

## GEMS 2007 Registration Form

**GEMS** in West Hawai'i (*Girls Exploring Math & Science*)  
Career Exploration Workshops for Fifth Grade Girls

**Register  
Early !!**  
1st Come  
1st Served

**Thursday November 15, 2007 at the Outrigger Keauhou Beach Resort**

**To Register:** The registration fee is \$20. Scholarships are available, and no girl will be turned away based on her family's inability to pay the registration fee. Please check one:

- I have enclosed the \$20 registration fee; or
- I have not enclosed the \$20 registration fee. My child is not able to participate unless she receives a scholarship.

Return this form and your check **payable to AAUW GEMS** to:

**AAUW Kona - GEMS**  
P.O. Box 390487  
Keauhou, HI 96739

**Questions?** Call Laurel Gregory at 322-4858 or  
email [gemsreg@aauwkona.org](mailto:gemsreg@aauwkona.org)

**Admittance to GEMS will be first come, first served, so register early.  
Please send your form **DIRECTLY** to GEMS, not to your school.  
Registration closes **October 12, 2007.****

Please provide the information requested below.

PRINT CLEARLY

Name \_\_\_\_\_  
Last First

Mailing Address \_\_\_\_\_  
Street Apt. Number

\_\_\_\_\_ City State Zip

Home Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

School \_\_\_\_\_ Teacher \_\_\_\_\_

**Breakfast, Lunch, and a GEMS T-shirt are included. Please Indicate your choices:**

**T-SHIRT:** Youth Size S M L XL OR Adult Size S M L XL XXL (Please circle one)

**LUNCH CHOICE:** Peanut Butter/Jelly or Tuna or Veggie Wrap (Please circle one)

**WORKSHOP CHOICES:** You will attend three different workshops during the day.

Pick your top five choices from the attached Workshop List. We will try to give you your first three choices, but space is limited. List workshops by number here:

1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_ 3<sup>rd</sup> Choice \_\_\_\_\_ 4<sup>th</sup> Choice \_\_\_\_\_ 5<sup>th</sup> Choice \_\_\_\_\_

*(Please complete both sides)*

**GEMS Survey** For each of the following statements, please check the response that most closely matches your feelings as a fifth grader:

1. I enjoy my **math** classes at school.     Very much     Somewhat     Not at all
2. I enjoy my **science** classes at school.  Very much     Somewhat     Not at all
3. My favorite classes in school are    1. \_\_\_\_\_ 2. \_\_\_\_\_
4. If I could be anything I wanted when I grow up, I would be \_\_\_\_\_

**FOR PARENTS or GUARDIANS      Please read and complete this section**

**EMERGENCY CONTACT PERSON** for the day of the event **November 15, 2007**

Name \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Relationship to student \_\_\_\_\_

**PARENTAL APPROVAL and INDEMNIFICATION AGREEMENT:** I give my permission for my daughter/ward to attend **GEMS**, and I agree that neither **AAUW-Kona Branch**, associate sponsors, donors, volunteers, any individuals providing transportation, nor the **Outrigger Keauhou Beach Resort** will be held responsible for any claims or liability arising out of my daughter's or ward's activities with **GEMS**.

**NAME OF STUDENT** \_\_\_\_\_  
Last First

**Parent/ Guardian Name (print)** \_\_\_\_\_

**Parent/ Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*Registration forms are kept on file after the event for a future follow-up survey of your child's interest in math and science. If this is **not acceptable** to you, please initial here \_\_\_ and your form will not be kept on file after the event is over.*

*Please note: a reporter may interview participants at **GEMS**. Your daughter/ward may be photographed or filmed as we document the event. These images may be published in media outlets or used by **GEMS** in published materials, including on our website, [www.aauwkona/gems](http://www.aauwkona/gems).*

**TRANSPORTATION** to and from **GEMS** is the responsibility of the parents/guardians of the attendees, and arrangements may vary from school to school. However, if you are able to provide transportation for your daughter/ward's classmates, please fill out the information below and this information will be forwarded to the correct fifth grade teacher or counselor for further action.

Volunteer Driver's Name: \_\_\_\_\_

Student's Name: \_\_\_\_\_

School: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**REFUND/SUBSTITUTION POLICY:** no refunds will be given, except if your daughter/ward is not selected to attend **GEMS**. No substitutes or unregistered girls will be admitted.