

ADULT College for Kids Registration Form



Name: _____

Class: Glass Bead Making

Address: _____ City: _____ State: _____

Email: _____

Checks should be payable to **MSUM College for Kids**:

Check/Money Order _____ VISA _____ MasterCard _____ Discover _____

_____ - _____ - _____ - _____ Exp Date: ____/____/____ Amount \$ _____

Signature of Card Holder: _____ Card Holder Zip Code _____

Release Form

- I hereby release Minnesota State University Moorhead, College for Kids, and its employees, from any liability arising out of or in any way connected with my participation in its programs activities and field trips.
- I give permission to Minnesota State University Moorhead, College for Kids, and its employees, in the event that I cannot be reached at the emergency telephone number above, to transport and admit me to a local hospital for the purpose of emergency medical treatment.
- I give permission to Minnesota State University Moorhead to photograph me for future College for Kids brochures and advertising

Signature: _____ Date: _____

Submit form with payment in one of the following ways:

Questions: 218.477.2579

1. **Via US Mail to:** College for Kids – MSUM, c/o Joy Lindell, 1104 7th Ave S., Moorhead, MN, 56563

2. **Via Fax:** 218.477.2290

3. **In person:** MSUM Biosciences – Hagen Hall 103 – The building on the corner of 11th St. S. & 6th Ave. S., Moorhead, MN 56563