

**Trine University Technology Center**  
498 E. Harcourt Road, Angola, IN 46703  
Phone: 260.624.2420 x101—Fax: 260.624.2380

## **LEGO Summer Camp Registration Form**

### **CAMPER INFORMATION:**

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Parent or Guardian Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Phone #:** \_\_\_\_\_ **Day or Cell Phone #:** \_\_\_\_\_

### **CLASS INFORMATION:**

**Class Title:** \_\_\_\_\_ **Camp #:** \_\_\_\_\_

**Class Date:** \_\_\_\_\_ **Cost:** \$80.00 \_\_\_\_\_

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### **PAYMENT INFORMATION:**

*- Payment must be made at time of registration -*

**Form of Payment:**    Check        Visa        MasterCard        Discover  
(Please Choose One)

**Card Number:** \_\_\_\_\_ **V-Code:** \_\_\_\_\_

**Name on Card:** \_\_\_\_\_ **Expiration:** \_\_\_\_\_

**Address of Cardholder:** \_\_\_\_\_  
(If different than above)

**Signature:** \_\_\_\_\_

*\*Please Note:* All credit card information is destroyed after processing

**Please fax or mail the bottom portion with your payment to:**  
Trine University Technology Center  
498 E. Harcourt Road  
Angola, IN 46703  
Fax: 260.624.2380