basis, providing all documents have been completed and submitted by the deadline.

**Deadline** to submit applications: May 1, 2024. For questions contact: Karina Rivera at <u>karina.rivera1@sfcollege.edu</u>

## **Student Information**

Student first and last name:
Preferred name:
Date of birth (dd/mm/yy):
Home address:
City, ZIP:
Phone number:
Email address:
High school name:
Grade to be completed in May 2024:
Do you need special accommodations:
T-shirt size (Adult):

# **Parent/Guardian Information**

Parent/Guardian's name:
Telephone number:
Home address:
Email address:
Place of work:
Student's known allergies (list):
Is Parent/Guardian the Emergency Contact?
If no, Emergency Contact name:
Relationship to student:
Telephone number:

# Pick-up Permission

People with parent/guard	lian permission	to pick up stude	ent.	
Name:		Pho	Phone:	
Relationship to student:				
Name:		Pho	one:	
Relationship to student: _				
How did you learn about	the Entreprene	urship Summer	Camp (check all that a	pply):
Teacher	Flyer	Radio	Newspaper	
Website	Other			

Briefly describe your motivation to participate in this Entrepreneurship Summer Camp:

### ACKNOWLEDGMENT AND SUBMISSION

By submitting this application, I certify that all information submitted in this application is complete, true, and accurate. I further certify that I commit to:

Participate in the sessions from Monday, June 10 through Friday, June 14 from 9:00am to 3:00pm, completing the five days of the Summer Camp

Collaborate with classmates to complete the group activities.

Have read and agree to follow the rules and regulations of conduct.

Student signature:	Date:
Parent/Guardian signature:	 Date: