



Georgia's Youth Targeting Tomorrow
STARBASE Super STEM Saturday Registration Form

Participant Information:

Last Name: _____ First Name: _____

Participant is: () Male () Female Grade (circle one): 5th 6th 7th 8th

Name of School attending: _____

E-Mail Address: _____

Mailing Address: _____

Phone Number: _____

Dates		Program	Program Selected
2/11/2017	\$30	Crime Scene Investigation	
3/18/2017	\$30	Agriculture (Ag) STEM	
4/8/2017	\$30	Rocketry	

**Payment must
 accompany
 your
 registration
 form to hold
 your seat for
 class.**

STARBASE t-shirts are available for \$10 extra.

The sizes available are adult small – 3XLg. Check by size, if you would like a t-shirt:

_____ Small _____ Med _____ Lg _____ XLg _____ 2XLg _____ 3XLg

Payment Information:

Credit Card: To charge the registration, please complete the following information:

Visa Mastercard Discover Amount of Payment: _____

Account Number: _____ Expiration Date: _____

Name on Card: _____ Today's Date: _____

Signature: _____

Cash/Check/MO: Enclosed is my payment for \$ _____. Please make checks payable to "MOA Foundation" with "STARBASE" in the remarks section.

After completing this form, please mail with requested deposit to:

STARBASE ROBINS
 at the Museum of Aviation
 P.O. Box 2469
 Warner Robins, GA 31099

You will receive an e-mail confirmation of your registration. If the requested academy is full, you will receive a full refund.