Register for Futures Forward 2023

* **Online:** Go to [www.nwfsc.edu/k12](http://www.nwfsc.edu/k12). Follow the link for registration, complete all forms and submit.
* **Mail:** Complete form below. Mail this registration form with check payment to NWFSC Futures Forward, 100 College Blvd E, Niceville, FL 32578. Please submit one registration form per student.

**STUDENT INFORMATION**

|  |  |  |
| --- | --- | --- |
| Student Last Name: | Student First Name: | Middle Name: |
| Date of Birth: | Grade Entering: | Gender: |

Check one:

* New to Northwest Florida State College Programs
* Returning Student. Please provide NWFSC ID#: N\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (if known)

**CAMP SELECTION.** Click here to view [Futures Forward brochure](https://www.nwfsc.edu/wp-content/uploads/2022/04/Futures-Forward-Brochure.pdf)

* Session 1: June 5 – June 8

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Camp** | **Location** | **Fee** |
|  | Scrubs Camp | Fort Walton Beach Campus | $ 100 |
|  | Welding Camp | **Niceville Campus** | $ 100 |
|  | Amazon Web Services Academy Cloud Foundations | **Niceville Campus** | $ 100 |
|  | Public Safety Camp | Niceville Campus | $ 100 |
|  | Poetry of Place: Creative Writing | Niceville Campus | $100 |
|  | Take Flight: Aviation | Aviation Center of Excellence, Bob Sikes Airport, Crestview | $100 |

* Session 2: June 12 – June 15

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Camp** | **Location** | **Fee** |
|  | Marine Science: Dive into the Underwater World | Niceville Campus | $ 100 |
|  | Chautauqua Carpenters | Chautauqua Center, DeFuniak Campus | $ 100 |
|  | Play is the Thing! Playwriting Workshop | **Niceville Campus** | $ 100 |
|  | ESports: Extreme Gaming | Niceville Campus | $ 100 |

* Session 3: June 19 – June 22

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Camp** | **Location** | **Fee** |
|  | Marine Science: Dive into the Underwater World | Niceville Campus | $ 100 |
|  | ESports: Extreme Gaming | **Niceville Campus** | $ 100 |

*All Camp Sessions are Monday to Thursday from 9:00 A.M. to 12:00 P.M. Vending machine available in all campuses and centers.*

**PARENT INFORMATION**

|  |  |  |
| --- | --- | --- |
| Parent Last Name: | Parent First Name: | Phone: |
| Address Street: | City, State, Zip: | Email: |

**Medical Information**

Please list known allergies, current medications and special medical conditions. If no known allergies please put “none”. Futures Forward staff will not be responsible for dispensing medications to students. Please make arrangements if medications are required during camp hours. If the student will carry their own medication and/or inhaler, Epipen, etc., please note here.

|  |
| --- |
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**Permission to Use Photograph and/or other Personal Information:** I give Northwest Florida State College the absolute and irrevocable right to use my child’s photograph(s) as recorded on film, video or other medium, and to identify him/her by name, if deemed appropriate by the college, in all forms, manner and media, including but not limited to, display, illustration, advertising, promotion, electronic transmission for other college purposes. For these purposes, I relinquish my personal rights under the Family Educational Rights and Privacy Laws and release NWF State College from any liability for the aforesaid use. I understand that said photograph(s) shall be the sole property of NWF State College and may be copyrighted in its own name or any other name it may choose. Yes No

**TRANSPORTATION**

As a parent/guardian of above named student, I grant permission and authorize my child to following transportation method:

Check all that apply:

* Student driver – student permitted to drive to and from Futures Forward camp.
* Carpool – student permitted to ride with other students/siblings.
* Pick-up – student can leave with authorized individuals

CARPOOL CONTACT

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AUTHORIZED PICK-UP PERSON

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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Parent/Guardian Signature Date