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###  BLAST DETROIT YOUTH SUMMER 2018 CODING BOOTCAMP

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| --- |
| Applicant Information |
| Last Name |  | First |  | M.I. | Date |  |
| Street Address |  | Apt # |  |
| City |  | State |  | ZIP |  |
| Phone |  | E-mail Address |  |
| Date of Birth / / / / |  |
| Do you have any allergies  | YES [ ]  | NO [ ]  | Do you need help with Math | YES [ ]  | NO [ ]  |
| Do you get along with other kids | YES [ ]  | NO [ ]  |  |  |
| Skills/Interests   |  |  |  |  |
| Availability: | 1-3 pm | 4-6pm | Mon-Fri |  |
| Parents Name: |
| Education |
| School Attend |  |  |  |
| Grade |  |  |  |  | YES [ ]  | NO [ ]  |  |  |
|  |  |  |  |
| Special ED |  |  |  |  | YES [ ]  | NO [ ]  |  |  |
|  |  |  |  |
| Foster Care |  |  |  |  | YES [ ]  | NO [ ]  |  |  |
|  |
| Parent Occupation: |
|  |
|  |
| Disclaimer and Signature |
| I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application may terminate may terminate my child from the camp  |
| Signature |  | Date |  |