

2018 Expanding Your Horizons Group Registration Form

November 3, 2018

The registration deadline is October 30, 2018 and registration is not complete until payment is received. **Registration is first come, first served.** For group registration fill in the information below for each student. Each student will also need to complete a participation release form. Once you have all the information below filled out and have collected the participation release forms please mail the group registration form, participation release forms, and payment(s) to: **WSU – Office of University Conferences, 1845 Fairmount, Campus Box 136, Wichita, KS 67260-0136** or Fax the form to **316-978-3064**. For questions please contact the WSU Conference Office at **316-978-6493**.

School Information

School Name: _____ Address: _____

City: _____ Zip: _____ School Contact Name: _____

Phone Number: _____ E-Mail Address: _____

Registration Fee: \$15 per student Total Number of Checks Enclosed: _____ Total Amount Enclosed: _____

How many will be participating in the optional campus tour (3:00 – 4:00 p.m.)? _____ (An adult must attend the tour with the student.)

For each student please rank their top 5 selections by number under the workshop selections space. Each student will attend 3 workshops.

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| 1. Air Powered Rockets | 12. Rover Landing Zone |
| 2. All Keyed Up! | 13. Rube Goldberg Design |
| 3. Archaeology of Food | 14. Smelly Science |
| 4. Cheesy Chemistry | 15. Spooktacular Gurlz |
| 5. "Despicable Me" Money and More | 16. Start Your Own ISLAND! |
| 6. DNA Necklace | 17. The Broad Street Mystery |
| 7. Geology Rocks | 18. The Real CSI |
| 8. Greet your Imagination with Coding! | 19. The Science Behind Gaming |
| 9. Infectious Outbreak | 20. The Secret Lives of Flowers |
| 10. Light Up Your Life (Electronics) | 21. The World of Weather |
| 11. Out of This World | |

Student Name: _____ Grade: _____ Parent Name: _____
Address: _____ City: _____ Zip: _____ Home Phone: _____ Cell Phone: _____
E-Mail Address: _____ Workshop Selections: _____ T-Shirt Size (adult): **S M L XL XXL**
Dietary Restrictions: _____Vegetarian Special Accommodations: _____

Student Name: _____ Grade: _____ Parent Name: _____
Address: _____ City: _____ Zip: _____ Home Phone: _____ Cell Phone: _____
E-Mail Address: _____ Workshop Selections: _____ T-Shirt Size (adult): **S M L XL XXL**
Dietary Restrictions: _____Vegetarian Special Accommodations: _____

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