



k

2009

Personal Information:

First	Middle	Last
Age	School	Last Grade Completed
Address		
Parent/Guardian	Home Phone	Cell Phone
Parent Email Address	Emergency Contact	Emergency Phone

Registration Information:

Camps:

Payment: Cash _____ Check _____ Money Order _____ Credit Card _____
Credit Card # _____ Exp. Date: _____ Card Type: _____
Cardholder's Name: _____
Cardholder's Address _____
Signature: _____

Registration forms and Payment can be submitted by:

Mail

Academic Outreach & Continuing Education
Accounting Unit
P.O. Box 5247
1 Barr Avenue
Mississippi State, MS 39762

Campus Mail

Dixie Cartwright (9553)

Phone

Dixie Cartwright (662-325-9191)

Fax:

Dixie Cartwright (662-325-8666)

Camp confirmation letters will be mailed upon receipt of registration and payment.

For more information please contact Dixie Cartwright at dcartwright@aoce.msstate.edu