Student Registration Form for Expanding Your Horizons
Career Conference for Girls

First Name: ___________________________

Last Name: ___________________________

Address: _____________________________

City: ________________________________

State: _______________________________ 

Zip: _________________________________

E-mail: _______________________________  

Phone Number: (____) _____-_______

Emergency Contact Name: ___________________________

Emergency Phone: (____) _____-_______

Grade: ______

School: _______________________________

I understand that by registering for the conference, I give permission to Math/Science Interchange to use pictures of me or my child taken during the conference for advertising purposes.

Signature of Parent/Guardian: ___________________________

Date: _______________________________

Please mail this form and your registration fee of $25 per student (checks can be made payable to “Math/Science Interchange” to:

EXPANDING YOUR HORIZONS
Math/Science Interchange

c/o Fran Manion

858 Third Ave.

Los Angeles, CA 90005

Telephone: 213-359-1148
E-mail: fmanion913@gmail.com

PLEASE include your email so that we can confirm your registration!