

REGISTRATION FORM
Young Women's Empowerment Academy (YWEA)
University of Arizona
Saturday, April 18, 2009, 8:15 a.m. – 2:30 p.m.
Bear Down Gym, University of Arizona

Girl's information:

First Name: _____ Last Name: _____

Home address: _____

City: _____ Zip code: _____

Home phone/cell phone: _____

Email: _____

Age: *(Please circle.)* 12 13 14 15 16

School name: _____

Grade in school: *(Please circle.)* 6 7 8 9 10 11

Are accommodations needed? If so, please describe (wheelchair access, interpreter, etc.)

Please indicate if a vegetarian lunch is desired

Vegetarian Meal Requested

Will the participant will be walking, riding a bicycle or taking public transportation to or from the event? *(Please circle.)* YES NO

Who will pick up this participant? *(Participant will be allowed to leave ONLY with a person who is named here. Please print clearly.)*

Name of person: _____ Phone number: _____

Name of person: _____ Phone number: _____

Name of person: _____ Phone number: _____

FAX application to: (520) 621-8248

Or Mail to: Kim Menezes

CSW Administrative Coordinator

Department of Chemistry

1306 E. University Blvd.

Tucson, AZ 85721-0041

Your registration will be confirmed by mail, phone or email.

If you have questions, contact Alison Greene 520-295-9339 (ext. 206) or Gretchen Gibbs 520-626-5936.