

4-H SCIENCE LAB PROGRAM REGISTRATION FORM '24-'25



One registration form per participating <u>classroom</u>, please.

Submit this registration form AFTER you've confirmed dates by phone or email.

This form <u>must</u> be on file in the Extension Office <u>before a scheduled program</u>, or the program will be cancelled.

Teacher's Name	Grade Level
School Name	
Address	
EmailPho	one FAX
Гotal # Students # Males# Fem	nales# Other
	•
Please record the number of students per category b	•
Please record the number of students per category be	# Students
Race Alaska Native, American Indian, Indigenous, o	# Students or Native American
Race Alaska Native, American Indian, Indigenous, o	# Students or Native American
Race Alaska Native, American Indian, Indigenous, of Asian Black or African American	# Students or Native American
Race Alaska Native, American Indian, Indigenous, of Asian Black or African American Native Hawaiian or the Pacific Islander	# Students or Native American
Classroom Demographics Replease record the number of students per category be record to the number of students per category be record to the number of students per category be record to the number of students per category be record to the number of students per category be record to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of students per category be recorded to the number of student	# Students or Native American

Registration Instructions:

- Call 262-741-4959 or email <u>deborah.harris@wisc.edu</u> to reserve lab dates. Exception: Wonders of Wildlife please call Kathy Tober at 262-642-5857. (If more than one teacher in your building is planning to participate in any one of these programs, please coordinate your date and time requests whenever feasible.) Understand that dates are limited, and in the case of Eggsploring Incubation, equipment is limited.
- 2. Once you have established your program date/s with the Extension staff/presenter, complete the first page of this form in its entirety. Then, complete the applicable information below.
- Return this form to: Walworth County Extension, 100 W. Walworth Street, P.O. Box 1001, Elkhorn, WI 53121. Fax: 262-741-4955. Email: deborah.harris@wisc.edu. You will be billed electronically for registration fees after you've submitted THIS registration form. Please do NOT send money until you receive a bill.

CONFIRM YOUR RESERVED LABS HERE.

Enrichment Lab	Presentation Date & Time	Total Amount Due
Eggsploring Incubation Chicken Eggs \$25 per classroom (April 22-May 16) Duck Eggs \$40 per classroom (April 22-May 23)	Chicken Eggs Duck Eggs	
Ready-Set-Dough! # Students Cost is \$2.50 per student (Available year round)	Date	
Ready-Set-Cinnamon Bread! # Students Cost is \$3.00 per student (Available year round) Limited to schools where a younger grade level is already doing Ready-Set-Dough. Most appropriate for grades 4+.	Date	
Owl Encounter # Students Cost is \$3.25 per student (Available year round)	Date	
Reduced to a Pulp Cost is \$20 per classroom (Available year round)	Date	
Wonders of Wildlife Cost is \$15 per classroom (Available year round)	Date	
From Dirty Water to Drinking Water Cost is \$20 per classroom (Available year round)	Date	
On the Technology Trail Cost is \$30 per classroom (Available mid-April thru mid-November)	Date	
Scientists Live (Recording Access)	"Check" if you plan to access recordings.	FREE
TOTAL ANTICIPATED PAYMENT: Please do not send payment now. YOU WILL BE BILLED AS SOON AS YOU SUBMIT THIS REGISTRATION FORM.	Leave this box blank.	

