



COCC Youth Camp Mail-In Registration Form

Payment must accompany registration. Please enclose check payable to COCC Community Learning and mail to address below.

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Student Information

Name _____

DOB (required) _____ COCC ID (if known) _____

T-Shirt Size _____ Youth/Adult (circle one) Chef Coat Size* _____

Class Title	Fee
*All students registering for a culinary camp must purchase one new chef coat for \$30. Be sure to include this in your registration total.	+ \$30.00
	Total: \$

Do you identify yourself as Hispanic/Latino? Yes No

In addition, select one or more of the following: Black or African American American Indian or Alaska Native White Asian Native Hawaiian or Other Pacific Islander Other

Parent/Guardian Information

Name _____

Daytime Phone (_____) _____ Email Address _____

Mailing Address _____

City _____ State _____ Zip _____

How did you hear about Youth Camp@COCC?

Poster/Rack card School Newsletter Postcard Mailing COCC Website Bulletin Summer Youth Activity Guide Facebook Other _____



Mailing Address: COCC Community Learning 2600 NW College Way, Bend, OR 97703
Phone 541.383.7270
Fax 541.383.7503