Environmental Challenge
School Registration Form
May 17, 2016

Please return this form by Wednesday, April 13, 2016 to the Outreach Office.

Fax: (315) 470-6890
Mail: SUNY-ESF, Outreach Office, Attn: Maura H. Stefl,
235 Gateway Center, 1 Forestry Drive, Syracuse, NY 13210

Call (315) 470-6817 if you have any questions.

School Name:____________________________________________________________

Teacher Contact:__________________________________Phone #_________________

Email:_______________________________________________________________

Names of Chaperones:_____________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Total number of 7th grade projects:_________Total number of Students:_________

Total number of 8th grade projects:_________Total number of Students:_________

Bus transportation information:

Estimated arrival time at Carrier Dome:______________

Estimated pick-up time at Carrier Dome:______________
Registration Form
ESF Environmental Challenge
May 17, 2016

Submit one registration for each science project (copy as many as needed)

Registration Deadline: Wednesday, April 13, 2016

Please Print Clearly

Student Name(s):_____________________________________________________________
__________________________________________________________________________

Science Teacher:_____________________________________________________________

School Name:_________________________________________________________________

Grade:_____________________

Project Title:_________________________________________________________________

Parent/guardian signature on ESF Media Release Form: YES / NO
(If NO, please ask parent/guardian to sign prior to returning form to ESF.)

Project category (please circle one)

Physical Sciences       Biology       Environmental Sciences
Earth Science           Chemistry       Technology
Social Science
Photo Release Form

Permission to Use Photograph

I grant to SUNY-ESF the right to take photographs or video of me. I authorize SUNY-ESF, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that SUNY-ESF may use such photographs or video of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content, provided by both SUNY-ESF and its collaborating partners.

I have read and understand the above:

Print name ________________________________

Home Address _________________________________________

_____________________________________________________

Phone ___________________ Email _______________________

Signature (parent or guardian’s signature if subject is a minor)

____________________________________

Date __________________