

ExploreU@MMU'17

World of Technology

REGISTRATION FORM

Please circle one: Newcomer Returner Program Date: June 19-24 July 10-15 (Newcomers only)

STUDENT INFORMATION

Name _____
LAST FIRST M.I. PREFERRED FIRST NAME

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Cell Phone (____) _____

Email Address _____

School _____ Grade _____ Age _____

PARENT / GUARDIAN INFORMATION

Name _____
LAST FIRST RELATION TO STUDENT

Address _____

City _____ State _____ Zip _____

Daytime Phone (____) _____ Evening Phone (____) _____

Cell Phone (____) _____

Email Address _____

PAYMENT INFORMATION

Transamerica Scholarships for Low Income students is available. Please, include the Scholarship application form instead of check.

Program Cost: \$60.00 (Make check payable to Mount Mercy University)

Please mail completed form and check to: Mount Mercy University
ATTN: Dr. Elizabeth Kleiman
1330 Elmhurst Drive NE
Cedar Rapids, Iowa 52402-4797

QUESTIONS? NEED MORE INFORMATION?

Contact:

Dr. Elizabeth Kleiman
319-363-1323 ext. 1289
ekleiman@mtmercy.edu



Be valued.