

**Fernbank Science Center  
Science Night Out Registration form**

Please print or duplicate this brief form (a separate one for each child, please) and include check payable to "Fernbank Science Center LINKS" in the amount of \$20 per child.

**Date of Science Night Out Program:** \_\_\_\_\_

**Child's name:** \_\_\_\_\_

**Grade level:** \_\_\_\_\_

**School:** \_\_\_\_\_

**Parent's Name:** \_\_\_\_\_

**Contact Information (for evening ):** \_\_\_\_\_

**E-mail address (for confirmation of registration):** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Amount:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

*I give permission for my child, \_\_\_\_\_, to be photographed during Science Night Out Activities at Fernbank Science Center. Photographs may be used by Fernbank to promote its educational programs and activities.*

\_\_\_\_\_  
*Parent Signature*